



# **Victim-Survivor Perspectives on Longer-Term Support After Experiencing Violence and Abuse**

**A report prepared for the Ministry of Social Development by  
The Backbone Collective, January 2020**

# Contents

Foreword .....	5
Brief Summary.....	6
Executive Summary.....	8
Background & Approach .....	25
Introduction.....	26
About The Backbone Collective.....	27
Our approach .....	27
Definitions.....	27
Survey design and distribution .....	28
Limitations .....	29
Survey sample size.....	29
Level of engagement .....	30
Survey sample demographics.....	30
Gender .....	30
Age .....	30
Ethnicity .....	31
Rainbow/LGBTQI+.....	32
Disability.....	32
Geographical location, by New Zealand Police District .....	33
Women with children .....	34
Relationship with the abuser .....	34
Gender of abuser .....	35
Relationship status.....	36
Survey results.....	38
Participants' experience of violence and abuse.....	39
Types of violence experienced .....	39
How long violence and abuse was experienced.....	40
When abuse does not stop.....	42
What helps abuse stop .....	43
Leaving.....	45
External support.....	46

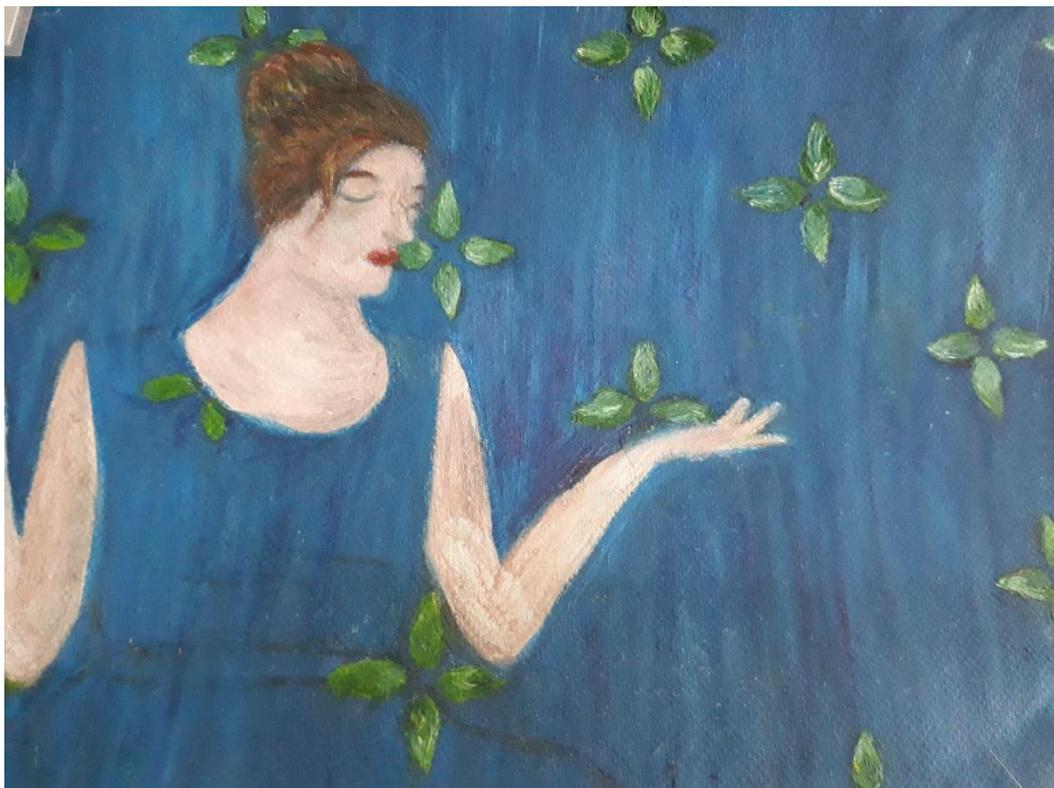
Formal systems .....	46
Personal and emotional processes .....	46
Beyond their control .....	46
Supports and services participants had used to try and get safe and recover .....	47
Informal support .....	47
Formal support.....	47
Police.....	49
When the response system works: enablers to women’s wellbeing, safety and recovery.....	51
Informal support that helps.....	51
Formal services that help .....	53
How the support was beneficial .....	55
Recovery and factors that helped .....	57
Good support from friends and family/whānau.....	59
Access to counselling and therapy.....	60
Distance from the abuser .....	60
Inner thoughts and beliefs.....	60
When the response system fails: barriers to women’s safety, recovery and wellbeing .....	62
Barriers to getting safe and recovery .....	62
Ongoing abuse .....	62
Structural system issues.....	62
The Family Court.....	62
Other state agencies .....	63
Operational issues.....	63
Lack of resources available .....	63
Life demands.....	64
Impact of abuse .....	64
Own thoughts and feelings .....	65
Society.....	65
Barriers to accessing support services .....	66
Unhelpful responses from others.....	68
Informal support .....	69
Formal Support and services .....	70
Poor response from workers .....	70

Limitations of support provided .....	72
Struggle to find the right kind of service .....	72
Inadequate provision and referral system.....	72
How can the response system be better? What women who are victim-survivors want and need from support and services .....	74
The goal – achieving wellbeing for victim-survivors and their whānau.....	74
Safety .....	78
Support.....	78
Education .....	79
Financial support.....	79
Self-care .....	79
Designing a better and safer response system .....	80
Structural changes .....	80
Support and services needed .....	81
Making services work well.....	109
Make it easier for women to engage in support and services .....	109
Service Provision and approach.....	113
Skills necessary for service providers .....	114
Specialisation .....	115
Finding out about support and services .....	117
Working with different parties .....	118
Managing complaints.....	119
Recommendations.....	120
Appendices.....	126
Appendix 1.....	127
Number of Not Applicable responses for each type of support .....	127

## Foreword

*The Backbone Collective would like to thank the Ministry of Social Development (MSD) for contracting Backbone to undertake this important project. We believe that listening to the voice of experience is the key to ensuring New Zealand's response to family violence is safe and effective. We have advocated for many years for the need for those designing, drafting and implementing policy and services to consult 'service users' (victim-survivors) about what works and what doesn't and how to better respond. We are therefore encouraged by MSD's willingness to contract with Backbone to independently gather the experiences and insights from victim-survivors to help inform the design of the Whānau Resilience programme. We hope this is the first of many projects that we can support which enable victim-survivors to share their valuable insight.*

*Backbone would also like to thank and acknowledge all the women who took part in the survey. We appreciate that it takes precious time to share your knowledge, thoughts and experiences with us. We understand that for some this may have been a distressing experience and we value your courage and commitment to helping the Government build a safer response system. We have made every effort to include your ideas and reflections in our report. We look forward to seeing how they contribute to a safer and stronger system of long-term support and services for victim-survivors throughout New Zealand.*



**Image: "Nearly Invisible" - donated to Backbone by the artist (anon)**

## Brief Summary

In 2019, the Ministry of Social Development (MSD) contracted The Backbone Collective (Backbone) to find out from people who identify as female, via an online survey, what kind of longer-term support would have helped them get safe, recover and rebuild their lives after experiencing violence and abuse either from someone with whom they had been in an intimate partner relationship or from a whānau/family member. A Backbone survey was released and was live for one month attracting 528 valid responses from women living throughout New Zealand. The majority of participants, were New Zealand European Pakeha (76%) and a further 22% identified as Māori. Most had experienced family violence from someone they had been in an intimate relationship with (86%). Nearly all the participants had experienced psychological abuse (including coercive control), nearly three quarters had suffered physical violence, just over a half experienced sexual abuse or assault and 51% said the abuser had used violence against their children (including psychological abuse and witnessing violence). The majority of abusers were male (95%).

**Victim-survivors described an incredibly long, complex, dangerous and difficult struggle to get safe in which they had very little access to resources or safe and appropriate support and often found they were powerless to stop the abuse even after they separated from the abuser.**

Although the most common reason women gave for what helped stop further abuse was that the abuser no longer had contact with them, achieving that state was impossible for many of the participants who described abuse spanning over ten years (42% of participants) regardless of their separation from the abuser. For many of the women, the responses from the system and those working in it enabled the abuser to have ongoing contact with them and therefore provided the opportunity for ongoing abuse, for example, parenting orders made in the Family Court that prevented victim-survivors from relocating or forcing them into contact in proceedings or at contact changeovers for their children etc. Women also described a lack of resources available and unsafe practice from people working in services as barriers to their safety and recovery.

Furthermore, the way in which society responds to victim-survivors has an enormous impact on their ability to get safe and recover from the violence and abuse, whether that be informal networks or formal services. Survivors may resist reaching out for help based on what they have already observed in their community. Over half of the women in the survey said they were too scared to talk to people about the abuse and 37% said they did not feel safe reaching out to support services. When they did reach out for help women were far more likely to use informal support networks (friends, family, whānau, neighbours or work colleagues) than they were to use formal support services such as specialist family violence services and more likely to access health services (65%) and the Police (60%) than use specialist family violence services (35%) or refuge (36%).

While some of the participants reported positive experiences with formal and informal support, many explained that the responses they had received had been unhelpful or in some cases made their situation worse. For example, 57% of participants said the services they reached out to had a lack of understanding about family violence. Other negative experiences included that service providers did not understand risk, used victim blaming, did not believe victim-survivors, judged them, or put them down. Although many of the women had been separated from the abuser for a lengthy period of time, only 5% of

participants indicated they were fully recovered from their experiences of violence and abuse. Women who had partially recovered described a range of factors that had been beneficial to their recovery however, formalised system level support (Police, Protection Orders, family violence services) was far less likely to be named as beneficial compared with women's own networks and resources.

The women who took part in the survey want and need support services that help keep them and their children safe. However, in order to achieve safety and therefore recovery, the barriers to safety must be removed to ensure that all parts of the system work to enable victim-survivors to access and use longer-term support.

For many of the survey participants, their sense of wellbeing and that of their whānau was deeply connected to their ability to be safe from the abuser. Wellbeing (safety) is achieved by the right support and services being available at the right time and for as long as it takes to be safe and recover. Participants stressed the need for structural system changes including reform of the Family Court, education and training for all sector workers and wider society about family and sexual violence so that they and their children can access support and services.

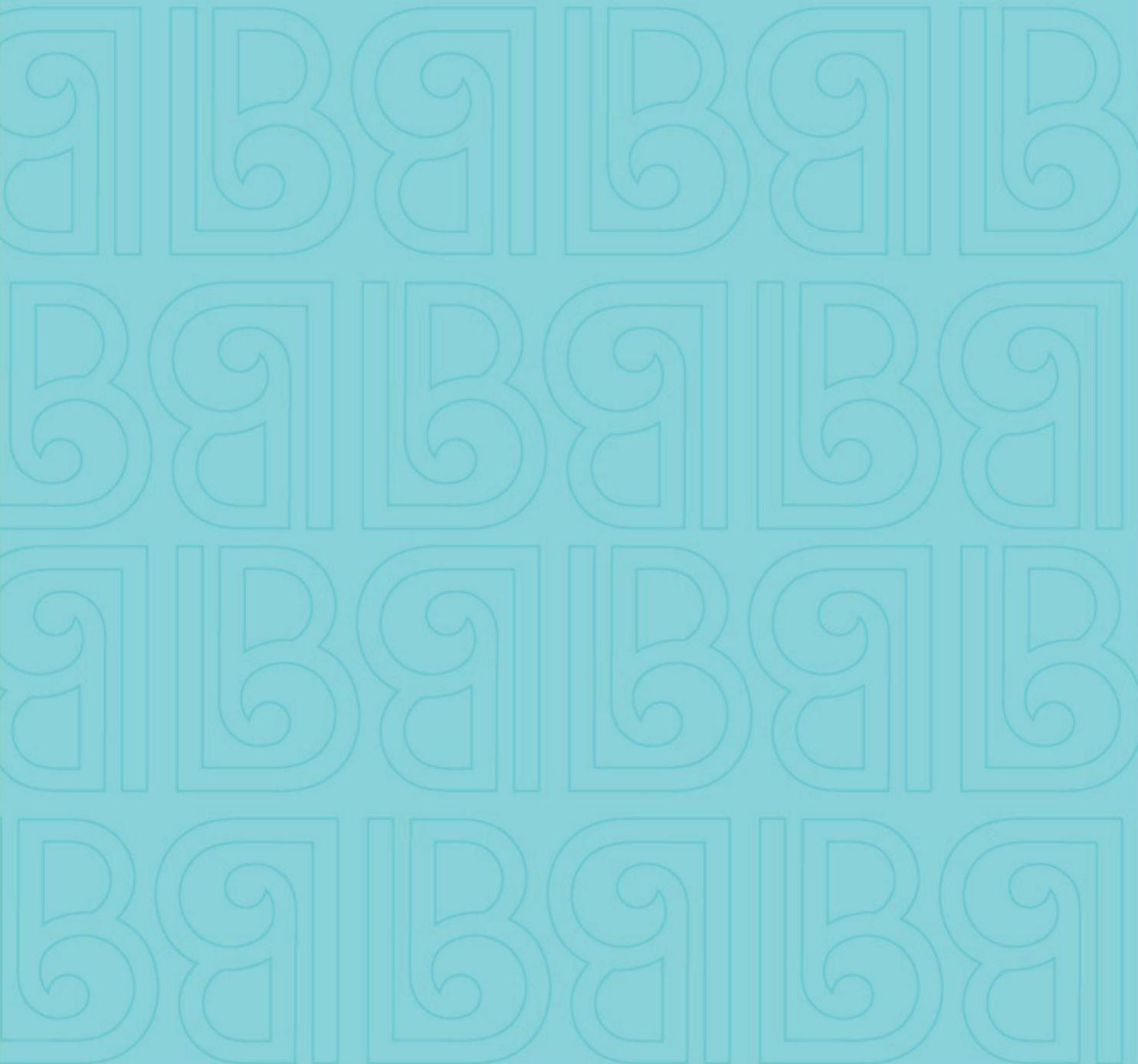
Survey participants shared a wide range of ideas about the types of support and services that should be made available for victim-survivors in New Zealand however, many of the support and services recommended do not currently exist. Therefore, planning and prioritisation, funding and development will be required by communities to ensure that the long-term support and services victim-survivors want and need are made easily available. In order of overall ranked importance, the services needed are counselling and advocacy, financial support, housing, support and services for children, health services, cultural identity supports, services for wider whānau relationships, services for the abuser and transport services.

Survey participants explained they need a victim-survivor centred response from services and shared ideas relating to cost, availability, design, the skill required by workers and marketing of support and services. Overall, participants expect a specialist work force to be well trained and available to safely respond to family violence in a way that understands dynamic risk factors, keeps information private and secure, ensures that workers are monitored and all work to ensure victim safety. It is important that workers understand the dynamics of power and control (psychological abuse), and the impact of abuse including trauma, in order to safely engage with victim-survivors.

The survey responses show that urgent changes are required to the way New Zealand responds to women who are victim-survivors of family violence in order to support them and their whānau towards safety and recovery.

A significant finding from the survey is how few participants had sought support from specialist family violence services. Therefore, it is extremely important to gather experiences and insights regarding service design and implementation from victim-survivors themselves rather than relying on service providers to recommend what kinds of support and services are needed. Backbone makes thirteen recommendations based on the survey findings. Please refer to the 'Recommendations' section of the report for detail regarding how the recommendations can be achieved.

# Executive Summary



## Executive summary

In 2018, The Ministry of Social Development (MSD) commenced a work programme called Whānau Resilience. The aim of this programme is 'to create strong, resilient communities where whānau are supported to live violence free and to eliminate violence for the next generation.'<sup>1</sup>

To help inform the development of longer-term support services in communities throughout New Zealand, MSD contracted The Backbone Collective (Backbone) to find out from people who identify as female, via an online survey, what kind of longer-term support would have helped them get safe, recover and rebuild their lives after experiencing violence and abuse.

The importance of incorporating the voice of experience into service design and delivery has been discussed both internationally and in New Zealand for some time. The approach taken by Backbone on this project provides a very positive example of how service user feedback can be undertaken safely and in a meaningful way. Backbone was able to reach many women and gather extensive ideas and experiences. The following section summarises the findings from the Whānau Resilience survey.

### Survey design and build, responses and participants

The purpose of the Backbone survey was to find out from people who identify as female, are aged 16+ and have experienced family violence in an intimate personal relationship or from a whānau/family member what kind of longer-term support would have helped them get safe, recover and rebuild their lives after experiencing violence and abuse. The survey was designed to find out more about:

- what is important to victim-survivors and their whānau
- what support they have tried in the past and what difference it made to them and their whānau
- what support they think should be made available that would make a difference to victim-survivors to enable them to get safe, recover and rebuild their lives.

After consultation with MSD and testing with four victim-survivors the Whānau Resilience survey was released on 1 November 2019 and was open for four weeks, closing on 1 December 2020.

In total 528 valid responses were received from people living throughout New Zealand who had all experienced family violence.<sup>2</sup> The majority of participants,

- Were New Zealand European Pakeha (76%) and 22% identified as Māori.

---

<sup>1</sup> <https://www.msd.govt.nz/about-msd-and-our-work/work-programmes/initiatives/family-and-sexual-violence/whānau-resilience-long-term-healing-and-recovery-services.html>

<sup>2</sup> 99% of participants identified as female and 1% identified as gender diverse. We therefore refer to participants as 'women' in many parts of this report.

- Had experienced family violence from someone they had been in an intimate relationship with (86%).
- Were aged between 36 and 55 (62%).
- Were mothers (84%).
- Did not identify with the Rainbow LGBTQI+ community (92%).
- Did not live with a disability (79%).

The participants who had experienced violence and abuse from someone they had been in an intimate relationship with were most likely to have separated from the abuser and the majority of these women had separated for five years or more.

## Participants' experiences of violence and abuse

All of the participants had experienced some type of family violence. Nearly all had experienced psychological abuse (including coercive control), nearly three quarters had suffered physical violence, just over a half experienced sexual abuse or assault and 51% told us the abuser had used violence against their children (including psychological abuse and witnessing violence).

The majority of abusers were male (95%) although the percentage of abusers who were female was greater among responses where the violence and abuse was perpetrated by a family/whānau member than when perpetrated by someone the victim-survivor had been in an intimate relationship with.

Of extreme significance is that these victim-survivors experienced violence and abuse for long periods of time: single one-off events were not their experience regardless of the context of the relationship which the abuse happened in. In fact, 42% had experienced family violence for ten years or more. We heard that for many women the abuse does not stop when they separate from the abuser and the impact of the violence and abuse is ongoing for them and their children - 47% of participants told us the abuse had not stopped even though many of the women had been separated for five years or more. These women described ongoing abuse that was psychological, physical, and/or included violence against their children.

The most common reason women gave for what had helped stop further abuse was that the abuser no longer had contact with them either because she had moved to another area or was in hiding, she had a Protection Order, the abuser had died or was in jail. However, in most cases the victim-survivor had little control over having no contact with the abuser as the abuser chose to continue the abuse regardless of a physical separation from them (unless the abuser died or was in jail). For many participants, parenting orders made in the Family Court made it impossible to have no contact as they are prevented from relocating or forced into contact in proceedings or at contact changeovers etc.

Only 5% of participants thought that the reason the abuse had stopped was because the abuser had attended a stopping violence programme. This finding has important significance for the development of services and support for victim-survivors as historically if women reach out to the formal system for help (apply for Protection Orders, report the violence and abuse to Police) then one of the main responses from the system is to refer the abuser to attend a stopping violence programme.

Many participants explained that they had little control over the abuse stopping. However, many tried to get safe by leaving the abusive relationship. Often leaving was not a straightforward quick process but involved a long-term plan and for some this involved leaving and returning on several occasions before finally getting away.

Victim-survivors in this survey were motivated and supported to leave abusive relationships through access to information, fears for their children's and their own safety and through support from whānau, friends or family violence services. Many of the participants (40%) stated that they had to escape the relationship for their own and their children's safety and worryingly 22% of these women told us that they received **no** help at all to do so. Women used a range of supports to leave the relationship including external support from counsellors or trusted friends and family, formal systems such as Protection Orders etc. and often relying on their own inner strength, survival instinct. Sometimes factors beyond their control resulted in a separation such as the abuser died or got a new partner or went to prison.

## Supports and services victim-survivors have used to try and get safe and recover

Participants shared that they had used a wide range of supports and services to try and get safe and recover including both informal and formal support. However, women were far more likely to use informal support networks (friends, family, whānau, neighbours or work colleagues) than they were to use formal support services such as specialist family violence services. And while some of the participants reported positive experiences with formal and informal support, many explained that the responses they had received had been unhelpful or in some cases made their situation worse.

**Informal support** - Participants indicated they had sought emotional and practical support and intervention with the abuser from informal support networks. However, the difference the help made was rated much higher for emotional and practical support than for intervention with the abuser highlighting that informal support networks are unlikely to be specialised in engaging with abusers effectively, are not well suited to providing this kind of support.

**Formal support and services** – Many participants had not accessed or used formal support services. When they had used services, it was more likely to be from a G.P, Mental Health services and other health professionals (65%) followed by Police (60%) than other types of support. Women were much less likely to indicate they had used Refuge (36%) or specialist family violence services (35%) and even less likely to use other kinds of support services like social service agencies, church support or iwi social services.

There were some differences in the use of formal support services according to women's age, ethnicity and gender of the abuser. Māori women were less likely than Tauīwi women to access refuge and family violence services, general social services and medical services, but were more likely to use Iwi social services, addiction services and church support services than Tauīwi women. Participants who had a female abuser were less likely to use any formal support services. Furthermore, participants whose abuser was female, and/or who were 25 and under were less likely to report the family violence to the police than other survey participants.

## When the response system works: enablers to women's wellbeing, safety and recovery

Women reported that informal support was helpful when it validated their experience of violence and abuse and people believed them, listened, helped with safety planning and gave them time out from the abuse. Practical support from informal networks was helpful when victim-survivors were provided with a safe place to stay, financial assistance for setting up house or moving, food and/or petrol. Helpful practical support also included support in interviews, sharing information about family violence and services and providing childcare.

The participants indicated that in many cases they had found the formal support services to be helpful (46%) while some said they had a mixed reaction- both good and bad responses (21%) and some said the service was not helpful (24%). Services more often used, such as health professionals, are not necessarily found to be the most helpful to victim-survivors. Specialist family violence services were rated as the most helpful service they used by 39% of participants. Participants said that services were helpful if they were victim-survivor centred including that they:

- Understood family violence and the abuser's tactics.
- Listened to and were directed by what the woman wanted and needed.
- Kept her information private and secure.
- Did not require her to attend meetings or sessions with the abuser.
- Put the safety of her and the children at the centre of everything.

Māori women were more likely to indicate that services were beneficial when they were culturally appropriate, provided practical support and worked with the whole whānau.

### *Recovery*

Recovery is long term goal that is often delayed in part due to the lack of protection from the abuser, a lack of support and services available and in part due to the devastating impacts their experiences have had on them emotionally, psychologically, physically and materially. Overall, more participants indicated that they were further along towards recovery than not, with 33% of participants selecting the 0 – 49 range and 67% of participants selecting the 50 -100 range.<sup>3</sup> However, only 5% of participants indicated they were fully recovered from their experience.

The ongoing nature of the abuse and the inability of victim-survivors to be able to control the contact they had with the abuser, impacted on their ability to recover. Participants who said they had recovered the least were more likely to have been separated from their abuser for five years and under, were far more likely to live with a disability, more likely to identify with the rainbow LGBTQI+ community and have children than participants who indicated they had mostly or fully recovered.

---

<sup>3</sup> With 0 being not at all recovered and 100 being fully recovered.

Furthermore, participants who were least recovered were far more likely to say that their abuser had not stopped using violence and abuse towards them. Many of these women discussed ongoing experiences of psychological abuse and stalking from the abuser post separation and many said that the abuser was using the Family Court to further abuse them.

There were many factors that women described as being beneficial to their recovery however, formalised system level support (Police, Protection Orders, family violence services) was far less likely to appear on the most beneficial list compared with women's own networks and resources. The most common kinds of beneficial support for helping participants recover from family violence were as follows;

**Good support from friends and family/whānau** -The support that participants indicated most often as being the most beneficial in their recovery was good support (empathetic, practical, nonjudgmental and enduring) from their friends, family and whānau. They explained that this kind of support often helped them feel validated, like they deserved better than the abuse and kept them safe.

**Access to counselling and therapy** -The second most popular beneficial support participants mentioned was having access to counselling, therapy, or a psychologist. This support helped them emotionally and psychologically understand, make sense of and recover from the abuse. Many women discussed how important it was that the counsellor/therapist understood family violence and trauma.

**Distance from the abuser**-Distance from the abuser had made a big impact on many women's safety and that of their children and therefore their ability to recover from the violence and abuse. For many women geographical distance was possible when they were able to relocate to other towns or countries. Some no longer had contact because the abuser had died or was in jail.

**Inner thoughts and beliefs**-A significant number of participants discussed how important their own inner thoughts, beliefs and reserves had been to their recovery. These women explained that because there was so little support available, they were forced to rely on their own determination, resilience, survival instinct and intuition, value system, strength, and belief in themselves to get safe and recover.

## When the response system fails; Barriers to women's safety, recovery and wellbeing

Women described a number of barriers that prevented them being able to get safe and recover. Most importantly, participants explained that if the abuse did not stop, they were unable to get safe which meant they could not recover. For many of the women, the responses from the system and those working in it enabled ongoing contact and therefore ongoing abuse. Therefore, unless structural system issues are remedied, having more longer-term support available will not improve the safety or recovery for these victim-survivors.

**Ongoing abuse** – Many participants said they were unable to have any control over the contact they had with the abuser which placed them (and their children) in ongoing danger

and left many feeling terrified and as if they would never be safe. This was due to the abuser's continued abuse or Family Court orders regarding care and contact of children.

**Structural system issues** – Women described a number of system issues and responses that they had encountered which forced them into contact with the abuser or were a result of poor responses that stopped them being able to get safe and get the support they needed. For many women a critical issue they faced was that the Family Court (processes and orders) was preventing them and their children from getting safe. Women described a range of practices that meant they were forced into ongoing contact with the abuser, and were therefore vulnerable to ongoing abuse. These practices included; being prevented from relocating to somewhere away from the abuser, being forced into ongoing contact via parenting orders, facing ongoing litigation instigated by the abuser, being prevented from engaging their children in support and counselling programmes and having their experiences and the risk they faced minimised by the professionals working in the Family Court.

Women also described poor responses from other state agencies including the Police, WINZ and Oranga Tamariki which made it difficult for them to get safe and recover. Sometimes the poor responses were related to operational issues which resulted in poor practice such as, breaches of privacy, unsafe responses from staff, poor information, being judged or not believed etc.

**Lack of resources available** – Participants detailed different kinds of support victim-survivors need to get safe and recover which are currently unavailable including counselling and therapy, practical help with everyday tasks, long term support, health services and safe accommodation.

**Impact of the abuse** – The financial impact of the abuse and the ongoing abuse post separation had a devastating impact for many participants resulting in poverty, debt for legal fees, homelessness, and an inability to work because of the trauma associated with the abuse.

**Own thoughts and feelings** – Participants described a range of thoughts and feelings they had which impacted on their ability to get safe and recover. These thoughts and feelings were often a result of their experience of violence and abuse such as anxiety, depression and PTSD, feeling revictimised and sensitive, feeling isolated and not trusting people anymore. Some of these women described feeling ashamed and feeling like a failure.

**Society** – Participants also discussed how the views and responses from general society can act as a barrier to victim-survivors getting safe and recovering. Many described that at a societal level there is a lack of understanding about family violence and the risk involved. These women explained that abuse is accepted and normalised in New Zealand and therefore people do not believe victim-survivors that abuse happens; this response makes women less likely to reach out for support for fear that help seeking might backfire i.e. her children might be taken away.

Women also shared a number of barriers which stopped them from accessing formal support services. The most common barrier was financial with 42% of participants who said they could not access support services because they could not pay for it. A significant number (37%) said they did not feel safe reaching out for support in case that made their situation worse. Māori women were more likely to indicate this. Others said that they did

not have support people who could accompany them to appointments, they had been told the service could not help them, the Family Court prevented them from accessing services or that they could not get time off work or services were not available where they lived.

Participants also talked about being fearful of reaching out for support because they were scared of the abuser or their community finding out and that services would not be confidential. Some said that Oranga Tamariki or the Family Court prevented their children from accessing services or explained that they or their children were too young to have been able to get to services independently or the abuser prevented children from being able to access services. Others said that they had received a poor response from the services they had approached or no service at all. Some women found it difficult to access support due to their own perception about qualifying for a service or being too ashamed to reach out.

## A poor response from support and services is a barrier to safety and recovery

Survey participants shared experiences of reaching out for support but receiving a poor or unhelpful response that impacted on their ability to get safe and recover. Unhelpful responses were experienced from informal and formal support.

***Informal support*** - Participants explained why they did not use informal support to get safe or recover. Over half of the women said they were too scared to talk to people about the abuse. One quarter said their friends and/or family were not supportive of them. Some women did not have support networks where they live. Others described that the poor understanding of the dynamics of family violence by people in the community can impact on the response the victim-survivors receive when they reach out for help, and why survivors resist reaching out based on what they have already observed in their community. Women also shared that their own internalisation of victim blaming myths had stopped them being able to talk about their experiences or that the abuser's manipulative tactics were used to discredit her and charm the people around them into thinking she was lying about the experience of violence and abuse.

***Formal support*** - Participants explained the reasons why they had found some responses from formal services unhelpful. Receiving a poor response from workers was a significant barrier for women with 57% saying the services they reached out to had a lack of understanding about family violence. Other negative experiences include that service providers did not understand risk, used victim blaming, did not believe victim-survivors, judged them, put them down, or that the service made their situation worse (less safe). Just over half of participants explained that the services said there was nothing more they could do to help even though the victim-survivor needed more help and 41% said the service did not help them get safe with 40% saying the service made their situation worse.

Some participants explained that inadequate service provision and referrals was a barrier to safety and recovery and in particular things like, limited session numbers, waitlists, no choices about services and/or services costing money. Participants said that in many cases there was not adequate service provided by the agency they approached and they were not

referred to other services who could help. These women described feeling isolated, abandoned and being forced to fend for themselves.

Some women explained that they had to struggle to find the right kind of service and it took time to find the right kind of help which was a difficult process.

## How can the response system be better? What women who are victim-survivors want and need from support and services

Survey participants indicated that their wellbeing is heavily impacted (in a negative way) by the experience of violence and abuse and therefore support from individuals and services are required to mitigate the damage and restore wellbeing (practical, psychological, emotional and spiritual).

For many of the survey participants, their sense of wellbeing and that of their whānau was deeply connected to their ability to be safe from the abuser. Therefore, wellbeing for these women depends on the response they receive from the people around them – either friends and family/whānau or professionals. Victim-survivors explained they need to be supported in a range of ways that are informed by a comprehensive understanding of family violence (the dynamics and tactics abusers use).

Wellbeing can be achieved by the right support and services being available at the right time and for as long as it takes to be safe and recover. Survey participants want to be safe from the abuser and for most of them that means having their children live with them somewhere safe where they have people supporting them who are safe and who they feel connected to, who also understand family violence and where practical support is available, with enough money to live on so that they can lead full lives without barriers imposed on them.

A common thread in participant's comments about wellbeing related to their need for a safe system response from the Family Court which would enable them and their children to relocate to get away from the abuser and a response that made their abuser accountable for the violence and abuse.

Participants shared other indicators of wellbeing including supports such as free counselling or trauma therapy, having people respond to them with love and validation, being believed, education for the whole of society about the dynamics of family violence, financial support for everyday living costs and legal costs and self-care activities such as Yoga, exercise and rest.

Maori women were more likely than Tauwiwi women to indicate that having a sense of cultural identity that values connection with whānau, hapu and iwi and that remedies for societal inequalities such as poverty, were important for their and their whānau's wellbeing.

### *Designing a better response system*

The victim-survivors who took part in the survey shared a comprehensive range of ideas about the kinds of support that could have helped them get safe, recover and rebuild their lives. The overwhelming theme that came through from the responses is the need for safe

and specialist support that is ongoing and responsive to what the victim-survivor needs. Participants stressed the need for structural system changes that must happen to remove barriers to safety and recovery and provided detail about what kinds of support and services were needed and how important they were.

Structural support and changes required include;

- Reform of the Family Court so that it responds safely and effectively when women approach it seeking protection for themselves and their children.
- Education of all workers who provide support to victim-survivors to ensure that they understand the dynamics of family violence and particularly psychological and emotional abuse.
- Education for wider society about family and sexual violence.

Support and services required ranked by survey participants in order of importance are:

1. Counselling and advocacy
2. Financial support
3. Housing
4. Support and services for children
5. Health
6. Cultural identity
7. Wider whānau relationships
8. Services for the abuser
9. Transport.

Many of the support and services recommended by survey participants do not currently exist. Therefore, planning and prioritisation, funding and development will be required by communities to ensure that the long-term support and services victim-survivors want and need are made easily available.

It is significant that counselling and advocacy services are the highest-ranking support required considering they are currently very difficult to access, are costly and there is a shortage of specialist providers (trauma therapy with family and sexual violence specialisation) and services of this nature do not currently exist in some areas or at all.

### ***Counselling and advocacy***

Counselling and advocacy services are needed to help victim-survivors cope and recover from the impact of the violence and abuse. These services should be free or heavily subsidised, provided by specialists in family and sexual violence, and be available long term whenever victim-survivors needed them. Counselling and advocacy services should include:

- Advocacy support to help victim-survivors navigate the system (particularly the Family Court), and ensure the system understood family violence and kept the safety of victims at the centre of proceedings.
- Navigators who walk the victim-survivor and her children through all the different services available and connect her with appropriate services so that she does not have to find, contact or engage with the services by herself.

- Counselling and therapy – free, affordable, no waitlists, trauma informed. Provided by family violence specialists, be ongoing for as long as needed whenever it is needed.
- Kaupapa Māori counselling and advocacy support.
- Safety family violence programmes for women – support groups and educational groups.

### ***Financial support***

Financial support was requested in response to the impact of escaping an abuser, having to set up a home from scratch and also ongoing support as women coped with sole parenting and the financial demands of running a household alone. Financial support is required for:

- Legal costs.
- Basic items (food, petrol, lawnmowing, maintenance on house).
- Study fees or any retraining for work purposes.
- Counselling and therapy (see above).
- Benefits and support that are adequate, purpose built, responsive and sensitive to victim-survivors.
- Costs associated with children.
- Accommodation.
- Medical costs.
- Financial information.
- Other activities.

### ***Housing***

Women shared their ideas for housing supports that would make a difference to victim-survivors including:

- Advocacy in the Family Court to support relocation.
- Affordable safe housing.
- Financial support with housing costs – repairs/maintenance etc.
- Better understanding of family violence by housing support workers.
- Better privacy of accommodation details.
- Legal issues relating to homes.
- Safety services – video surveillance, security and cyber experts to assess home.

### ***Support and services for children***

Participants talked about the need for support for children who had experienced violence and abuse including:

- Counselling and therapy for children.
- Advocacy for children in the Family Court and with Oranga Tamariki.
- School based support and education for children about family violence.
- Support for protective parents -affordable childcare.
- Safe supervision centres.

- Support groups for children who are victim-survivors.

### ***Health***

Some participants shared ideas about health supports that were needed including:

- Specialist mental health services for victim-survivors.
- Better understanding of family violence by health professionals.
- Health information kept private.
- Free subsidised healthcare.

### ***Cultural Identity and connection***

Some participants detailed their ideas for supports needed to support whānau connection and cultural identity including:

- Advocacy with Family Court and Oranga Tamariki to promote an understanding and appropriate response to cultural beliefs and practices.
- Culturally appropriate services.
- Education and information for family/whānau members about family violence – its impact, risk, services available and how to safely respond.
- Be able to have family/whānau as support people with them in the Family Court.
- Cultural support and education for children separated from their culture/whakapapa/whānau because of the abuse.

### ***Wider whānau /family relationships***

Some survey participants left more detailed suggestions about support for wider whānau /family relationships including:

- Support during any joint meetings with the abuser.
- Safe services (specialists in family violence) if working with wider whānau /family.
- Not be forced to have contact with the abuser if victim-survivor deems that unsafe for herself or the children.
- Safe places for access changeovers.
- Recognition that sometimes family/whānau were the abusers.
- Information for whānau/family to help them understand family violence and create a long-term safety plan.

### ***Services for the abuser***

The majority of participants explained that services for the abuser were not a priority and would not be successful. These women said that it was more important that they were focussed on their own or their children's recovery rather than the abuser's. They explained that they felt their abuser would never change their behaviour because they would not accept they were abusive, that the abuser would manipulate services and support for their own benefit and to further abuse. Some suggestions for services for the abuser included:

- Specialist individual counselling for the abuser.

- Service to evaluate risk behaviours of the abuser to inform Family Court and Oranga Tamariki proceedings.
- The abuser should be held accountable for the violence and abuse by family/whānau and by the system.
- Individual counselling as opposed to couple counselling.
- Education and support from family violence specialists including how to make access with children safe.
- Culturally appropriate services.
- Mental health services and support.
- Safe parenting programmes for the abuser.
- Respite housing.
- Long-term support for recovery and healing.
- Education for boys about family violence.

### ***Transport***

Participants shared their ideas about transport supports that could help victim-survivors recover and rebuild their lives:

- Financial support for transport costs because transport was important for independence.
- Friendly driver services for women who could not use public transport.

### ***Other practical supports***

- Better services for the LGBTQI+ community.
- Family therapy.
- Free and accessible Protection Orders.
- Online resources or texting services.
- Paid leave to attend appointments.
- Time off work to recover from abuse.
- Phone support – personal support in addition to information lines.
- Storage for personal possessions until they found a new home.
- Housing for their animals.
- Support with vet bills.
- Safe adult role models for children.
- Safe people to care for children if the protective parent dies (not the guardian who is the abuser).

### ***Making services work well***

Survey participants explained how services should work in order to make them more accessible including, cost, availability, design, the skill required by workers and marketing of support and services.

Participants indicated what kinds of things would make it easier for women to engage with support and services. A majority of women (79%) want the people who deliver the support to be specialists in family violence. Participants don't want to have to prove they have experienced violence and abuse in order to be able to access services, they want services to work with them without the abuser (56%) and many of them (44%) want services to be provided by women only. Women need services to be free and available where and when they need them. Nearly half the participants want a navigator (one skilled person) who could link them with the services available. Many women indicated that they don't want to have to tell their story over and over again; they only want to share as much as they want with services. One third of women said they want workers from services to come to their house to work with their whānau.

There were differences in things that would make it easier to access services depending on participant's ethnicity, age, and the context of their relationship with the abuser.

### *Service provision and approach*

Some qualities of service provision were argued to be essential to ensure services were safe and effective for victim-survivors including that services:

- Be available throughout a victim-survivor's life for as long as and/or when needed by her.
- Provide follow up support and check ins.
- Provide wrap around services.
- Be culturally appropriate and use culturally specific tools for delivery.
- Provide holistic services and support that is not modelled on a 'one size fits all model'.
- Work in a coordinated way.
- Be flexible and accessible.
- All in one place so it was easier to access them.
- Provide support for new partners as well.
- Have some good male role models for boys.
- Offer more practical help.
- Have survivor support groups.
- Provide other kinds of help like occupational therapy etc.

### *Skills necessary for service providers*

Participants expect a specialist work force to be well trained and available to be able to safely respond to family violence in a way that understands dynamic risk factors, keeps information private and secure, ensures that workers are monitored and work to ensure victim safety. It is important that workers understand the dynamics of power and control (psychological abuse), and the impact of abuse including trauma in order to safely engage with victim-survivors. Services providers also need to be non-judgemental and compassionate, understand ongoing risk and put victim-survivor safety at the centre of everything they do. Specialisation is required for working with abusers, people from a range

of cultures, people with mental health issues or addictions, people with a disability and people from the LGBTQI+ community.

Other skills and attitudes required for family violence workers included:

- Have lived experience and life skills.
- Know how to respond and manage the distress of victim-survivors.
- Know how to refer to appropriate services.
- Accurately reflect what victim-survivors want in their reports.
- Be compassionate, kind, respectful, have integrity, be good listeners.
- Know about system abuse and warn victim-survivors about it.
- Be able to work with the wider whānau.
- Have a sound knowledge of the law.
- Be accountable to victim-survivors.

### *Finding out about support and services*

Survey participants had many suggestions about how women should find out about support and services. The following suggestions were made for how to help women find out about support and services (listed in order of popularity).

- Online resources including websites, Facebook ads, twitter, FB support groups etc.
- Health providers.
- Education facilities – all ages and stages.
- Public ad campaigns and media on TV, radio, newspapers etc.
- Public and community places.
- Services (refuge, family violence services, counsellors making good referrals).
- Government departments.
- Informal groups and networks.
- More information about what family violence actually is needs to be shared widely.

### *Working with different parties*

There is currently no consistent way that services work with people who have experienced family violence in New Zealand. Some agencies work with the whole family/whānau and others only provide specific services to victim-survivors or perpetrators or children. Survey participants shared how they think support services should be set up in terms of client service delivery. Just over half (51%) of participants think that services for victims, children and abusers should be set up as separate services and should not be provided by the same agency. A third of participants think there should be a separate service for each party i.e. the victim-survivors, the children, the abusers - that is provided by the same organisation/agency.

Some women provided more ideas about service provision explaining that there were a number of factors that can impact on how service is delivered safely including:

- What the victim-survivor wants.

- How manipulative the abuser is and how unsafe collusion could be.
- Constraints of funding and services available in some communities.

## *Managing complaints*

Survey participants shared who they think should manage any complaints they might have about the support and services they engage with. The majority (79%) indicated they thought an independent body should oversee complaints.

## Recommendations

The survey responses from the 528 women who live throughout New Zealand show that urgent changes are required to the way New Zealand responds to women who are victim-survivors of family violence in order to support them and their whānau towards safety and recovery. A significant finding from the survey is how few participants had sought support from specialist family violence services. Therefore, it is extremely important to gather experiences and insights regarding service design and implementation from victim-survivors themselves rather than relying on service providers to know what kinds of support and services are needed.

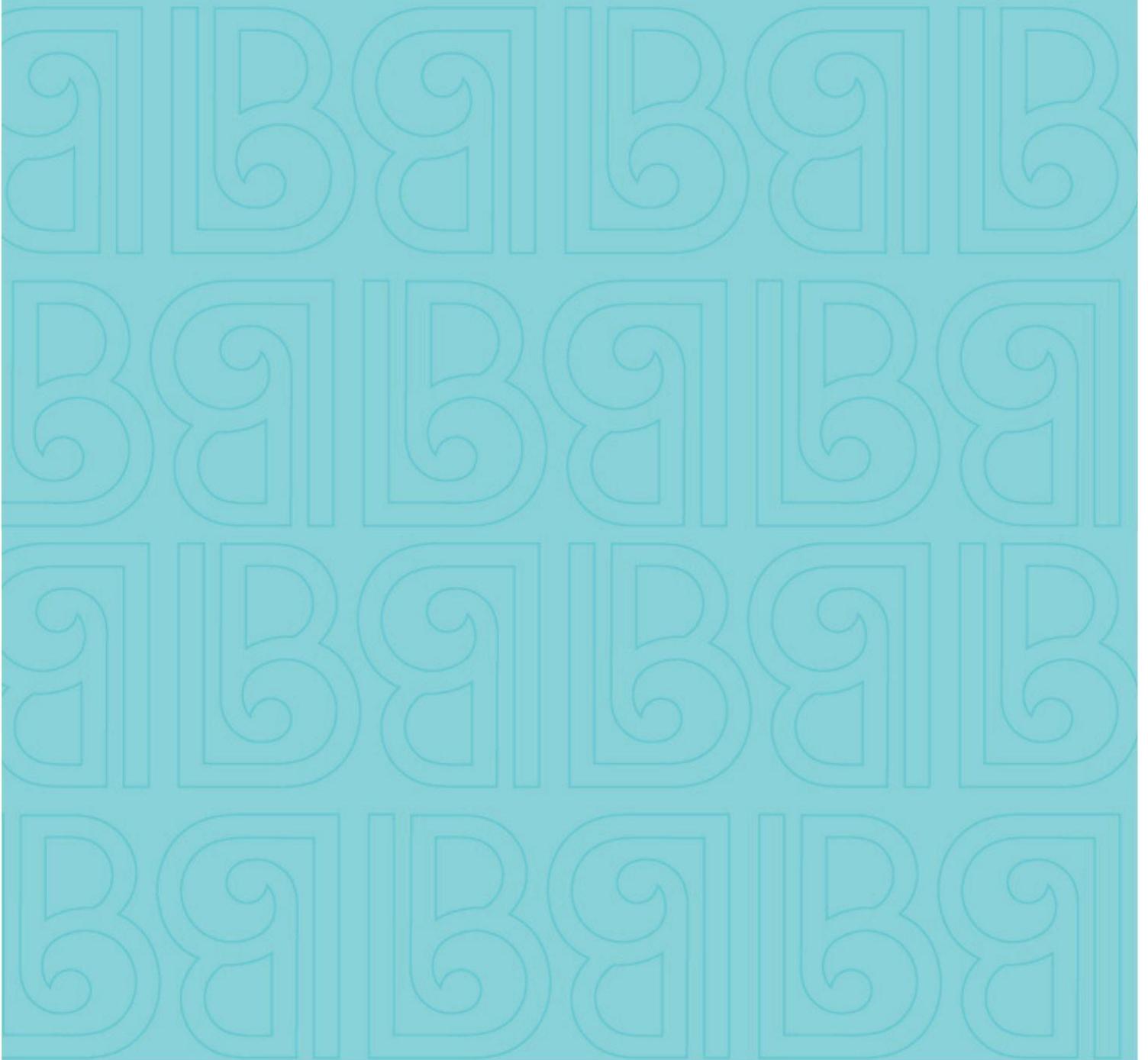
The women who took part in the survey want and need support services that help keep them and their children safe. However, in order to achieve safety and therefore recovery, the barriers to safety must be removed to ensure that all parts of the system work to enable victim-survivors to access and use longer-term support.

Backbone makes thirteen recommendations based on the survey findings. Please refer to the 'Recommendations' section of this report for detail regarding how the recommendations can be achieved.

1. Ensure support services keep victim-survivors and their children safe.
2. Remove barriers to safety and recovery by ensuring all parts of the response system work to enable victim-survivors to access and use longer-term support and in particular, the Family Court, Work and Income, and Housing NZ.
3. Have a specialist family violence work force (including health professionals, supervision centre workers, Family Court professionals as well as family violence agencies and frontline staff).
4. Improve the understanding of family violence by people who deliver support and services to victim-survivors to include information about trauma, risks to children and that abuse can be ongoing and victim-survivors may have little control over contact with the abuse.
5. Urgently provide longer term support and services to enable women and their children to get safe (early and easily) that are free, ongoing, flexible, culturally appropriate and responsive to the particular needs of victim-survivors.

6. Implement suggested types of support and services throughout New Zealand as part of the Whānau Resilience programme including, counselling and trauma therapy, independent advocacy services for Family Court and Oranga Tamariki proceedings, navigators, support and educational groups for women and children, a specialist confidential information service for mothers and cultural support and education programmes for children impacted by abuse.
7. Investigate how to implement new types of support and services throughout New Zealand as part of the Whānau Resilience programme including, specialist financial support for victim-survivors, housing support, free healthcare, subsidised transport and education-based family violence resources for children.
8. Improve the understanding by general society of family violence so that informal support responses are safe and effective.
9. Aim to require that services to victims, children and abusers should be set up as separate services and should not be provided by the same agency. If they are provided by the same agency, ensure safety practices are in place to protect the victim-survivor and her children.
10. Help victim-survivors find out about support and services and what family violence is by providing information in a range of ways.
11. Establish an independent body that can manage victim-survivor complaints regarding services they use that don't help them get safe, recover and rebuild their lives.
12. Continue to build service-user voices into the design and development of policy and programmes.
13. Undertake follow up activities as a result of the Backbone survey and report including providing regular updates about how ideas gathered from the survey are being built into the Whānau Resilience Programme via the MSD website.

# Background & Approach



## Introduction

The importance of incorporating the voice of experience into service design and delivery has been discussed both internationally and in New Zealand for some time. In 2012, The Ministry of Social Development (MSD) released a report from the Family Violence Unit detailing why service user involvement is necessary and how it can be achieved.<sup>4</sup> In the report, best practice approaches to gathering service user input are discussed including, the importance of ensuring that the input is gathered in a safe and meaningful way and that the consultation and associated findings result in a change to policy or service delivery. The Backbone Collective (Backbone) has advocated for policy makers, and those who implement policy, to consult with victim-survivors (service users), about what services are needed and how services can work better and more safely. We have explained that this specialised consultation is critical for continuous improvement of the family and sexual violence response system.

In 2018, (MSD) commenced a work programme called Whānau Resilience. The aim of this programme is 'to create strong, resilient communities where whānau are supported to live violence free and to eliminate violence for the next generation.'<sup>5</sup> To help inform the development of longer term support services in communities throughout New Zealand, MSD contracted Backbone to find out from people who identify as female, via an online survey, what kind of longer-term support would have helped them get safe, recover and rebuild their lives after experiencing violence and abuse.

In undertaking the Whānau Resilience survey (the survey), Backbone has been able to apply our specialisation in family violence and service user consultation to assist MSD to reach victim-survivors, who can be untrusting of government agencies, and gather their input in a safe and meaningful way.

The survey provides a very positive example of how service user feedback can be gathered. By ensuring the survey was safe and designed with an understanding of the lived experience of family violence victim-survivors, Backbone was able to reach many women and gather extensive ideas and experiences. The response rate to the survey was significant and compares very favourably with other online surveys. The survey responses we received were in many cases detailed and contained comprehensive open text answers providing a wealth of insight into the current response to family violence victim-survivors in New Zealand. The responses also provided a vast range of ideas for how to improve the support and services that are available to victim-survivors and their whānau in New Zealand.

---

<sup>4</sup> <https://www.msd.govt.nz/documents/about-msd-and-our-work/work-programmes/initiatives/action-family-violence/voice-of-experience.pdf>

<sup>5</sup> <https://www.msd.govt.nz/about-msd-and-our-work/work-programmes/initiatives/family-and-sexual-violence/whānau-resilience-long-term-healing-and-recovery-services.html>

## About The Backbone Collective

Backbone was launched in March 2017 to enable women to safely and anonymously tell the Government, others in authority, and the public about how the 'system' responded to them when they experienced violence and abuse, and how they need it to respond for them to be safe and rebuild their lives.

Backbone is an independent organisation and a registered charity with the New Zealand Charities Commission. Our purpose is to contribute to the continuous improvement of the response system in New Zealand so that it works well to support and protect women and their children when they experience violence and abuse. We run online surveys to collect anonymous feedback from women survivors (service users) about different parts of the response system. We share reports about the findings of these surveys with recommendations for how the system can work more safely.

## Our approach

Backbone set out to design and build an advanced web-based survey that could gather experiences (quantitative and qualitative) from as many victim-survivors as possible in an anonymous and safe way. We used reliable survey software provided through SurveyGizmo to create the survey. In order to gather as much context and nuance from the participants as possible, the survey was built to capture some detailed experiences via open text options and more general experiences via dropdown menu selections.

The survey was designed to find out from people who identify as female, are aged 16+ and have experienced family violence in an intimate personal relationship or from a whānau/family member what kind of longer-term support would have helped them get safe, recover and rebuild their lives after experiencing violence and abuse. The survey aimed to find out more about:

- What is important to victim-survivors and their whānau.
- What support they have used in the past and what difference it made to them and their whānau.
- What support they think should be made available to victim-survivors to enable them to get safe, recover and rebuild their lives.

## Definitions

The following terms used throughout this report are defined as follows:

**Family Violence** - The Family Violence Act states that family violence involves coercive and controlling behaviour and can include psychological abuse (including financial), physical abuse, and/or sexual abuse.

**Whānau** - refers to a person's self-defined support networks.

**Victim-survivor** – The person who experienced an act or series of acts of family violence from either:

- Their partner or ex-partner.

- Someone they were/are dating.
- The other parent of their child/ren whom they were never in a relationship with.
- A whānau/family member/s (sibling, parent, extended whānau).

**Abuser** – the person who used abuse against the victim-survivor.

**Intimate Partner Violence** – violence and/or abuse that happened within an intimate relationship including with a:

- Partner or ex-partner
- Someone they were/are dating
- The other parent of their child/ren whom they were never in a relationship with

**Tauīwi women** – survey participants who are non-Māori.

## Survey design and distribution

Backbone and MSD agreed the parameters of the survey design in a series of communications. Backbone then drafted the survey based on the agreed scope and our knowledge about family violence and the insights we have received from the hundreds of communications we have had with women victim-survivors over the last two and a half years.

We aimed to produce a survey that was safe, sensitive, appropriate and as accessible as possible. The questions were designed to give women space to share their own experiences and ideas. A “save and continue” option was added into the survey to ensure that respondents could take their time and have a break if the survey caused them any distress or they wanted to spend more time thinking about their responses.

The draft survey was shared with MSD and refinements subsequently made. The survey was then tested with four victim-survivors who provided feedback to Backbone on the survey questions, dropdown options, usability, functionality, and look and feel of the survey. Their comments were considered and further edits to the survey design were made. The survey was then again reviewed by members of the MSD team who provided further suggestions. The final survey was signed off on 31 October 2019.

The survey included three compulsory questions at the beginning which were designed to filter for respondent eligibility. The remaining 65 potential questions were all optional.<sup>6</sup> Please note therefore that the sample sizes vary across the survey results presented throughout this report.

The survey went live on 1 November 2019. The survey link was released through a number of channels including a newsletter to Backbone members and supporters, on the Backbone Facebook page, in email correspondence with social services known to Backbone and a series of Facebook advertisements that were run throughout the month the survey was

---

<sup>6</sup> Not all survey takers would have seen all 65 questions. Some questions were only visible to survey respondents based on their previous answers. Respondents could skip past questions they did not want to answer.

open. MSD also shared the survey link with their database of newsletter subscribers three-quarters through the survey live phase.

We know from previous research (Towns & Scott, 2008) that younger people may not identify with the umbrella term 'family violence'.<sup>7</sup> We therefore used separate wording in our Facebook ads that were targeted at younger women which focused on the behaviour they may have experienced rather than the term used to describe it – *family violence*. So, while we only received 21 eligible survey responses from women aged 25 and under, we appreciate the value of these responses very much. As younger women are less likely to identify with public messaging about help available it can be difficult for people in these age groups to access support and services. Therefore, in our discussions we highlight where responses from younger participants vary from the general themes in the responses to inform future design and targeting of services to this group.

## Limitations

Online surveys have limitations and Backbone communicated these with MSD from the outset. In our previous experience we have found that there are groups of women who are less likely to take part in an online survey because they dislike impersonal processes and prefer face-to-face experiences, are not able to easily communicate in English, do not feel confident using online platforms, or lack ready (or safe) access to a mobile phone, computer and/or the internet. Therefore, the findings from the Backbone survey should be taken as representative of a particular subset of victim-survivors. For instance, while we received a good overall sample size of 528, there was low participation rates from a number of groups (compared to the national population) including:

- Women who identify as Pasifika.
- Women who identify as Asian or Indian.
- Younger women and women in dating relationships.
- People who identify as LGBTQI+.
- People who live in Northland and South Auckland.

Backbone recommends that MSD consider pursuing future consultation with these groups in ways that are safe, accessible and appropriate for them (see Recommendations).

## Survey sample size

The survey received a positive amount of interest with 1121 people clicking on the link. Once the survey was closed the responses were checked for participant eligibility,<sup>8</sup> completion status and consent to include partial responses. In total we received 528 responses that were eligible for inclusion in our final analysis. The following report is based on these responses only.

---

<sup>7</sup>Towns A. and Scott H. The Culture of Cool. Getting in early to prevent domestic violence. New Zealand. 2008

<sup>8</sup> Female aged 16+ who has experienced family violence.

## Level of engagement

The number and depth of survey responses show that many victim-survivors are more than willing to share their experiences and insights in order to help the response system work more safely and effectively. This is despite the fact that the survey was not designed to be a *quick click* feedback survey and was long, containing over 60 questions with only three of them required. It was also comprehensive and required participants to reflect on their own and their children's very personal and likely distressing experiences. In addition, many women (200) also left specific comments for MSD to use in their subsequent reports and publications related to the Whānau Resilience programme.

The rich data we collected shows that most participants engaged deeply with the survey process, with many women choosing to include extra comments in open text boxes to better explain their experiences. On average, women spent between 30 minutes to one hour on their responses. Some women spent much longer. Overall, 63% of participants included in our final analysis completed the survey (335) and 37% (193) were participants who partially completed the survey and who consented to their survey response being included by Backbone in this and any subsequent reports for MSD.

## Survey sample demographics

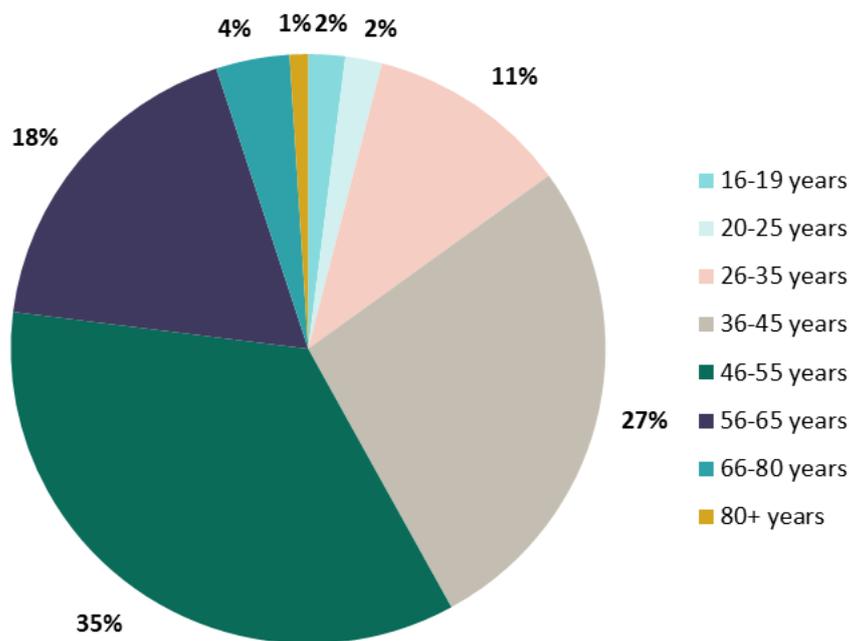
### *Gender*

The survey was open to people who identified as female. The overwhelming majority of survey respondents identified as being female (99%) and a small number described themselves as gender diverse (1%). Throughout this report we refer to the survey participants as 'women' to reflect the majority of participants' identification as 'female' and to maintain the gendered nuance of the lived experience of family violence for most of the participants. We acknowledge that the three people who took part in our survey who identify as gender diverse may not feel that the term 'women' accommodates their identity. However, we feel it is unsafe to pull their responses out into a separate segment as the risk of identifying material increases greatly with such a small number of people in this group.

### *Age*

The survey was open to females aged 16 and over. We received responses from a wide range of age groups, with the majority (62%) coming from women aged between 36 and 55: 27% of our sample were aged 36-45 years and 35% were aged 46-55 years. (see Figure 1).

Figure 1: Survey sample by age, (n=528)



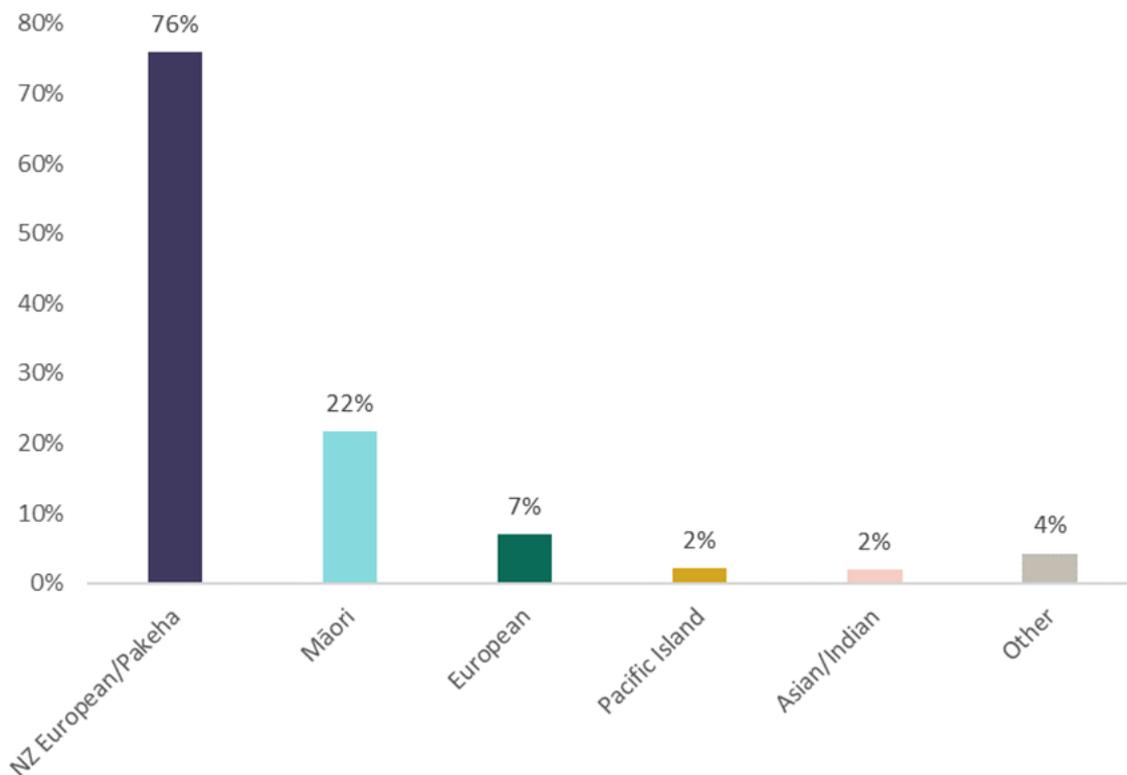
## Ethnicity

We asked survey respondents to tell us which ethnicity they best identified with. The question was optional, and women could select multiple ethnicities from a dropdown list. We received responses from women from a range of ethnicities although the majority were from women who identified as New Zealand Pakeha/European (76%). We received a higher percentage of responses from women who identified as Māori to this survey compared with previous Backbone surveys (22% compared with 15 -17%).<sup>9</sup> There were six women who chose not to answer this question. Figure 2 shows the breakdown of survey responses by ethnicity.

---

<sup>9</sup> We understand that many Māori women prefer face to face communications (kanohi ki te kanohi) to online impersonal ones. Backbone recommended to MSD from the outset that specialist consultation by an appropriate organisation be undertaken with Māori women. We have highlighted throughout the report where responses from Māori women indicate a different experience of abuse or the system response to the abuse is different to that of Taiwi women.

**Figure 2: Survey sample by ethnicity (n=522)**



### ***Rainbow/LGBTQI+***

Survey participants were asked if they identify as part of the Rainbow or LGBTQI+ community. There were 7% who did identify as part of this community, 92% who did not and 1% who selected 'other'.

### ***Disability***

We asked participants if they have a disability that creates problems for them, such as, impairment, activity limitation or participation restrictions. The majority of the 516 women who responded to this question (79%) indicated they did not have a disability, 17% advised they did and a further 4% selected the 'other' option and provided comment describing a range of conditions.<sup>10</sup> Of the 17 women who selected 'other' nine related their disability to their experience of violence and abuse. Older women were slightly less likely than women 65 and under to indicate they suffered from a disability.

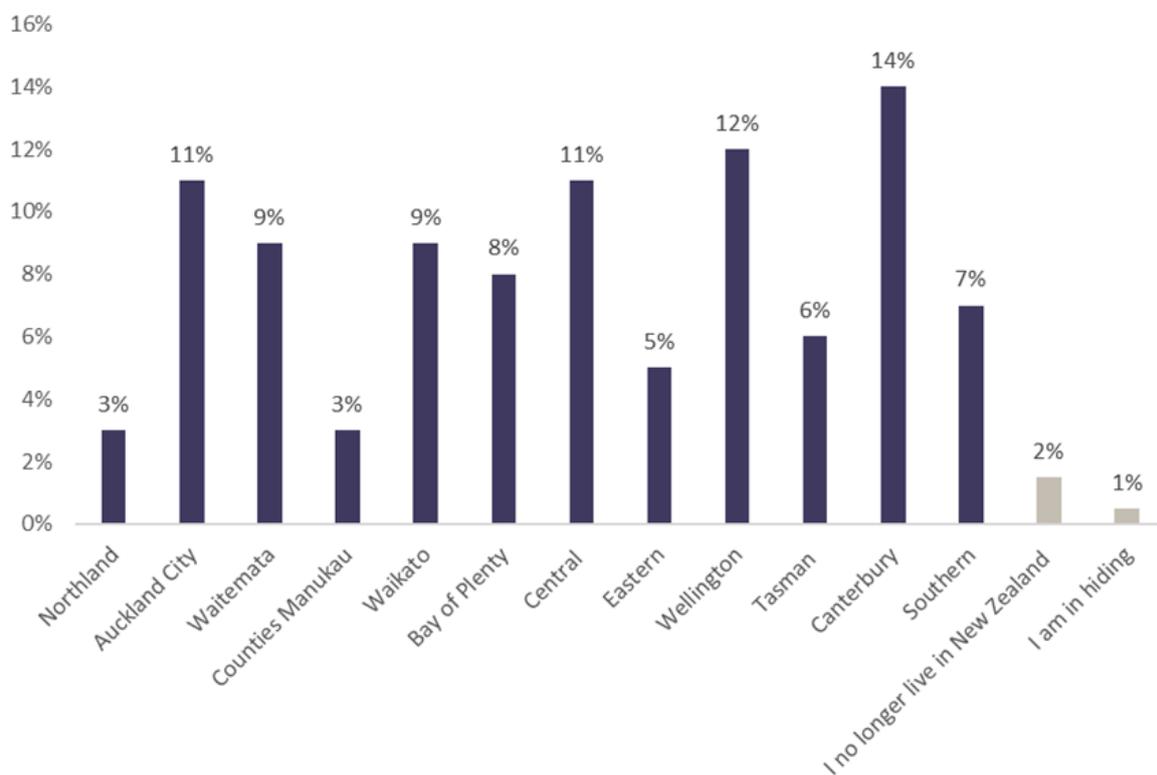
---

<sup>10</sup> Broadly aligning with Stats NZ 2013 Disability survey which identified that 24% of New Zealanders has a disability.

## Geographical location, by New Zealand Police District<sup>11</sup>

Survey respondents currently live in a wide range of districts throughout New Zealand. The Whānau Resilience programme is being developed at each of the 12 Police Districts throughout New Zealand. Therefore, participants were asked to select which Police District they lived in rather than the more usual New Zealand regions (detail of each District was provided in the survey). We received responses from each of the 12 Districts, however some districts attracted very low response rates (see Figure 3). In particular, there were only 13 responses from women living in Counties Manukau. There were also relatively low response rates from women living in the Northland District. Every effort was made to share the survey with agencies and institutions in these two areas but there remained a low response rate. It may be that the low response rate in both these districts was a result of technology issues for women living in those districts, a lack of trust in engaging with online surveys and/or not being confident with the English language.<sup>12</sup>

**Figure 3: Survey sample, by police district location (n=520)<sup>13</sup>**



<sup>11</sup> The 12 regions available for respondents to select correspond with the New Zealand Police Districts. For more information about these District boundaries visit <https://www.police.govt.nz/about-us/structure/police-districts>.

<sup>12</sup> Limitations of online surveys for some groups are explained in the [Limitations](#) section of this report.

<sup>13</sup> Responses were converted to percentages and in some cases were rounded up making the total 101.

Most survey respondents (98%) indicated they currently live in New Zealand. The remaining 2% of women who said they did not normally live in New Zealand were women who have experienced violence and abuse in New Zealand but have since moved overseas for a number of reasons. One participant experienced violence and abuse outside of New Zealand but is a New Zealander.

Some women indicated that they had experienced violence and abuse in regions other than the one they currently live in. Participants told us the abuse did not happen where they currently live in 25% of cases and in the region where they live now *and* another region(s) in 18% of cases.<sup>14</sup> The detail women provided about regions where they experienced the abuse will be discussed in individual reports to be produced at a later date for each of the 12 districts.

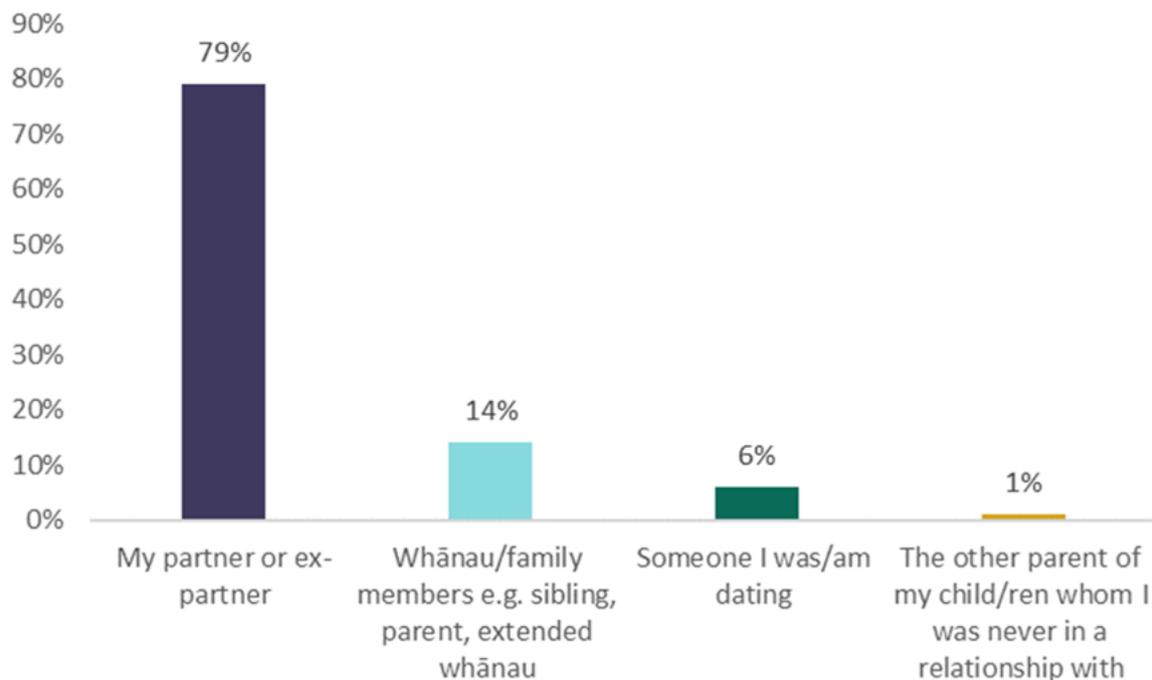
### *Women with children*

Most of the women who took part in our survey were mothers (84%).<sup>15</sup> Māori women were slightly more likely to report they had children (89%) than New Zealand European/Pakeha women (82%).

### *Relationship with the abuser*

The participants were asked what relationship context they had experienced family violence in. Most of the respondents reported experiencing violence and abuse from a (ex) partner (79%) and a smaller proportion (14%) from a family/whānau member (see Figure 4).

**Figure 4: Survey sample, by relationship to abuser (n=528)**



<sup>14</sup> There were 509 women who answered this question.

<sup>15</sup> There were 507 women who answered this question.

The survey required participants to select only one of the dropdown categories to explain which of the victim survivor categories *best* described them. We would like to acknowledge that some of the women who signaled that their abuser was someone they had been in an intimate relationship with may also have experienced violence and abuse from someone in their family/whānau.

There was a higher percentage of Māori women represented in the cohort of participants who had experienced violence and abuse from someone who was a whānau/family member (32%) than the cohort who had experienced violence and abuse from someone who they had been in an intimate partner relationship with (20%).

Women who were younger (aged 16 -25) were more likely to experience abuse from a family/whānau member than older women (26+) were.<sup>16</sup> Women aged 66+, were more likely to have experienced violence from a partner or ex-partner (88%).

‘Family violence’ is an umbrella term used in New Zealand to describe violence and abuse that occurs in close personal relationships. However, the different contexts that abuse happens in may impact on the experience of the victim and the support available and required. For this reason, in relevant places throughout this report we have presented two separate findings sections: one outlining what victim-survivors told us when they experienced violence and abuse from a member of their whānau/family and a second section outlining what victim-survivors told us when they had experienced violence and abuse from someone they had been in an intimate relationship with.<sup>17</sup>

### *Gender of abuser*

Most respondents said that the person who abused them was male (95%). The gender of the abuser varied slightly depending on the nature of the relationship in which the abuse happened. The percentage of abusers who were female was greater among responses where the violence and abuse was perpetrated by a family/whānau member than when perpetrated by someone the victim-survivor had been in an intimate relationship with (see Figures 5 and 6). This finding reflects the low response rate from women identifying as LGBTQI+.

---

<sup>16</sup> Young women experienced violence and abuse from family/whānau member (48%) (ex) partner (24%) someone I’m dating (24%), other parent (5%). Women 26 and over experienced violence and abuse from family/whānau member (12%) (ex) partner (81%) someone I’m dating (5%), other parent (2%).

<sup>17</sup> Including with a partner or ex-partner, someone they were/are dating, the other parent of their child/ren whom they were never in a relationship with.

Figure 5: Gender of abuser, when abuser was someone in intimate relationship (n= 433)

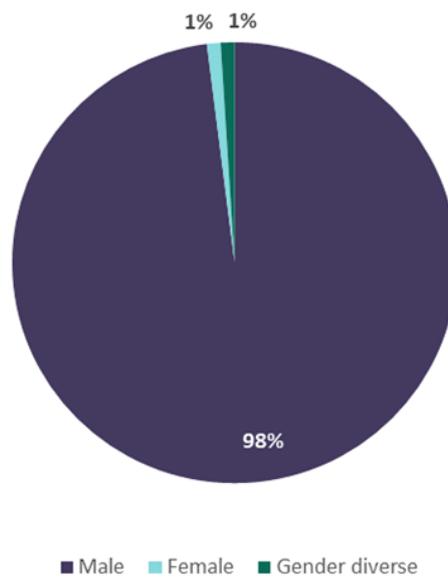
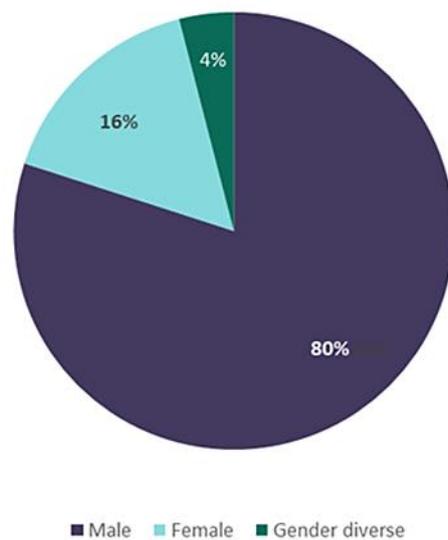


Figure 6: Gender of abuser, when abuser was member of family/whānau (n= 68)

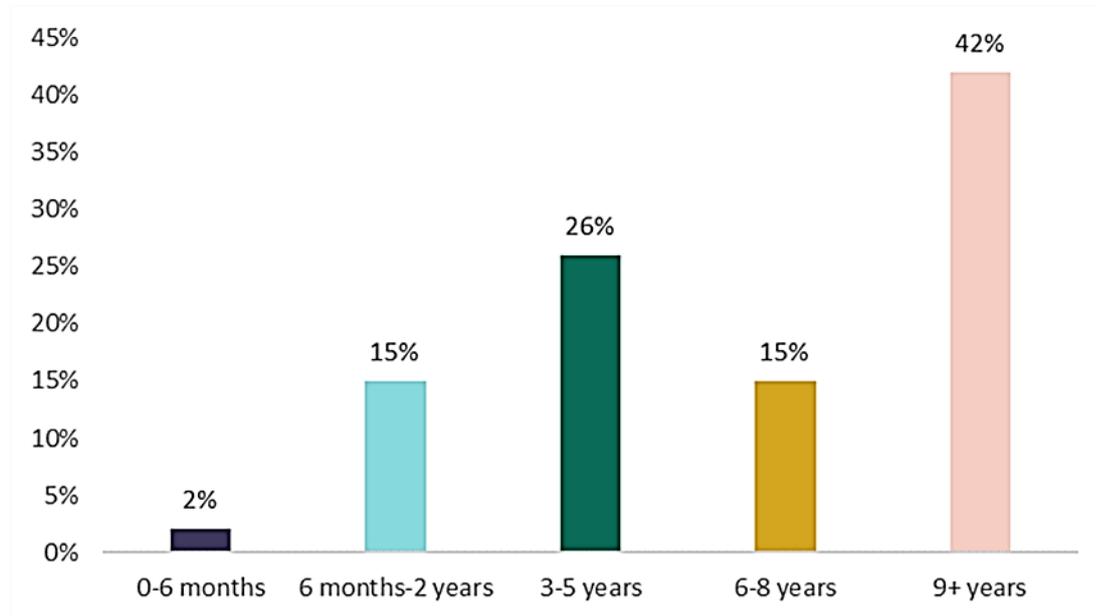


### *Relationship status*

If women indicated that they had experienced violence and abuse within an intimate partner relationship, they were asked if they were still in a relationship with the abuser. Most (394 or 93%) of these participants stated that they were no longer in a relationship

with the abuser.<sup>18</sup> The majority of these women (57%) had been separated from the abuser for over five years (see Figure 7).<sup>19</sup>

**Figure 7: Survey sample of women who have separated from their abuser, by length of time separated from abuser (n=392)**

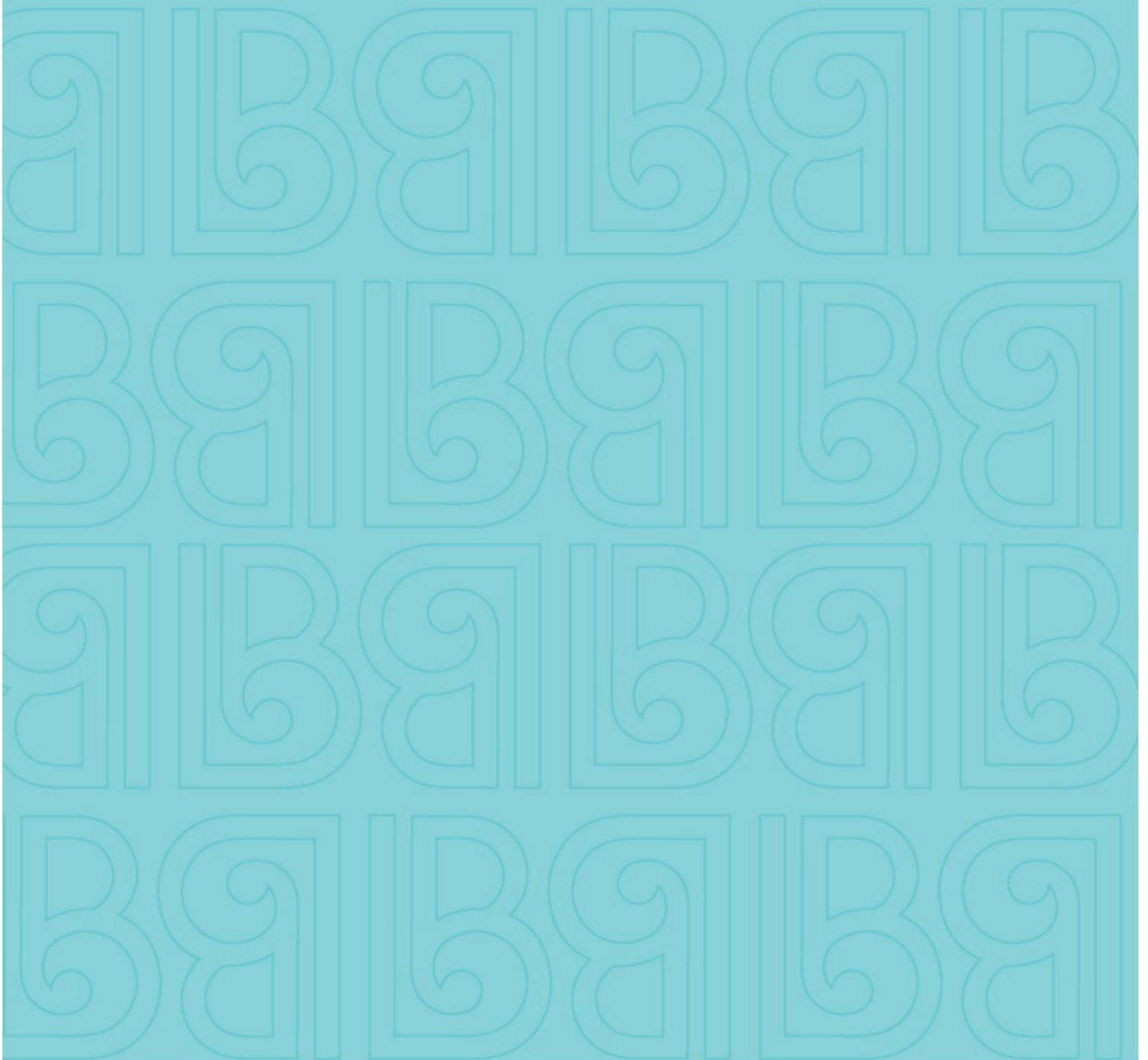


---

<sup>18</sup> While there were 455 participants who experienced abuse from someone they had been in an intimate relationship with, only 394 of them answered the question about whether or not they were still in a relationship with that person.

<sup>19</sup> While 394 women said they were no longer in a relationship with the abuser, 392 shared how long they had been separated for.

# Survey results



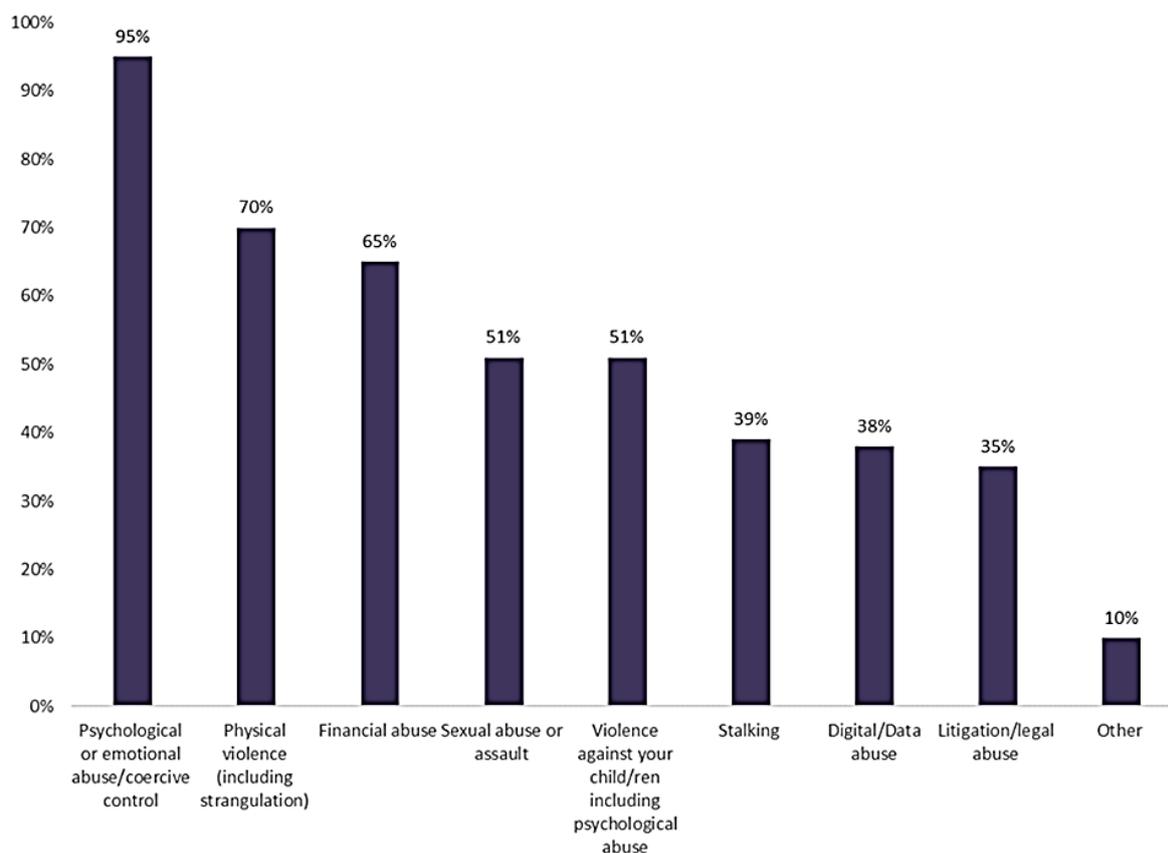
# Participants' experience of violence and abuse

Participants were asked questions to find out more about their experiences of violence and abuse to help contextualise the support they had already used, and what other support they thought was necessary. The information below provides a snapshot for a cross section of New Zealand women regarding what kind of abuse they have experienced, how long they suffered it and what helped it stop.

## Types of violence experienced

Participants were invited to select from a dropdown menu a range of different types of violence and abuse.<sup>20</sup> The majority of women (95%) experienced coercive control from the abuser, nearly three quarters of them experienced physical violence and just over half experienced sexual violence/abuse (see Figure 8). A high number (51%) also reported that their children had experienced violence and/or psychological abuse from the abuser.

**Figure 8: Types of abuse experienced (n=512)**



There were some differences in the types of violence and abuse experienced by the participants depending on the context in which the abuse happened (abuse from an intimate partner compared with abuse from a member of their family/whānau). Women

<sup>20</sup> Digital/data abuse included abusive or unwanted text/email/facebook etc. messages online

who experienced violence and abuse within an intimate partner relationship were much more likely to report financial abuse than women whose abuser(s) was a member of their family/whānau (70% compared to 32%), violence against their children (55% compared to 22%), digital/data abuse (41% compared to 19%), litigation abuse (38% compared to 16%), and stalking (41% compared to 27%). Women aged 66+ were less likely to have experienced digital abuse than women aged 65 and under.

Some women (51) shared more detail about the violence and abuse they and their children had experienced, outlined in the following list:

- Abuse of pets.
- Harassment.
- Death threats.
- Dangerous driving.
- Public smear campaigns.
- Using woman's disability against her.
- Threats to use intimate footage against her.
- Turning children against her.
- Manipulation.
- Intimidation.
- Using her employer.
- Damage to property.
- Using the Court to harass and abuse her.
- Using religion to abuse her.
- Social defamation and intimidation.
- Denying her basics of life.
- Using the system to abuse her.
- Hurting or threatening to hurt her family.

## How long violence and abuse was experienced

Women told us how long they had experienced violence and abuse for. This was a complex calculation for many participants. Some had experienced abuse in their family of origin *and* from a partner or from multiple partners. Most of the participants explained that they had experienced abuse and violence for many years – family violence was not a one off or short-lived experience for the vast majority of them (see Figures 9 and 10). Sadly, many women (at least 42%- see footnote 21) experienced abuse for more than ten years, with a significant number saying the abuse was experienced for more than 20 years.

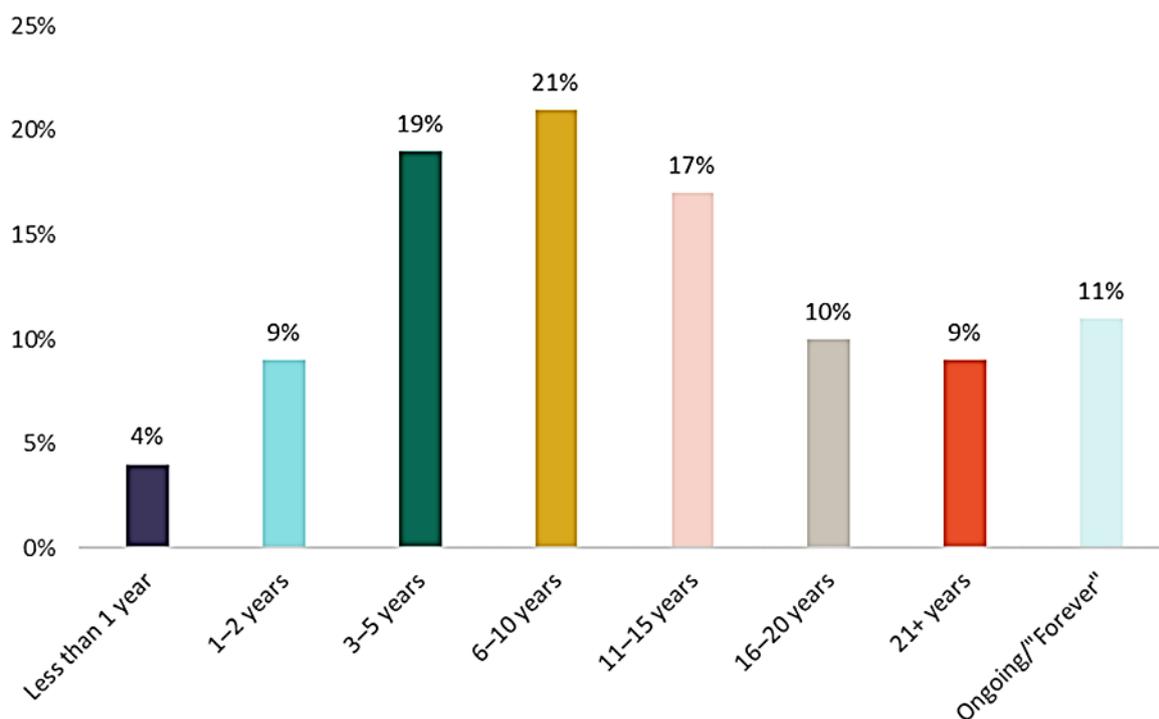
Women who had experienced violence and abuse from a family/whānau member often described the time they were abused for as being their whole childhood. Women who had experienced violence and abuse from a (ex) partner very often explained that they were abused throughout their relationship and added that the abuse was ongoing post separation, and they saw no foreseeable end to it in sight.

Many participants described the escalation of violence and abuse over the years they were with their partner, describing how psychological abuse and controlling behaviours were crippling and escalated to physical assaults later in the relationship or once they decided to

leave the relationship. Many women talked about how debilitating the abuse was over the years they experienced it but explained that the impact on them was ongoing. Furthermore, while the violence and abuse might have ended for some of these women, their children were unfortunately still experiencing it as they were forced into care and contact arrangements with the abuser as a result of Family Court orders.

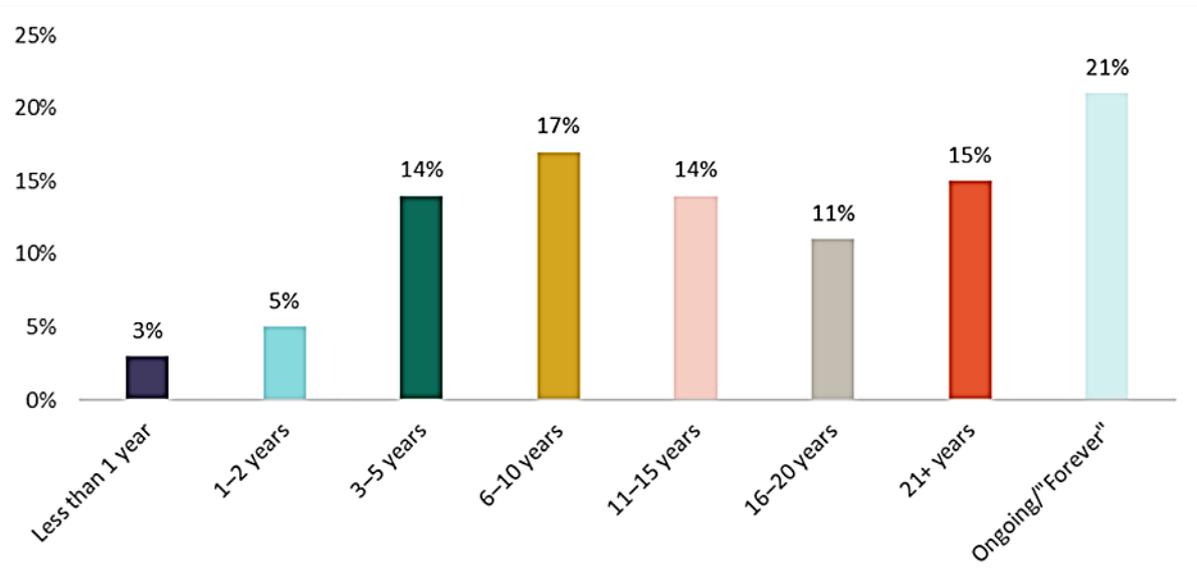
Below, Figures 9 and 10 show the length of time women experienced violence and abuse for, segmented by the type of relationship the abuse occurred in.<sup>21</sup> Please note that many of the women told us the length of time they themselves were directly exposed to abuse, but also indicated that they were exposed to ongoing abuse due to contact arrangements for the children. However, they did not include particular detail as to the length of time they had experienced post separation abuse via the children. Therefore, the length of time these women experienced family violence will be longer than represented in Figures 9 and 10.

**Figure 9: Length of time violence and abuse was experienced, intimate partner as abuser (n= 382)**



<sup>21</sup> We received responses from 458 women to this question, however, a definitive length of time of experiencing violence and abuse could only be determined from the answer provided in 391 cases. In a further 56 cases we were unable to ascertain a particular time period, but the participant had explained she had experienced violence and abuse for years, that it was ongoing, that it felt like forever...

**Figure 10: Length of time violence and abuse was experienced, family/whānau members as abuser (n= 65)**



These results make troubling reading. It is essential that support and services are made available in New Zealand to ensure women and their children can get safe sooner and be supported to recover and rebuild their lives. <sup>22</sup>

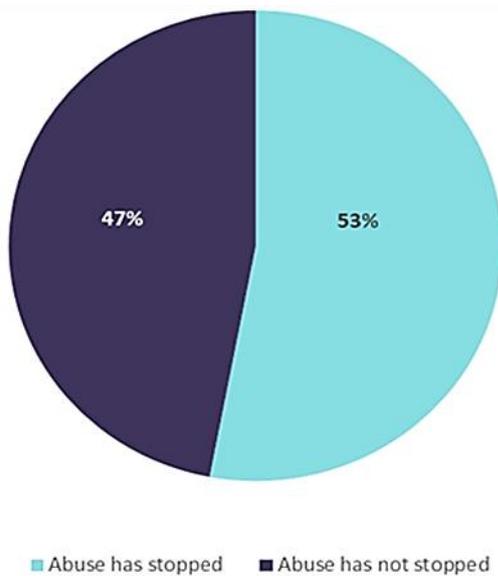
## When abuse does not stop

For many women separating from the abuser, or moving away from the family home, does not mean the violence and abuse ends. A high number of participants (47%) told us that the abuser was still using violence and abuse (including physical, psychological, financial or sexual abuse) against them and/or their children.

---

<sup>22</sup> Women in the category 21+ years detailed abuse spanning up to 45 years.

**Figure 11: Has the abuse stopped (n=493)**



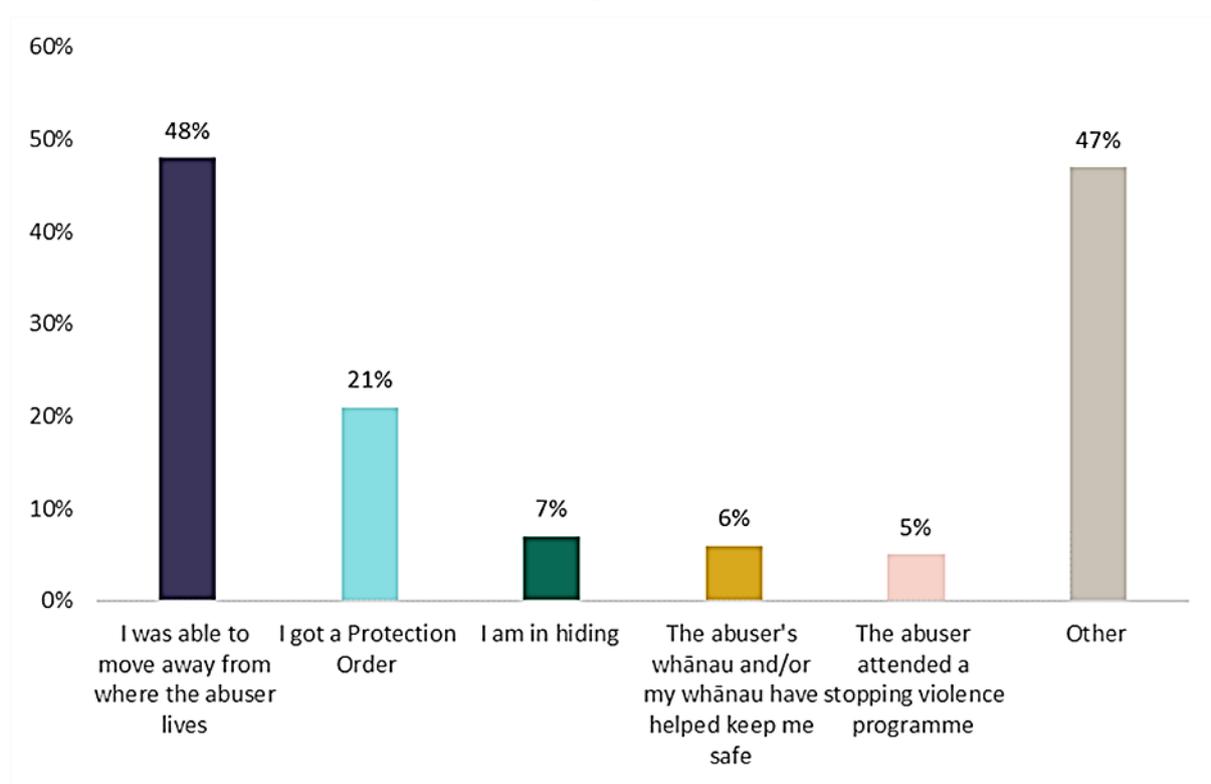
Some women (96) shared more detail about their experiences relating to the abuse stopping or not. For 37% of these women, the abuse had stopped because they no longer had contact with the abuser (who was either in jail, had moved overseas, had died or the victim-survivor no longer saw them, had moved away or was in hiding). The remaining responses outlined ongoing abuse which involved psychological abuse and controlling behaviours including stalking, intimidation and online harassment, using the children (applying for and being granted parenting orders which prevented relocation or required ongoing contact with the abuser), using the system such as the Family Court - legal and/or financial abuse.

## What helps abuse stop

The survey respondents who answered 'yes' the abuser had stopped using abuse towards them and/or their children were asked what they thought were the reasons the abuser had stopped using abuse. Overall, the majority of women indicated that what had stopped further abuse was that the abuser no longer had contact with them either because they had moved to another area (48%), she had a Protection Order (21%), or were in hiding (7%) (see Figure 12).

Only 5% of participants thought that the abuser doing a stopping violence programme had been the reason the abuse had stopped.

**Figure 12: Reasons the abuser stopped using violence and abuse (n=224)**



*\*Participants could select as many of the dropdown options as they thought applicable.*

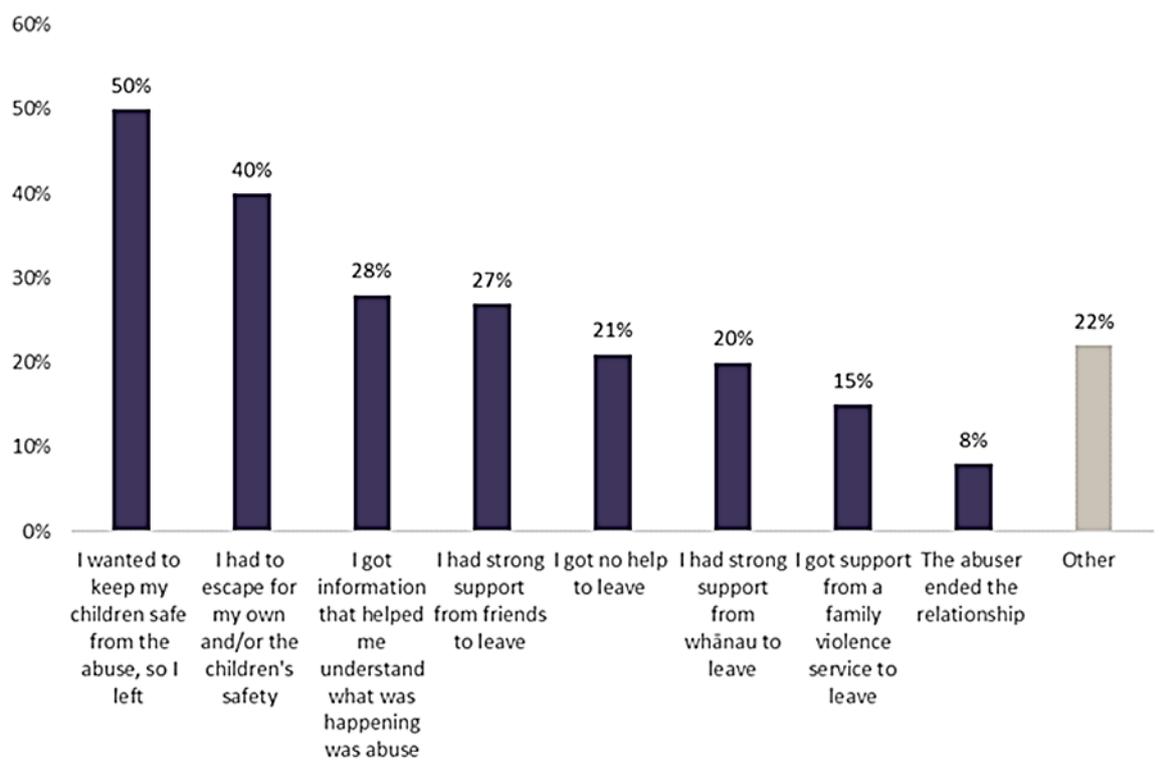
Some women (106) chose to leave more explanation about their situation. The most common reason these women shared for the abuser stopping their abuse was that they no longer had contact with the abuser (49%). Other reasons given were that the abuser had received counselling or psychological support (5%), that the victim-survivor had become stronger and had been able to put boundaries in place and was no longer intimidated (8%) and that the abuser had now moved on to abusing someone else. More women told us in their comments that their abuser only stopped abusing them because he went on to abuse someone else (13%) than told us that the formal system responses such as Police, the courts (Protection Orders, Trespass Notices or Parenting Orders) had had an impact on the abuse stopping (8%).

Women who had experienced violence and abuse from a member of their family/whānau were slightly more likely than women who had separated from an abuser who they were in an intimate relationship with, to say the abuser had stopped using abuse (52% compared to 42%). This could be because the victim-survivor was more able to stop all or limit contact - preventing ongoing abuse - because either they had matured and could leave the family home or it would be less likely there would Family Court orders preventing relocation or forcing contact with the abuser via parenting orders.

## Leaving

If women indicated they were no longer in an intimate relationship with the person that abused them, then they were asked what had helped them leave the relationship (see Figure 13).<sup>23</sup>

**Figure 13: What helped women leave the abusive relationship (n=393)**



Women could select as many of the dropdown options that they thought applied to their situation. Overall, it appears that women are motivated and supported to leave abusive relationships through access to information, fears for their children's and their own safety and through support from whānau, friends or family violence services.

However, for some of the participants the process of leaving (escaping) was complicated (it was difficult, dangerous and challenging). Many of the women who answered this question (40%) stated that they had to escape the relationship for their own and their children's safety and worryingly 22% of these women told us that they received **no** help at all to do so. Only one quarter of these women used family violence services to help them when they escaped.

A number of women (82) provided more detail about what helped them to leave the abuser. Often leaving was not a straightforward quick process but involved a long-term plan and for some this involved leaving and returning on several occasions before finally getting away.

<sup>23</sup> Only survey participants who indicated they had been in an intimate relationship with the abuser were asked this question.

These women explained a range of things that helped them leave which have been placed under four key themes below.

### *External support*

Some women described external support that helped them leave such as help from Police, counsellors and therapists, trusted friends, family, work colleagues or a teacher. These people validated the woman's experiences of abuse and affirmed that they should not have to live under those circumstances or provided information that helped them better understand their experiences. For some of the participants getting financial support made all the difference to their ability to leave and get safe.

### *Formal systems*

Others relied on more formal support such as having a Protection Order or using the court system.

### *Personal and emotional processes*

Many women discussed personal and emotional processes that helped them leave like having inner strength, feeling like they had to leave for their own survival, feeling like enough was enough, deciding that the abuser was no longer worth it, feeling like they had to leave for the safety of the children, feeling like they could no longer cope with the abuse, and asking him to leave.

### *Beyond their control*

A number of women described circumstances beyond their control that ended the abuser's contact with them including the abuser dying, cheating on them or going to prison. Two women explained that the abuser had changed their behaviour and were no longer abusive.

Throughout this section we have described the experiences of violence and abuse detailed by the survey participants. Although this information pertains to a specific group of victim-survivors (528), we understand that their experiences provide a useful snapshot for policy makers regarding the experience of violence and abuse itself, its duration and the reasons it stopped for these women. Of extreme significance is that these victim-survivors experienced violence and abuse for long periods of time: single one-off events were not their experience regardless of the context of the relationship in which the abuse happened in. We heard that for many women the abuse does not stop when they separate from the abuser and the impact of the violence and abuse is ongoing for them and their children. Furthermore, the most effective way to stop the abuse was if the abuser no longer had contact with the victim-survivor. In most cases the victim-survivor had little control over having no contact with the abuser as the abuser chose to continue the abuse regardless of a physical separation (unless the abuser died or was in jail). For many participants it was impossible to have no contact with the abuser as they are prevented from relocating or forced into contact by parenting orders made in the Family Court.

However, participants described different types of support and services they had used in an attempt to get safe, recover and rebuild their lives which we will describe below. In the following sections we discuss which supports and services were helpful and in what ways and then which were not helpful and why they were not.

## Supports and services participants had used to try and get safe and recover

### *Informal support*

Many women had tried reaching out to informal support networks for help (friends, family/whānau or work colleagues) - illustrated in detail in Figure 16. Participants told us about their experiences of seeking

- Emotional support ((e.g. unconditional support, listening, encouraging her to seek support from an agency or counsellor).
- Practical support (e.g. giving her a place to stay, looking after the children, driving her to appointments).
- Intervention with the abuser (e.g. telling the abuser to stop abusing her and/or the children).

### *Formal support*

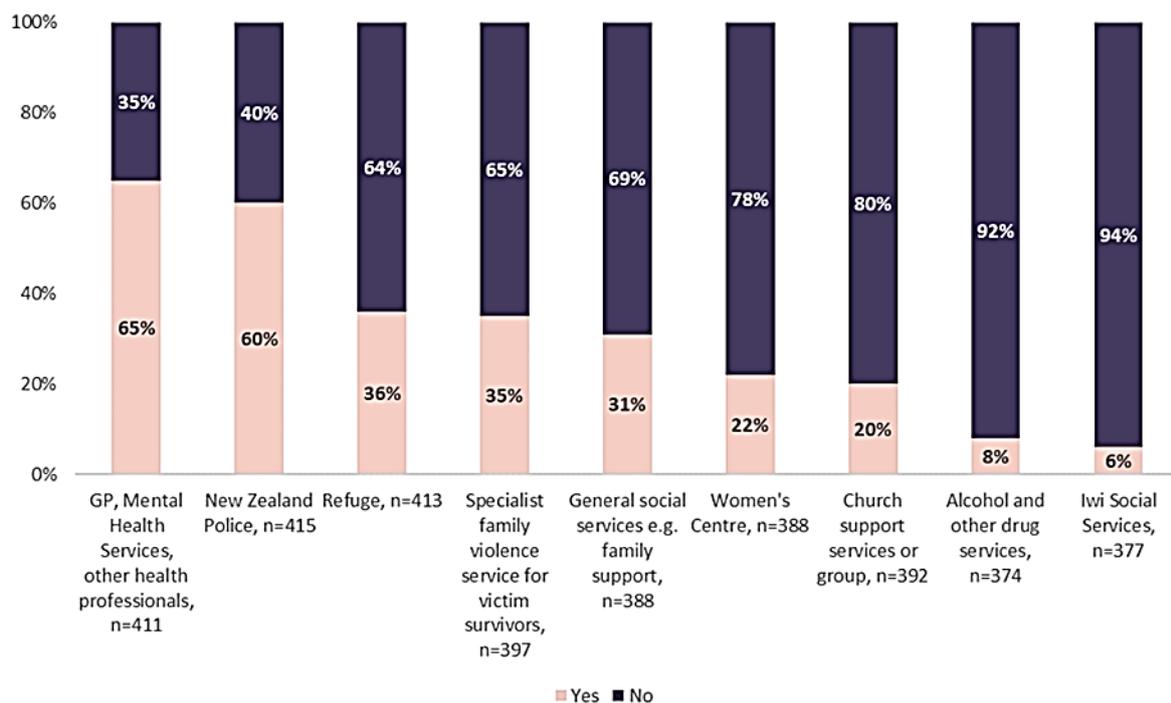
Women explained they had used a range of formal support services including Police, family violence services and other general types of support services.

The survey responses show that many women who are victim-survivors of family violence are not accessing or using formal support services (see Figure 14). When they do use services, it is more likely to be from a G.P, Mental Health services, and other health professionals (65%) followed by Police (60%) than other types of support.<sup>24</sup> Women were much less likely to indicate they had used specialist family violence services and even less likely to use other kinds of support services like social service agencies, church support or iwi social services. However, using a service is not always synonymous with finding the service helpful and further discussion about helpfulness is presented later in this report.

---

<sup>24</sup> Please note the differences in use of Police for women by age, ethnicity and type of family violence as discussed below.

**Figure 14: Services women used**



There were some differences in the types and likelihood of services being used depending on women’s ethnicity, the type of family violence they experienced and their age.

Younger women aged 25 and under were less likely than women aged 26 and over to access any of the support services except for medical services and general social services (each of which they accessed at similar percentages to all groups).

Māori women were slightly less likely than Tauīwi women to access Refuge (<5%),<sup>25</sup> less likely to access specialist family violence services (<14%), less likely to access general social services (<7%) and medical services (<6%). However, Māori women were much more likely to use iwi social services (>20%), slightly more likely to use drug and alcohol services (>5%) and church services (>5%) than Tauīwi women.

In comparison to women experiencing violence and abuse in an intimate partner relationship, women who experienced abuse from a family/whānau member were less likely to use refuge (<18%), specialist family violence services (<6%), general social services (<10%) but more likely to use iwi social services (>7%), church services (>13%) and alcohol and drug services (>11%). This finding could be related to the higher proportion of Māori women represented in the cohort of participants who experienced violence and abuse from a whānau/family member.

We found that participants who said the abuser was a female, were more likely than those with a male abuser to say they did not utilise any support from services (39% compared to 7%). This finding shows how important it is that the Whānau Resilience programme

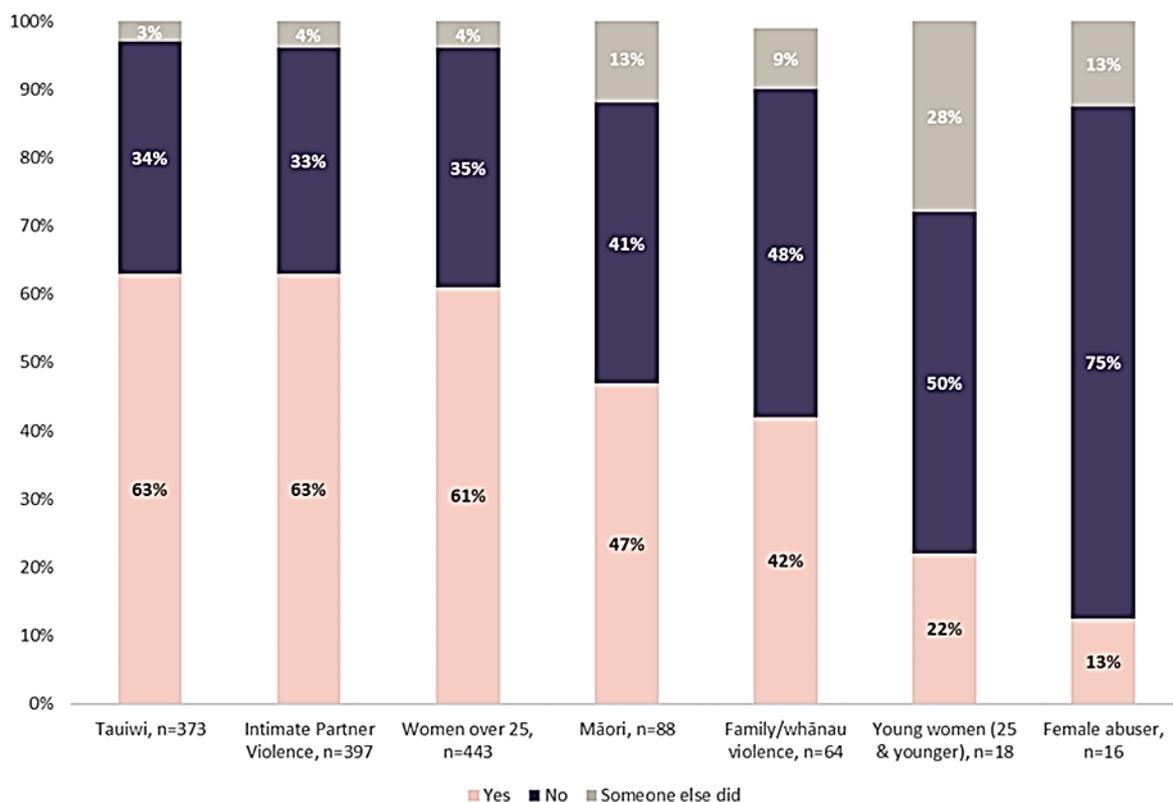
<sup>25</sup> To indicate number of percentage points lesser than comparison group (<), to indicate number of percentage points greater than comparison group (>).

undertake more research into the needs of members of the LGBTQI+ community and targets particular support to victim-survivors of family violence who have been abused by a female member of their family/whānau.

## Police

NZ Police report that they investigated 11,266 to 133,028 family violence related incidents in 2018.<sup>26</sup> However, it is estimated that Police only hear about 24% of all incidents.<sup>27</sup> We were therefore interested that many of the women who took part in this survey said they had reported the violence and abuse to the Police (60%), a further 35% said they had not and 5% said someone else had.

**Figure 15: Reporting rates to Police**



However, when we analysed the reporting rates by age, ethnicity and type of family violence we found that there are differences in women’s reporting rates to the NZ Police influenced by these factors (see Figure 15). Women more likely to report the violence and abuse to Police include Taiuiwi women who were in intimate partner violence situations and who were aged 26 and over. Women least likely to make reports to Police were victim-survivors whose abuser was female (13%) and younger women aged 25 and under (22%).

<sup>26</sup> Every Four Minutes Office of Prime Minister Chief Science advisor <https://cpb-ap-se2.wpmucdn.com/blogs.auckland.ac.nz/dist/6/414/files/2018/11/Every-4-minutes-A-discussion-paper-on-preventing-family-violence-in-New-Zealand.-Lambie-report-8.11.18-x43nf4.pdf>

<sup>27</sup> Ministry of Justice. New Zealand Crime and Safety Survey 2014. Retrieved December 2019 from <https://www.justice.govt.nz/justice-sector-policy/research-data/nzcass/>

There were also differences in the likelihood that someone other than the victim made the report to police across the different cohorts of participants. Māori women and women aged 25 and under were much more likely to say that someone else had reported the violence and abuse to the Police.

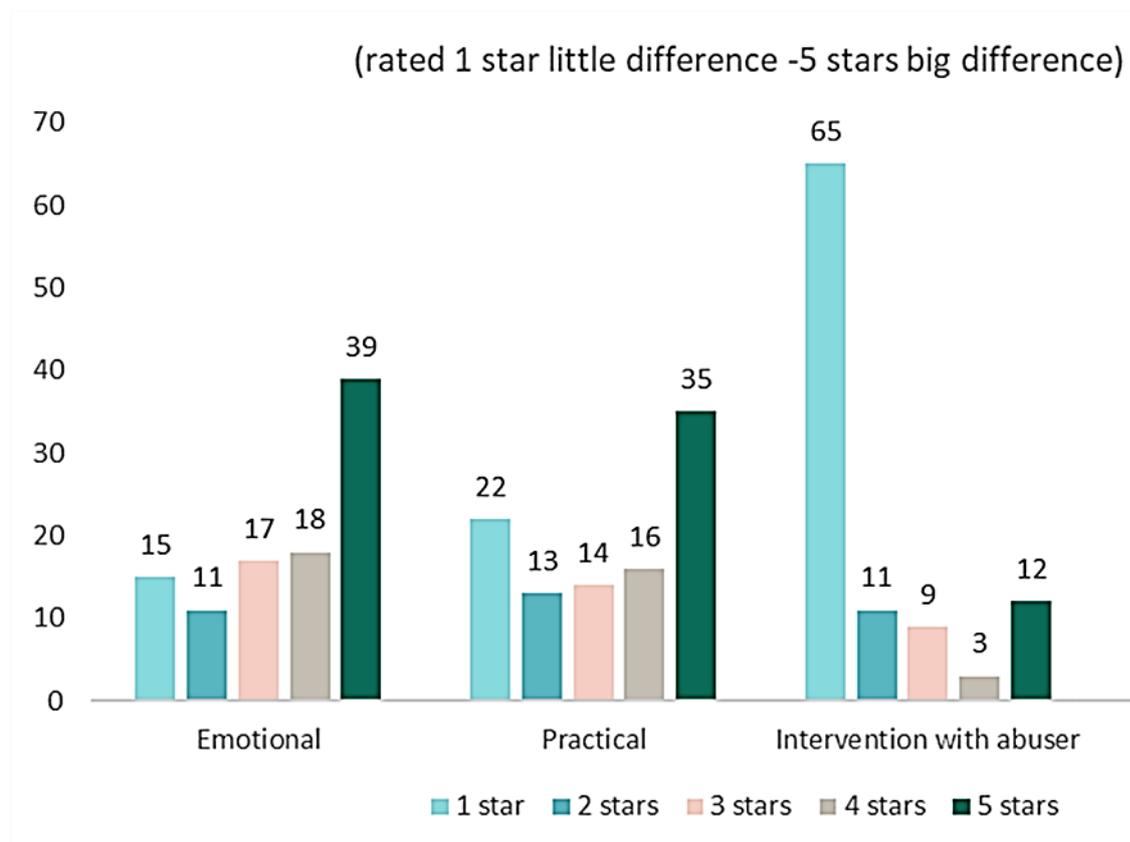
# When the response system works: enablers to women’s wellbeing, safety and recovery

As described in the previous section, participants had used a range of supports and services (informal and formal) in their attempts to get safe and recover from the violence and abuse. In the following section we detail the types of support and services that made a positive impact for the survey participants and why this was so.

## Informal support that helps

Informal support from friends, family/whānau, neighbours and work colleagues can help women towards safety and recovery. Many participants sought informal support (emotional, practical or intervention with the abuser) however, the difference the help made was rated much higher for emotional and practical support than for intervention with the abuser (see Figure 16). This finding highlights that informal support networks are unlikely to be specialised in engaging with abusers effectively and are not well suited to providing this kind of support.

**Figure 16: Difference informal support makes (emotional n = 406, practical n = 383, intervention with abuser n = 350).**



Many women described in more detail a range of informal supports which they found helpful and why they were helpful. Their responses were sorted into the following themes (listed in the order of most common to least common for each type of support).

**Table 1: Other informal supports that were helpful (n = 228)<sup>28</sup>**

<p><b>Emotional support from friends and whānau/family</b></p>	<ul style="list-style-type: none"> <li>• Being believed.</li> <li>• Listened to.</li> <li>• Experiences validated.</li> <li>• Able to talk through issues and options.</li> <li>• Safety planning.</li> <li>• Checking in from time to time.</li> <li>• Others sharing their experiences of violence and abuse with her which helped her feel less alone.</li> <li>• Giving women time out from the abuser (a place to visit, conversations, interests and activities that the abuser was not involved in).</li> </ul>
<p><b>Practical support from friends and whānau/family</b></p>	<ul style="list-style-type: none"> <li>• Providing a safe place to stay.</li> <li>• Financial assistance to relocate to another region or country.</li> <li>• Financial assistance for rent or moving house/furniture.</li> <li>• Helping her to move to a new house.</li> <li>• Food.</li> <li>• Transport/petrol.</li> <li>• Providing childcare.</li> <li>• Preparing affidavits for court.</li> <li>• Accompanying and supporting her in appointments or communications with the abuser.</li> <li>• Helping her find a place to stay.</li> <li>• Physical support when she is in danger.</li> <li>• Sharing information about what family violence is.</li> <li>• Sharing information about services and resources available.</li> <li>• Financial advice.</li> </ul>

---

<sup>28</sup> 45 of these participants used the open text option to explain they did not receive support.

### Other supports that helped\*

- Gifts.
- Medical professionals.
- Security systems.
- Police.
- Counsellors.
- Women's Refuge.
- Church/faith.
- Social Worker.
- ALNON.
- Life coach.
- Lawyer.

*\* Some of the other supports that women detailed in this section would be classified as formal support services rather than informal.*

## Formal services that help

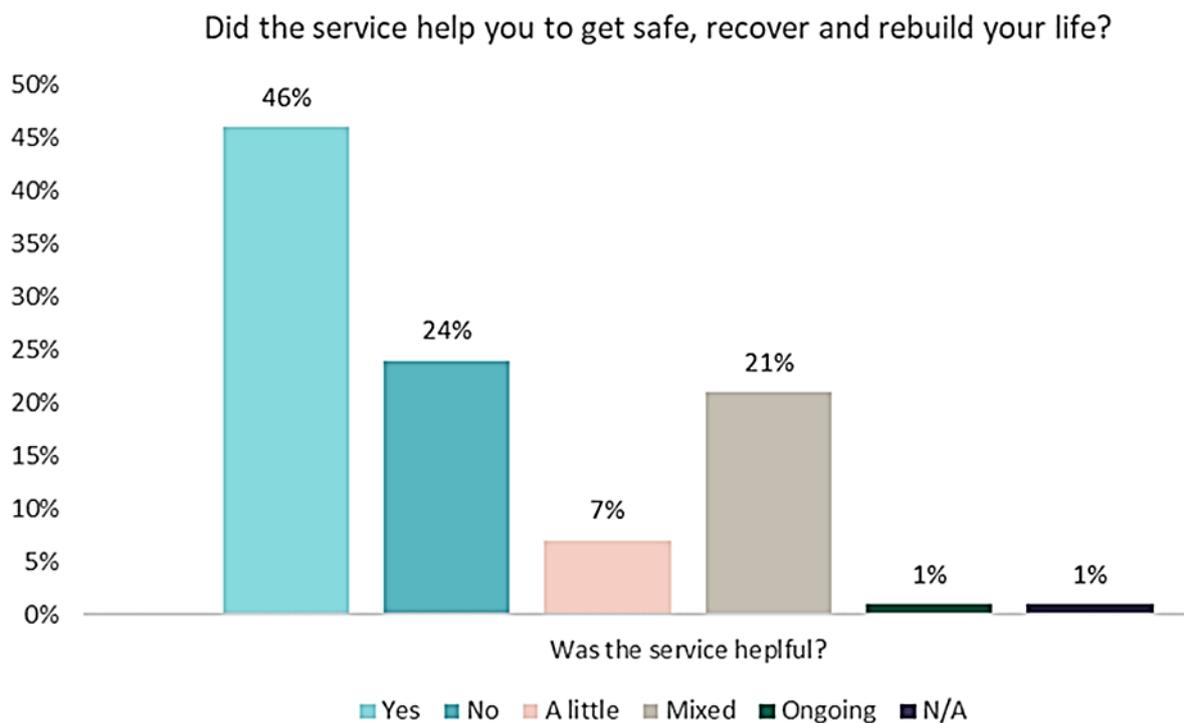
Participants explained whether formal services were helpful to them or not, which were helpful and in what ways. A significant number of women indicated that the support they received was helpful (46%), however, others had a mixed reaction<sup>29</sup> or felt the service had only helped a little. Figure 17 provides a general overview of women's perceptions of how helpful the services they used were.<sup>30</sup>

---

<sup>29</sup> Mixed – refers to responses where women indicated some services had been helpful and others they used had not been or had made their situation worse.

<sup>30</sup> These responses were not related to any particular services but rather related to their general experience of using formal support services (as shown in Figure 14).

**Figure 17: Helpfulness of formal services (n = 338)**



Participants were asked to list the service that they found had been the *most helpful*. The following table lists the different services participants said were the most helpful to them and the percentage of participants who thought the service was the most helpful that they used.<sup>31</sup>

**Table 2: Most helpful services (n = 328)<sup>32</sup>**

Type of support/service	% who selected support as being <i>the most helpful</i>
Specialist family/sexual violence service	39%
Counselling	18%
Mental Health services.GP, psychologist, ACC sensitive claims therapy	15%

<sup>31</sup> Some participants named more than one service as being helpful and therefore while 328 women answered this question there were 354 different services or experiences with services described.

<sup>32</sup>Support from family and friends was rated the highest in terms of women’s recovery (see later in the report). However, this question focused on experiences with formal support services and so much fewer women discussed this kind of support in their comments.

Police	12%
None were helpful	7%
General Social Services	5%
Church	4%
Lawyer	3%
Family and friends	2%
Iwi and kaupapa Māori social services	2%
Information they found	1%
Colleagues	1%
Children's Commissioner	1%

Services more often used are not necessarily the *most helpful* to victim-survivors. For example, while participants were more likely to use G.P.s and health professionals for support (65% see Figure 14) only 15% of women said health professionals were the *most helpful* (see Table 2). In comparison, although only 35% of participants said that they used specialist family violence services to get safe and recover, these kinds of services received the highest amount of responses as the *most helpful* service participants had used (39%).<sup>33</sup>

## How the support was beneficial

Participants indicated that support services were beneficial if they were victim-survivor centred including that they:

- Understood family violence and the abuser's tactics.
- Listened to and were directed by what the woman wanted and needed.
- Kept her information private and secure.
- Did not require her to attend meetings or sessions with the abuser.
- Put her safety and that of the children at the centre of everything.

Some women said that the support they received from services was not beneficial (12%) or that they did not access any formal support services (8%).

---

<sup>33</sup> Not all participants answered both questions about services used and services most helpful therefore some caution should be exercised in this analysis – it is an indicator only.

**Table 3: How support from services was beneficial (n = 396)**

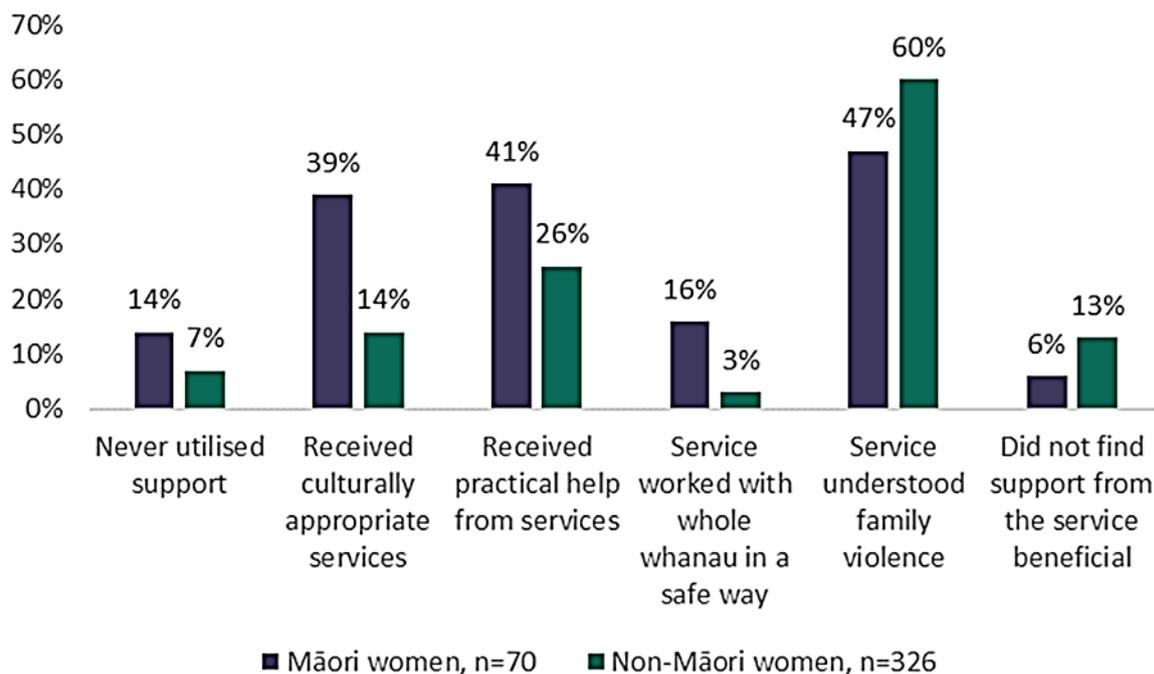
How support was beneficial	Percentage of responses
They involved the abuser in programmes, meetings, sessions in a safe way that was positive for me and the children	2%
They worked with the abuser to make them stop using abuse	3%
They helped me connect with whānau for ongoing support	4%
They understood and responded to specific needs for the LGBTQI+ community	4%
They helped me find safe support who could help me with the children (childcare, clubs, activities)	5%
They worked with my whole whānau in a safe way	6%
They were accessible for me and my whānau and understood and responded to our particular needs due to my or the children's disability	6%
I never utilised any support	8%
They offered me parenting programmes	9%
I didn't find any support that I received beneficial	12%
Other	14%
They worked in a culturally appropriate way that valued my cultural practices and beliefs	18%
They connected me with other support networks in my community (support groups etc.)	20%
They worked with just me and the children and didn't involve other whānau	23%
They delivered practical help (food, accommodation, support with the children etc.)	29%
They were available when I needed them - no waitlist etc.	35%
They put the safety of me and/or the safety of the children at the centre of everything	37%
They did not require me to do programmes, meetings, sessions with the abuser	40%
They kept my information private and secure	54%
They listened to what I wanted and needed and responded to that	55%
They understood family violence and the abuser's tactics	58%

Some women (56) chose to leave comments about positive experiences with support services. Their responses included that the service had:

- Listened to them and understood their situation.
- Helped them build their self-esteem.
- Provided practical and useful help like food or money for petrol, help with housework.
- Provided support that helped them make sense of their situation like counselling and therapy and mental health services.
- Helped them get safe such as securing their home or helping them get away from the abuser, or removed him, referred him into a stopping violence programme or provided legal advice.

There were some significant differences for how the services were perceived as being beneficial (or not) between different cohorts of survey participants. Māori women were more likely to indicate that services were beneficial when they were culturally appropriate, provided practical support and worked with the whole whānau.

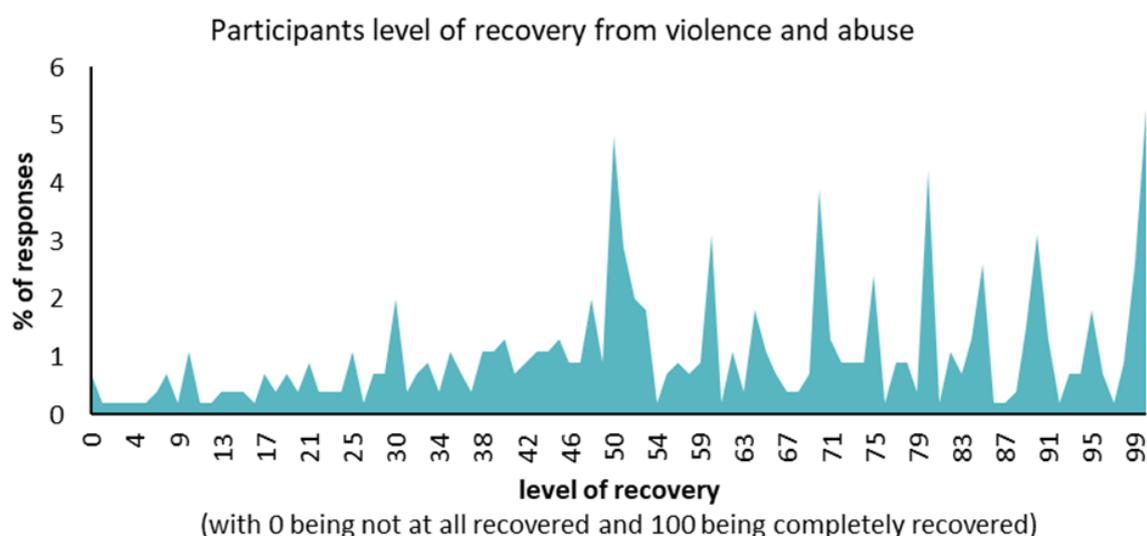
**Figure 18: How services were helpful by ethnicity**



## Recovery and factors that helped

Participants were asked to indicate using a sliding scale (with 0 being not at all recovered and 100 being completely recovered) how much they felt that had been able to recover from their experience of violence and abuse and rebuild their lives. Overall, more participants indicated that they were further along towards recovery than not, with 33% of participants selecting the 0 – 49 range and 67% of participants selecting the 50 -100 range. However, only 5% of participants indicated they were fully recovered from their experience.

**Figure 19: Recovery of survey participants (n = 456)**



Some differences emerged when comparing the participants who were least recovered (0 - 20 on the slider) with those who were most recovered (80 – 100 on the slider). The following table shows that participants who said they had recovered the least were more likely to have been separated from their abuser for five years and under, were far more likely to live with a disability, more likely to identify with the rainbow LGBTQI+ community and have children, than participants who indicated they had mostly or fully recovered. In addition, participants who had least recovered were far more likely to say that their abuser **had not** stopped using violence abuse towards them. Many of these women discussed ongoing experiences of psychological abuse and stalking from the abuser post separation and many said that the abuser was using the Family Court to further abuse her.

**Table 4: Recovery of survey participants (least recovered n = 38, most recovered n= 136)**

Experiences	Least recovered	Most recovered
% who are Māori	16%	29%
% (ex) partner is abuser	76%	84%
% family member is abuser	16%	8%
% dating relationship	8%	7%
% with disability	42%	7%
% who identify with LGBTQI+ community	11%	5%
% with children	95%	85%
% where abuser is male	89%	97%

% separated from abuser for under 2 years	26%	2%
% separated from abuser 3 – 5 years	34%	10%
% separated from abuser 6+ years	18%	71%
% who had to escape for their own safety	26%	29%
% where abuser is still using violence and abuse	84%	15%
% where abuser has stopped using violence and abuse	16%	75%

We analysed the responses from participants who indicated they had mostly or fully recovered (chosen 80 -100 on the slider) to ascertain any key aspects of support that may have led to this recovery.<sup>34</sup> We found that there was little difference in the supports that these women recorded as being the most beneficial to recovery compared with women less recovered (0 - 79 on the slider). Both groups explained that family, whānau and friends, counselling and their own thoughts and feelings and distance from the abuser were the most beneficial to their recovery. One difference that did emerge between the two groups however, was that women who felt they were most recovered were less likely to say that family violence services or domestic violence programmes had been the most beneficial support in terms of their recovery than women less recovered.<sup>35</sup>

Survey participants described what they thought was the biggest factor that helped them to recover (see Figure 20). The following discussion outlines the overall themes that emerged from the responses provided (409). There were many factors that women described as being beneficial to their recovery however, formalised system level support (Police, Protection Orders, family violence services) was far less likely to appear on the most beneficial list compared with women’s own networks and resources. Key themes which emerged from the participants’ comments are discussed below.

### *Good support from friends and family/whānau*

Good support (empathetic, practical, nonjudgmental and enduring) from their friends, family and whānau was the highest mentioned factor that participants said was most

---

<sup>34</sup> There were 120 out of 136 women who provided comment from this cohort.

<sup>35</sup> Only 5 out of 120 responses from women most recovered mentioned family violence agencies or programmes compared with 19 out of 37 responses from women least recovered.

beneficial in their recovery. They explained that this kind of support often helped them feel validated and believe that they did not deserve to be abused and often made them safer.

### *Access to counselling and therapy*

Having access to counselling, therapy, or a psychologist was the second most mentioned beneficial factor for participant's recovery. This support helped them emotionally and psychologically to understand, make sense of and recover from the abuse. Many women discussed how important it was that this person understood family violence and trauma.

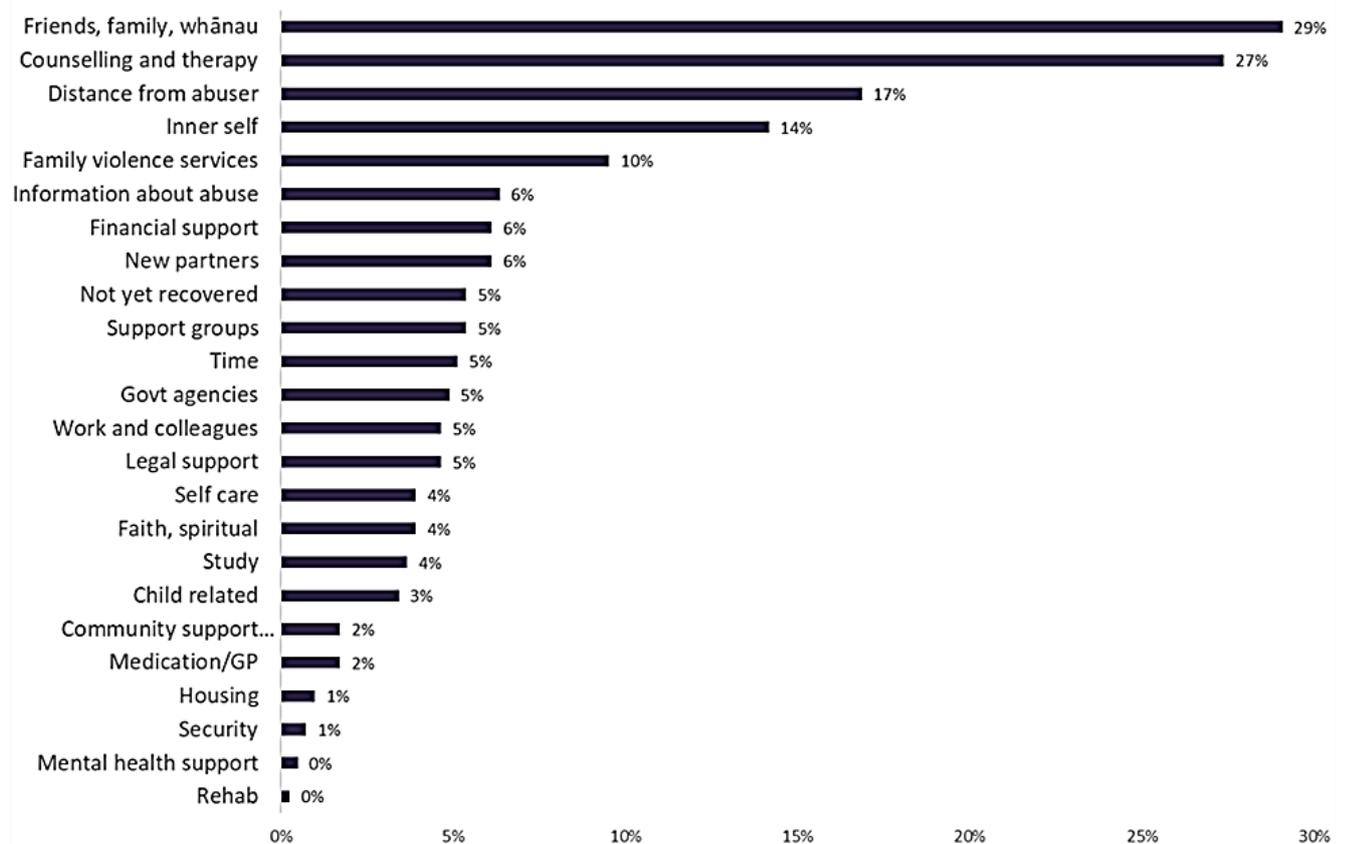
### *Distance from the abuser*

Distance from the abuser had made a big impact on many women's and their children's recovery. For many, geographical distance came from being able to relocate to other towns or countries. Some no longer had contact because the abuser had died or was in jail.

### *Inner thoughts and beliefs*

A significant number of participants discussed how important their own thoughts, beliefs and reserves had been to their recovery. These women explained that because there was so little support available, they were forced to rely on their own determination, resilience, survival instinct and intuition, value system, strength, and belief in themselves to get safe and recover. Some women talked about how their ability to reflect on their experience had given them some ability to recover and for some this came through the act of telling or sharing their story or writing it down.

**Figure 20: Most beneficial support for recovery (n= 409)**



*\*Govt agencies refers to WINZ, IRD, Police*

*\*\*Self-care refers to things like yoga, exercise, animals, hobbies, doing things that bring joy.*

*\*\*\*Family violence services refer to Refuge, other family violence agencies, women’s domestic violence programmes.*

*\*\*\*\* Issues related to their children included having access to counselling and therapy for their children, for others this was focused on being very determined to keep their children safe from further violence and abuse which helped them focus on recovery for the family/whānau.*

# When the response system fails: barriers to women's safety, recovery and wellbeing

For many women, recovery is a long-term goal that is often delayed due to the lack of protection from the abuser, a lack of support and services available and due to the devastating impact their experiences have had on them emotionally, psychologically, physically and materially. In the following section we detail the barriers to women's safety and recovery which impact on their sense of wellbeing. We discuss what types of support and services are unhelpful and why this was so.

## Barriers to getting safe and recovery

Recovery is not possible for victim-survivors unless they are safe from abuse. Many participants (400) explained things that had stopped them being able to get safe and recover from the violence and abuse. The barriers are presented under a number of common themes below.

### *Ongoing abuse*

Many participants said they were unable to stop the abuser having contact with them and this put them at risk of ongoing violence and abuse. Women talked about abusers stalking them online and in person, finding their whereabouts, using others to harass them, spreading rumours and lies about them in the community or to the children, breaking into their house or living in the same community where bumping into him was always possible. For some, forced contact happened during contact regarding the children (access changeovers, guardianship decisions) and shared parenting arrangements in which the abuser would abuse the children and her. The lack of control over contact with the abuser often left women feeling terrified, scared and anxious and impacted on their lives, in some cases it resulted in them changing their behaviours in order to try and avoid seeing him. Some women said they felt they would never be safe.

### *Structural system issues*

Women described many examples of how the system that they thought would help them get safe instead enabled further abuse by forcing them into ongoing contact with the abuser (resulting in abuse and inability to recover).

### *The Family Court*

A significant number of participants talked about the Family Court proceedings which stopped them being able to get safe and recover from the abuse. These women described a range of practices and orders that inhibited their ability to get safe including:

- Orders preventing them from relocating to another region where it was safer or where their support networks were.
- Ongoing court proceedings and applications filed by the abuser which forced them into ongoing contact and litigation abuse.

- Orders for care and contact of children that meant the children were forced into ongoing contact with the abuser.
- Professionals working in the Family Court not believing her or the children about the violence and abuse resulting in the victim-survivor feeling retraumatised and abused by the system.
- The abuser using court ordered contact to destroy the victim-survivor's relationship with the children and using the children as the new weapon of abuse.
- Orders that resulted in her losing custody of children resulting in overwhelming grief.
- Being denied protection against the abuser and therefore always at risk of further abuse.
- Abusers using the Hague Convention to abuse her and take the children.

### *Other state agencies*

Some women said that the Police responded poorly, not believing their experiences, playing down the risk they were under, not following up on Protection Order breaches, giving poor information and being judgemental. Many women talked about receiving a poor response from WINZ and feeling judged and not believed and finding it very difficult to access financial support. Some women explained that their interaction with Oranga Tamariki (CYFS/OT) had been very negative and people working in this department did not have a good understanding of violence and abuse and therefore their involvement did not help the victim-survivor and her children get safe or recover.

### *Operational issues*

Participants talked about operational issues which resulted in poor practice that stopped them being able to get safe including services not working in a coordinated way, organisations breaching victim-survivor's privacy and leaking information about them which put them and the children in great danger, agency staff not believing women and children about the violence and abuse they had experienced and then not responding to them and in some instances providing poor or wrong information. Some said that they felt agency staff judged them and treated them badly for ending up in a violent relationship or showed no empathy towards them.

### *Lack of resources available*

Many participants talked about the lack of resources and support that was available to help them get safe and recover.

### *Counselling and therapy*

A lack of support to deal with the trauma they experienced as a direct result of the violence and abuse was particularly evident in participants' responses. Many women said there were no services available where they lived that provided therapy for dealing with trauma, no counselling support or the counselling and therapy was expensive so they could not access it. Others talked about not being able to access any trauma support for their children or other interventions when children were dealing with the impact of the violence and abuse. Mothers also talked about a lack of understanding about the violence and abuse by people working in services or educational settings who responded to the children as if they had 'behavioural issues' rather than seeing these children as being impacted by the abuse.

### ***Practical help***

Some participants described the lack of actual practical help and commented that they were just passed from person to person through a series of agency referrals that never resulted in concrete help or solutions. A lack of kaupapa Māori services was also mentioned.

### ***Long term support***

Some women talked about a lack of ongoing support and said that support was only available when they were in a crisis but there seemed to be nothing to help them when they were triggered by events around them back into feelings of distress and needed support over the years to come. This was also an issue for their children.

### ***Health***

Some women commented that medical support was lacking to help them with the injuries they sustained from the abuser, or the health conditions they suffered as a result of the violence and abuse. Some discussed the poor response by people working in the health sector to recognise and respond to the violence and abuse.

### ***Safe accommodation***

Many women talked about their struggle to find and pay for a safe place to live. Women talked about how difficult it was to afford rent as a sole parent and how hard it was to find accommodation that was safe for them and their children. Women mentioned the lack of information available about financial support available for housing costs. Some talked about how hard it was to get practical support because they were perceived by workers as not needing help (on the outside they appeared 'OK' but they were not OK).

### ***Life demands***

Other women talked about how difficult it was to cope with the logistics of juggling the demands of being a mother and working and dealing with the impact of the violence and abuse for themselves and their children. Women talked about being very stressed and at breaking point and being very alone in their struggle. Women said they were so busy coping with the demands on them they could not take time out for themselves to work on their own recovery. Some mentioned that there was a lack of safe respite care for their children so that they could have a break or attend counselling or therapy.

### ***Impact of abuse***

The experience of violence and abuse had a serious impact on women's financial situation which in turn impacted on their ability to get safe and recover. The financial abuse experienced during the relationship with the abuser, and the resulting poverty, made it very difficult for women to recover once they were no longer in the relationship. Many women described expensive and ongoing Family Court proceedings that were forcing them into debt. Others detailed how they had battled to get relationship property owing to them. Women struggled to earn enough to support their children, buy food, pay for accommodation etc. Women described abusers failing to pay child support – or forcing them to pay child support, which crippled them financially. Many women explained how hard it was to find and secure a stable job while trying to manage ongoing abuse and the

impact that had on them. Some women talked about being too traumatised by the abuse, and their PTSD was such, that they could not work.

### *Own thoughts and feelings*

Participants also shared comments about things that stopped them being able to get safe and recover that related to their own thoughts and feelings about themselves and the abuse. Many explained that the violence and abuse affected their personal functioning. Women talked about feeling anxious and fearful all the time, suffering from depression and Post Traumatic Stress Disorder (PTSD), having nightmares, being triggered by many varied events and things which made it hard for them to participate in society, having flashbacks and bad memories, feeling revictimised when people didn't understand their anxiety and being very sensitive to things and people around them which could easily remind them of the abuse.

Some women described feeling very isolated and not connecting with others around them because they no longer trusted people (especially men) after their experience of violence and abuse. Many participants talked about lacking self-esteem or confidence which made it difficult for them to recover from the abuse. These women explained that the lack of self-esteem was a direct result of the psychological abuse they had been subjected to by the abuser. Some women had internalised negative feelings toward themselves as a result of being a victim including feeling ashamed that they had been abused, feeling like they could no longer be a good judge of people, feeling like they had been a failure in their marriage and feeling judged by the people around them. Some women said they felt guilty for not leaving earlier or for staying because they thought their children needed a father. Other women felt that they still loved the abuser and struggled with conflicting feelings about their experience which made it hard for them to recover.

### *Society*

Some participants said that the way society responds to violence and abuse was an obstacle to their ability to get safe and recover. Participants explained that many people around them did not understand violence and abuse and how serious it can be: this stopped them getting the support they needed. Others said they were pressured by their family to stay with or have continued contact with the abuser for the sake of the wider family or the children.

Several participants felt that family violence is accepted and normalised in New Zealand and that this stops people believing victim-survivors when they disclose the abuse and stops an effective response. Many women said that the people around them did not believe them about the violence and abuse and some said they were too scared to talk to anyone around them in case they weren't believed, or in case the abuser would find out and hurt them. Others said they were scared if they reached out for help their children might be taken from them.

Participants explained that it was really difficult for them that their families and others around them did not validate their experiences of abuse. They wanted people to acknowledge that what they had experienced was abuse and was not OK.

## Barriers to accessing support services

Survey participants shared a number of reasons explaining why they found it difficult to access support services. The most common barrier was financial - that they could not pay for it. This is an interesting finding given that most of the formal family violence services do not charge for their services (Refuge, Police, specialist family violence services). However, many women also indicated that the kind of support that made the most difference for them was counselling and for most women this came at a financial cost.

The second most common barrier participants experienced was that they did not feel safe reaching out for support in case that made their situation worse. In light of the experiences women shared in the survey about using both formal and informal support services, this finding is not overly surprising. Many women talked about the negative perceptions of people they reached out to for support and the ways that the actions of these people made their situation worse and certainly were not helpful.

**Figure 21: Barriers to getting support (n= 298)**

Barrier to getting support	Percent
I can't access the support due to my disability	2%
There is no culturally appropriate support or services where I live	3%
There is no support or services where I live	9%
I have no transport to get to support or services	9%
The support/person/service expect the abuser to be part of the service too (e.g. family counselling/therapy)	12%
I have no or limited childcare	14%
I don't have time to work with support/services	14%
The Family Court has prohibited me and/or my child from using services or talking about our situation	14%
I don't know what support or services are available where I live	14%
I can't get time off work to attend appointments etc.	15%
I don't have any support people who will come with me to meetings, interviews or appointments	15%
I tried contacting support services, but they said they could not help me e.g. housing services	15%
Other	27%

I don't feel safe talking to other people or services in case that makes it worse (e.g. I don't want my personal information known, scared someone will tell the abuser, people I know work in the support services)	37%
I can't afford to pay for the support/services	42%

Some differences were evident between the responses from Māori women and Taiwi women regarding barriers to support. Māori women were *more* likely to indicate that a barrier to them accessing support was that they did not feel safe talking to people about the abuse (46% compared to 35%). However, Māori women were *less* likely than Taiwi women to say affordability stopped them accessing support (31% compared to 44%), the Family Court prevented them or their children engaging with support and services (10% compared to 15%) and that they were not aware of support and services in their area (8% compared to 15%).

Some women (76) chose to leave more comment detailing the barriers for them in accessing support and these have been sorted in themes below.

**Table 5: Additional barriers for accessing support or services**

<b>Fear</b>	<ul style="list-style-type: none"> <li>• Scared the abuser would find out and hurt the child.</li> <li>• Scared abuser would tell people in the community.</li> <li>• Victim-survivor worked in domestic violence sector and didn't want people finding out.</li> <li>• Family/whānau of the abuser or the abuser worked in social services.</li> <li>• Small town and people would find out if she contacted services.</li> <li>• Too scared to leave the house (traumatised by abuse).</li> <li>• No privacy or confidentiality with services.</li> </ul>
<b>Children</b>	<ul style="list-style-type: none"> <li>• Victim-survivor was a child and too young to access help themselves.</li> <li>• Children too young to get counselling.</li> <li>• Family Court and Oranga Tamariki prevented the children getting help or counselling saying this would influence the child's thinking.</li> </ul>

	<ul style="list-style-type: none"> <li>• Abuser used guardianship rights to block services for children.</li> <li>• No childcare to be able to access services.</li> </ul>
<b>Poor response from services</b>	<ul style="list-style-type: none"> <li>• Bad information or service from Mental Health services, Police, WINZ, family violence agencies, victim support, counsellor, or couple counselling which stopped victim-survivor getting help and asking for more help.</li> <li>• Was not believed by services</li> </ul>
<b>Lack of services</b>	<ul style="list-style-type: none"> <li>• No services in the area.</li> <li>• No services at that time (in the past).</li> <li>• No services that were culturally appropriate and non-religious.</li> <li>• Was never offered any services.</li> <li>• Did not know what services were available.</li> </ul>
<b>Own perceptions</b>	<ul style="list-style-type: none"> <li>• Didn't think abuse was serious enough to qualify for help.</li> <li>• Didn't think services were targeted at her demographic.</li> <li>• Too ashamed to reach out to services.</li> <li>• Did not want external help.</li> </ul>

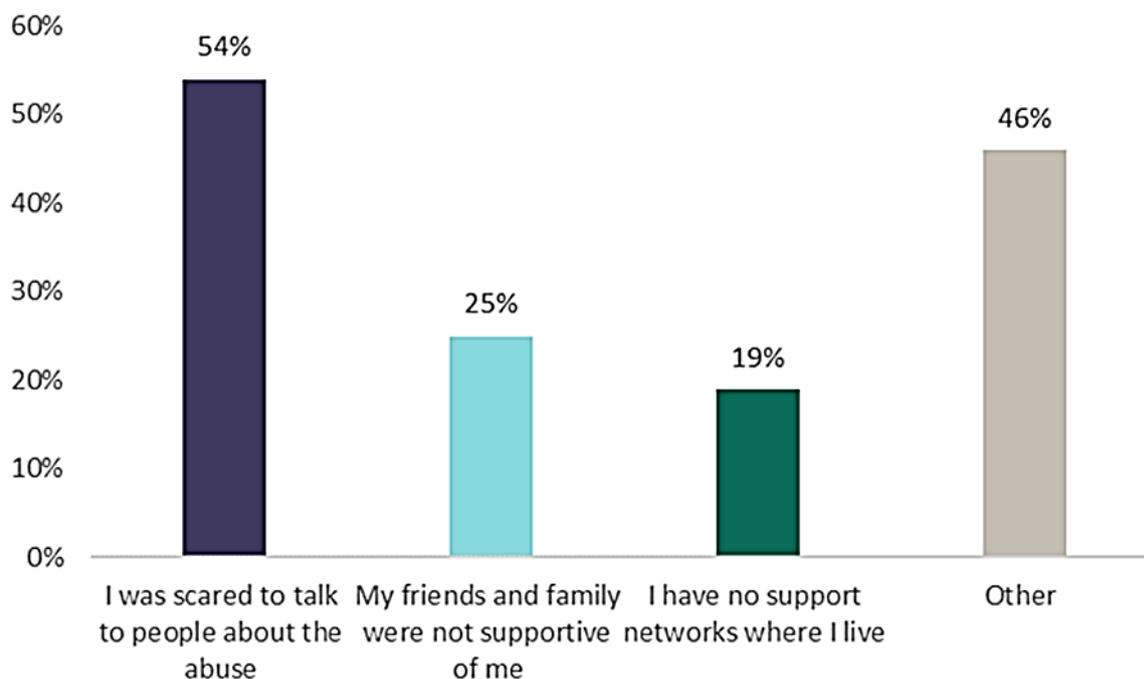
## Unhelpful responses from others

Survey participants shared experiences of reaching out for support but receiving a poor or unhelpful response that impacted on their ability to get safe and recover. The following section details these unhelpful responses from both informal and formal supports and services.

## *Informal support*

Women were invited to tell us the reasons they had not used the three types of informal support from friends, family, whānau, neighbours or work colleagues (as listed previously) and provide reasons for why they did not. Over half (54%) of the women explained their reason for not reaching out to informal support networks for help was because they were too scared to talk to people about the abuse. This was a finding that was also evident in the barriers participants gave for not accessing support services.

**Figure 22: Reasons for not reaching out to informal support networks (n= 292)**



Some participants (132) chose to leave explanations for why they had not used informal support. Their explanations shine a light on the way that poor understandings of the dynamics of family violence by people in the community can impact on the response the victim-survivors receive when they reach out for help, or why survivors resist reaching out based on what they have already observed in their community. Many of these women described internalisation of victim blaming myths which stopped them being able to talk about their experiences. Many also explained that the abuser's manipulative tactics were used to discredit her and charm the people around them into thinking she was lying about the experience of violence and abuse. The following themes (not verbatim) emerged from their responses:

- People did not believe me.
- People sided with the abuser.
- Too ashamed to tell people.
- People don't understand what abuse is so can't help.
- I didn't understand it was abuse, or how serious it was until after I got away.
- Mixed response – some people were helpful others were not.
- People refused to get involved or talk about it.

- Afraid I would lose the children if anyone knew about the abuse.
- Too embarrassed to tell people.
- Didn't want to burden people with my problems.
- Family was not supportive.
- People got annoyed that I did not leave the abuser or that I returned after I had left and then stopped wanting to help.
- The abuser threatened to hurt me and the children if I told anyone.
- Abuse was normalised in the family.
- When I reached out it resulted in a bad response, so I decided not to reach out again.
- I felt guilty for being in an abusive relationship.
- I was scared of what the abuser would do to the people I told.
- Values or beliefs stopped me asking for help.
- He had status in the community, appeared nice/charming/well off etc. so I was not believed.
- The abuser lied to people about our situation and me. They believed him not me.
- The abuser turned people against me.
- I was judged by people.

### *Formal Support and services*

Many women (338) explained the reasons why they had found some responses from services unhelpful. The following themes emerged from their comments.

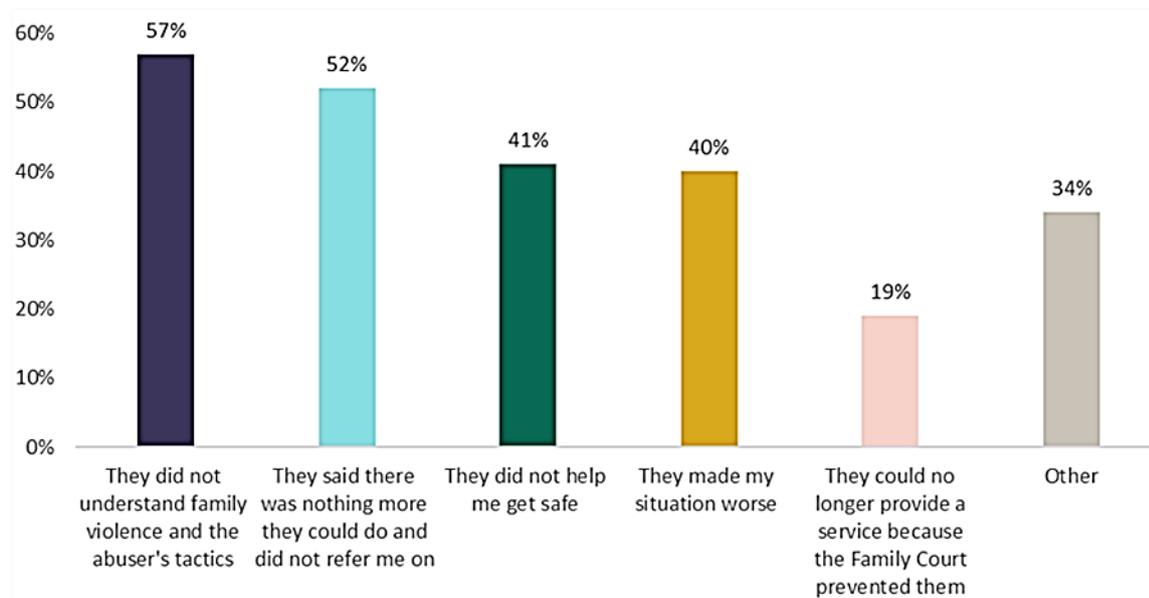
### *Poor response from workers*

Many women said that services either did not help them (41%) and/or made their situation worse (40%). The ambivalence that some women expressed about the response they received from some services was generally related to the way in which the people who were providing the service interacted with them.

The most common unhelpful response reported was that services lacked an understanding of family violence and the tactics abusers use (57%) (see Figure 23). Workers therefore misunderstood the risks and what support was needed. These women said in some cases the services made their situation worse and they felt revictimised by the intervention offered. The lack of understanding also led to some workers blaming victim-survivors for the abuse, not believing their experiences, judging them, putting them down and making them feel small.

For some participants (19%) one part of the system, (the Family Court), prevented them or their children accessing the support and services they needed.

**Figure 23: Reasons responses from services were not helpful (n= 262)**



Some participants (90) described in more detail why support from services had not been helpful. The following themes were evident:

- No childcare so I could not attend.
- Unsafe intervention/practice.
- My privacy/confidentiality was breached.
- They made a notification to Oranga Tamariki that made my situation worse.
- They offered no support.
- They could not help until I could provide physical evidence of the abuse.
- They did not do a safe job.
- I was treated like the abuser.
- The service could not provide support where we lived.
- Children were treated like they did not have valid views.
- I was encouraged to stay with the abuser.
- They sided with the abuser.
- They enabled more abuse.
- Victim blaming.
- Did not believe me.
- I had to beg for support.
- Long waiting lists.
- They did not understand the legal system and gave me poor advice and information.
- I was told to complain but it made everything worse.
- Lack of evidence taken down.
- They misdiagnosed the reason for my unwellness.
- No support available due to funding constraints.
- No one helped me.
- My child was not helped to be safe.
- No understanding about domestic violence.
- No compassion for me.

- No follow up care.
- Said they would call me back but never did.
- Did not listen to me.
- Pressured me to take part in joint sessions with the abuser.
- Did not understand the impact of the abuse on me.
- Told me they couldn't help me because I did not live in their catchment area.

### *Limitations of support provided*

Women also described limitations of the support service impacting on the way the services could continue to support and help them including:

- Not enough services available in their community so service length was limited.
- Long waiting lists for services.
- No choices about which service they could use.
- Services being hard to access.
- Better services costing money therefore not being available.
- Not all issues being addressed by services.
- Difficulty getting services to help with medical issues.
- Short term services offered so they were supported to get safe but not to recover and rebuild their lives.

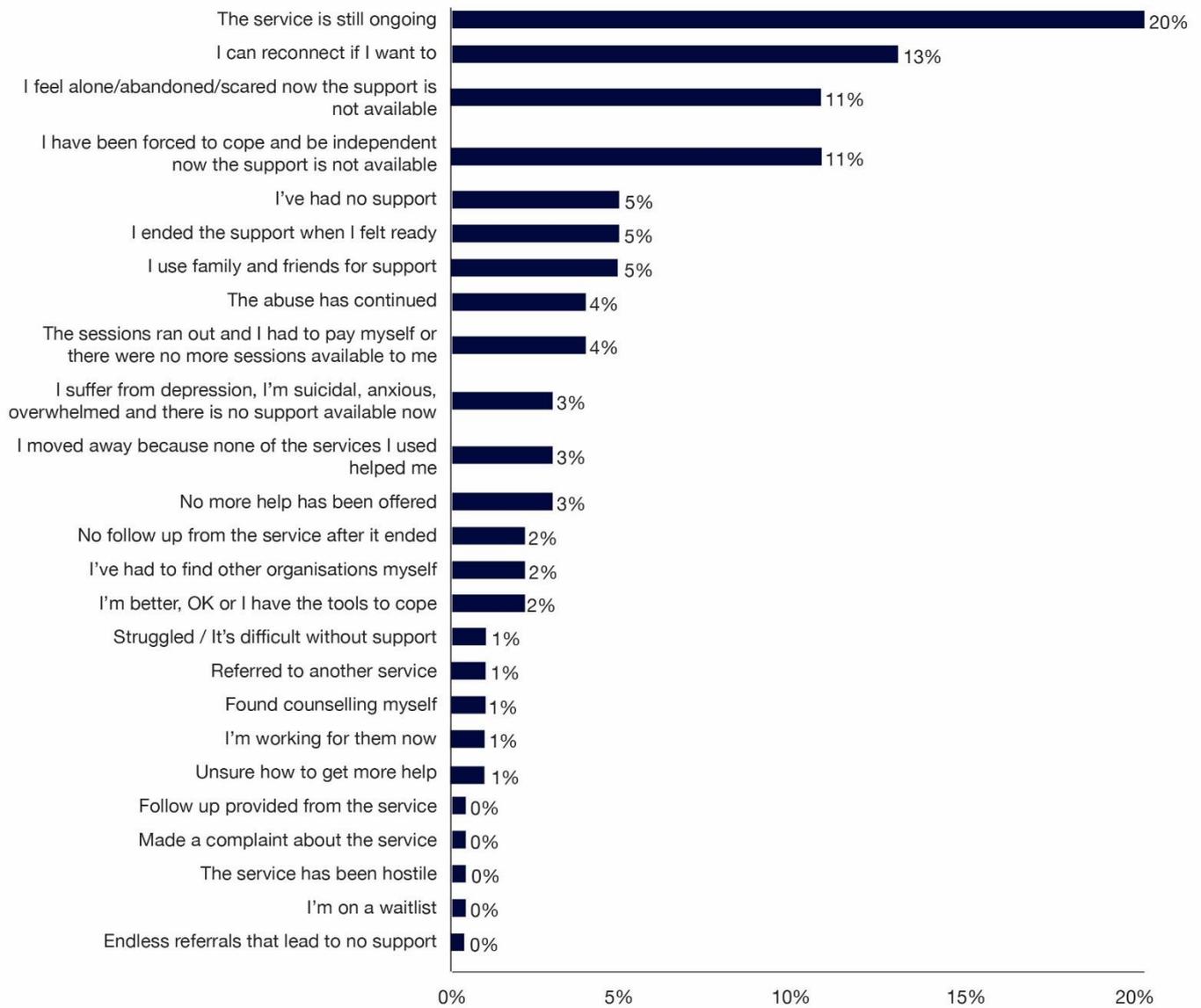
### *Struggle to find the right kind of service*

Women explained that it took time to get the right help. While many women talked about receiving a mixed response from services, that was sometimes a matter of them having to work through a number of services or individuals who offered poor support in order to finally find the person or service who could support them. It was difficult for women to engage fully with services when they were scared of what would happen to them and if they might be punished for sharing information about all the things they needed help with (the help would backfire). Some women talked about how social service agency support was positive but that this was undermined by either the ongoing abuse from the abuser, the Police response or the Family Court response.

### *Inadequate provision and referral system*

Participants were asked what happened when the service they used came to an end. Some women were still receiving support and others felt that they could reconnect with services if they needed them in the future. However, a large number of participants said that services were not adequate or did not refer them to other services that could help. In many cases women were forced to cope with a lack of support when they were still in danger or were struggling to cope with the ongoing impact from the violence and abuse. Some participants detailed terrible feelings of abandonment and isolation and being forced to fend for themselves because support was simply not available or had not been helpful to them and their whānau. The responses (277) have been categorised into themes and are presented in Figure 24 also illustrating the prevalence of each theme.

**Figure 24: What happened when the service ended (n=277)**



\*The outcomes which are shown in the chart with a value of 0% had 1 response each.

# How can the response system be better? What women who are victim-survivors want and need from support and services

*Whānau resilience* is a concept created by the Ministry of Social Development to help design the shape, scope, purpose and outcome of longer-term support for people who have experienced or perpetrated family violence to increase their sense of wellbeing and reduce the prevalence of further violence and abuse.<sup>36</sup> It was therefore important to find out from survey participants what is important to their own and their whānau's sense of wellbeing. This information can help inform what it is that victim-survivors are striving for when they reach out for support.

## The goal – achieving wellbeing for victim-survivors and their whānau

For many of the survey participants their sense of wellbeing and that of their whānau was deeply connected to their ability to be safe from the abuser and to be supported in a range of ways that were informed by a comprehensive understanding of family violence (the dynamics and tactics abusers use). Wellbeing is achieved by the right support and services being available at the right time and for as long as it takes to be safe and recover.

The victim-survivors who took part in this survey want to be safe from the abuser and for most of them that means having their children<sup>37</sup> live with them somewhere safe where they have safe people supporting them who they feel connected to, who also understand family violence and where practical support is available, with enough money to live on so that they can lead full lives without barriers imposed on them (see Figure 25).<sup>38</sup>

There were some differences in how women rated the importance of the wellbeing indicators based on their ethnicity. Women who identified as Māori were *more likely* to rate six of the indicators as being *very important* than Tauwiwi women (see Figures 26 and 27).<sup>39</sup> These six indicators speak to the importance of having a sense of cultural identity that values connection with whānau, hapu and iwi for Māori women and to societal inequalities such as poverty being more likely to be experienced by Māori women than Tauwiwi women due to the impacts of colonisation, racism and less equitable access to support and services.

---

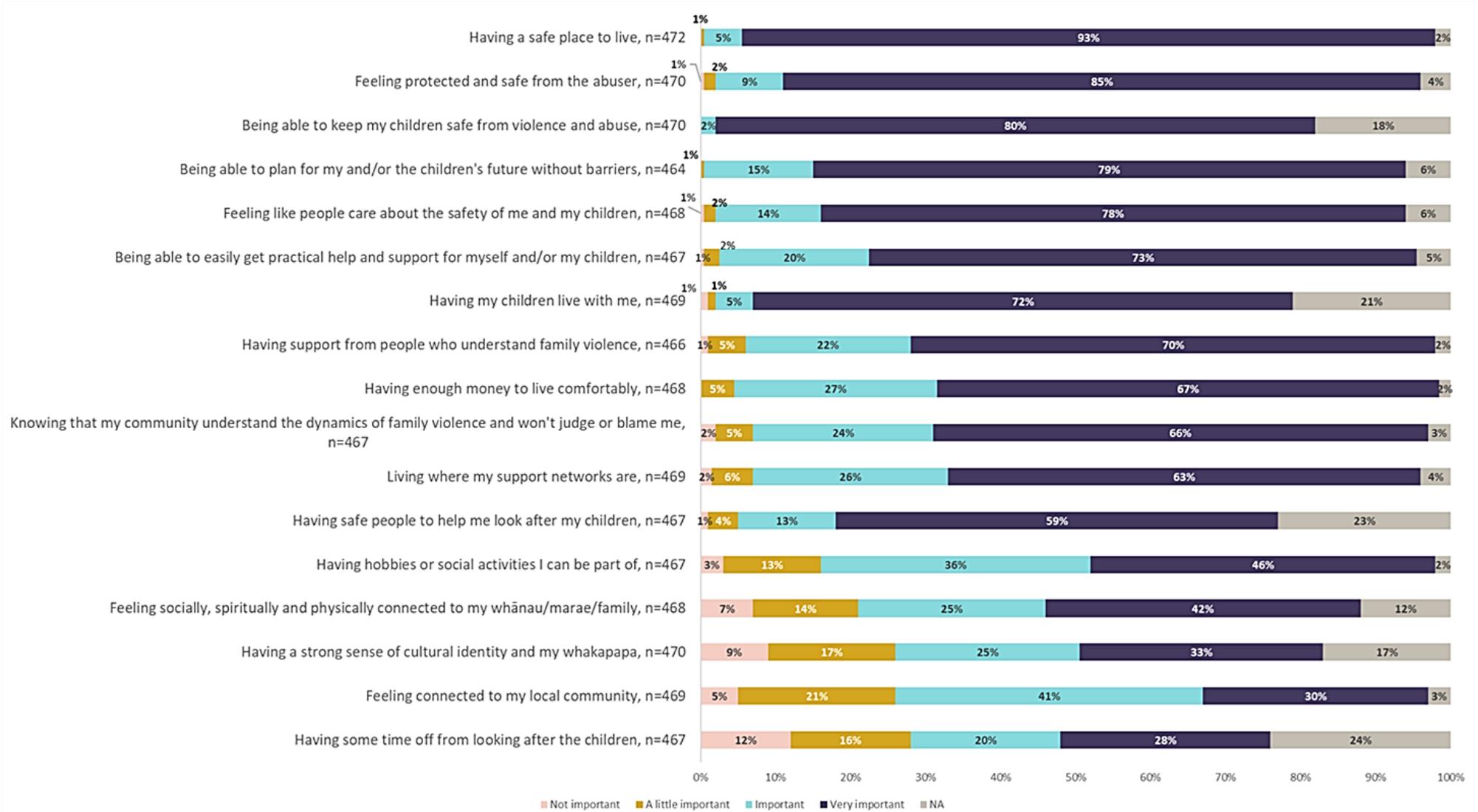
<sup>36</sup> The term 'whānau resilience' may not be well understood by the general public, including victim/survivors. However, 'wellbeing' is a term that although subjective is generally well understood.

<sup>37</sup> Of the 507 participants who told us if they had children or not, 84% indicated that they had children.

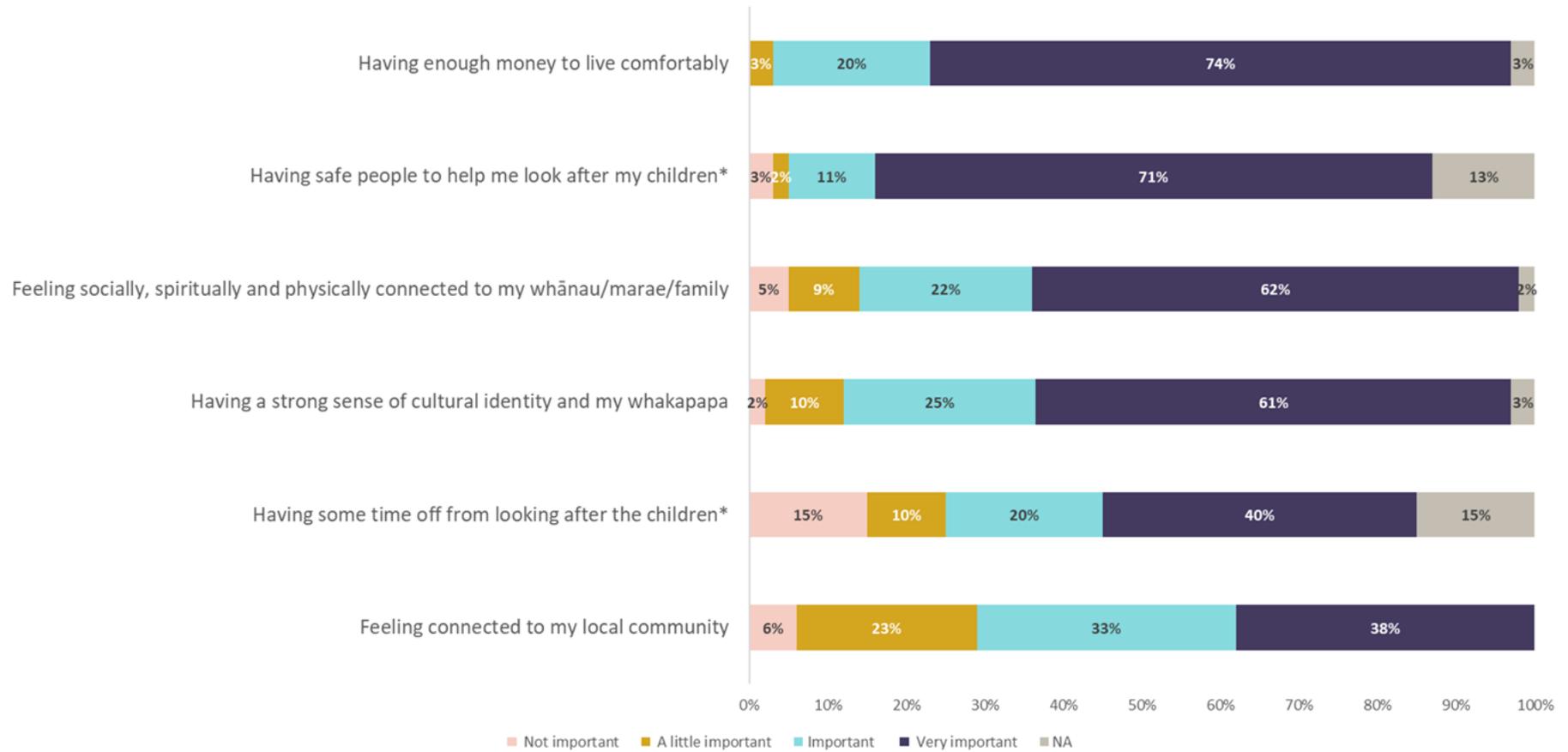
<sup>38</sup> There was an excellent response rate to the wellbeing question with 88 - 89% of survey respondents rating the wellbeing indicators listed in the survey. The number of responses to each of the wellbeing indicators ranged from 464 – 472.

<sup>39</sup> The number of responses from Māori women to the wellbeing indicators ranged from 92 -94 for each indicator. The number of responses from Tauwiwi women ranged from 371 – 378 for each indicator.

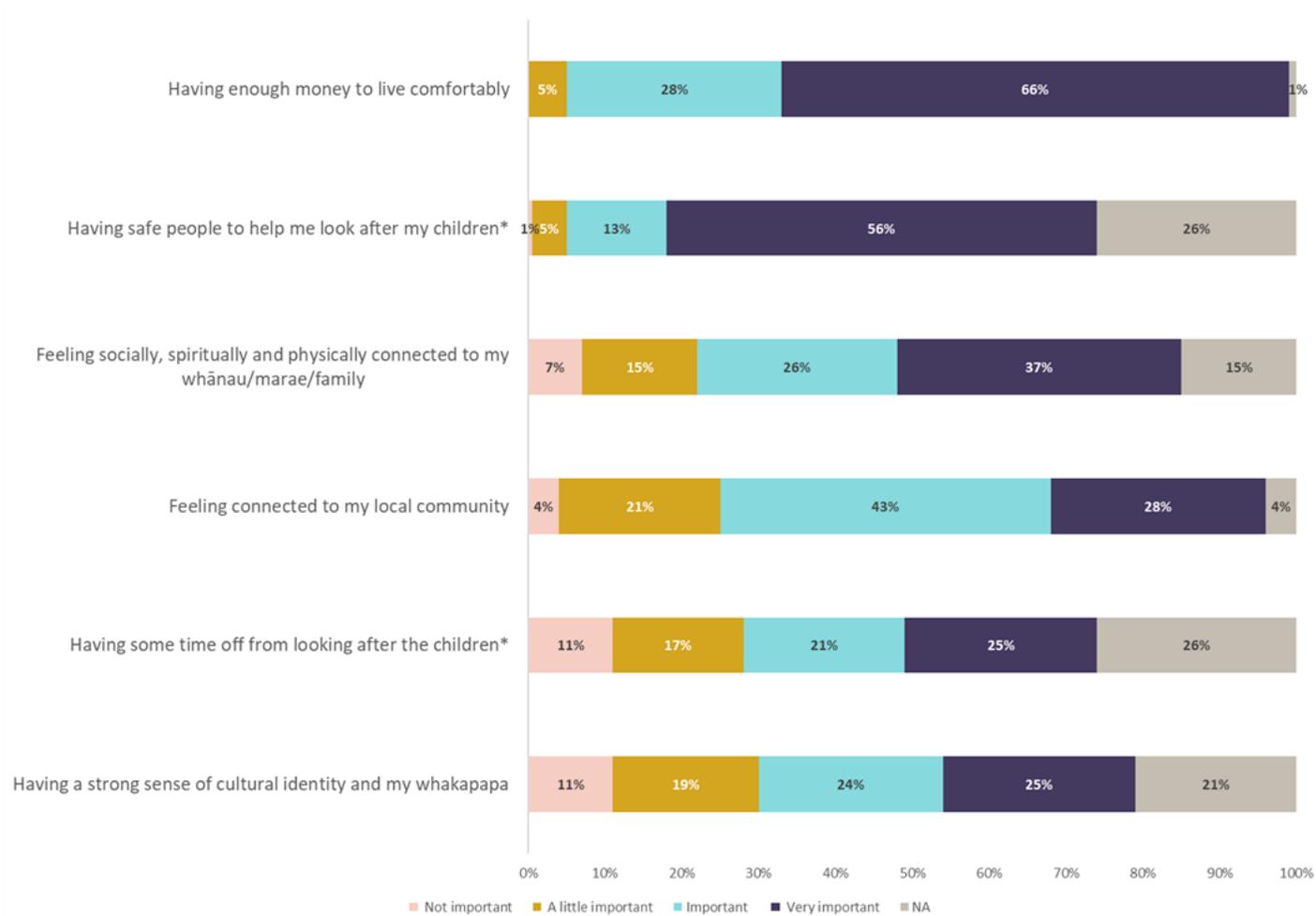
**Figure 25: What is important to participants in terms of their and their whānau's sense of wellbeing**



**Figure 26: What is important to participants in terms of their and their whānau's sense of wellbeing, Māori respondents**



**Figure 27: What is important to participants in terms of their and their whānau’s sense of wellbeing, Taiwi respondents**



*\*Please note Māori women were more likely to report they had children (89%) than Taiwi women (82%).*

Some women (205) chose to tell us about other things which contribute to wellbeing for themselves and their whānau. Most of the responses focus on what support or services these women wanted or needed to help them, and their children be safe and recover from the experience of abuse - most were not already available to them. Many of these suggestions are discussed in more detail later in this section (see Designing a better and safer response system).

## *Safety*

Victim-survivors and their children need to be protected and safe from the abuser and this is very important to their wellbeing. Safety and protection could be achieved in many ways including:

- Having the people working in the system understand family violence and the tactics abusers use and responding to the risks of those behaviours and the impact of abuse for the victim-survivor (including psychological abuse) including not sharing information about the victim-survivor and her children.
- Having a supportive and responsive Family Court system that places child safety as the priority and stops forcing children into contact with abusive parents. Having professionals who work in the Family Court understand family violence and risk. Not enabling abusers to use the Family Court to further abuse the victim-survivor and her children.
- Enabling protective parents to make decisions for their children without the input from the abuser (i.e. ability to relocate, change names, travel overseas to visit family, get counselling).
- Having a safe and comfortable home (affordable, secure, warm, big enough).
- Having people around who understand family violence and will help keep the victim-survivor safe.
- Having the abuser held to account by those working in the system.

## *Support*

Many of the responses included detail about kinds of support that women needed or had experienced that had contributed to their and their whānau 's wellbeing. Those supports included:

- Access to free specialist counselling/therapy to help cope with trauma that was ongoing and not limited by session numbers or with long wait lists.
- Access to women's support groups for victim-survivors to share information, experiences and support.
- Being supported by people who listen, validate and take seriously what the victim-survivor says.
- Support with social anxiety.
- Emotional support and aroha/love from friends and family/whānau.
- Good company and social networks and activities
- Being believed that the violence and abuse happened.
- People in the community and working in the system understanding the impact of abuse on the victim-survivors and the children.

- Having support for children who are struggling due to their experiences of violence and abuse.
- Having nonjudgmental support and no victim blaming.
- Being supported without racism.
- Having supportive workplaces and not being fearful of losing their job if they reach out for help.
- Guidance from kaumatua and kuia, whānau guide to keep everyone's mana intact.
- Support for grandparents.

## *Education*

Many participants discussed the importance of education for both the victim-survivor and her children and their community including:

- Education for victim-survivors about the different tactics abusers use and types of violence and information about what supports were available and their rights.
- Parenting support groups that help provide information to protective parents about parenting in the context of abuse.
- Education about family violence and the dynamics of it for everyone so that there is less victim blaming, so that victim-survivors are believed and so that they receive a safer and more effective response from those who are in a position to help them.

## *Financial support*

Financial support was important to many women's sense of wellbeing. The types of financial support varied in the responses but included:

- Support to help the victim-survivor retrain or study.
- Access to quality legal aid.
- Support to re-establish a home.
- Support to buy food, petrol, transport, household items.
- Support to go on holiday (respite).

## *Self-care*

Many participants also included ideas about different kinds of self-care activities that contributed to and were important for their wellbeing. Sometimes, engaging in these activities required financial assistance. Self-care activities included:

- Exercise, yoga.
- Being in nature, walking.
- Sleeping well.
- Eating well.
- Accessing good healthcare and regular medical checkups.
- Social connection to reduce feelings of isolation, taking part in community activities.
- Having peaceful surroundings.
- Spiritual beliefs/faith.
- Access to women only spaces.
- Respite care to get a break from looking after the children.
- Help with housework.

- Time out to rest and recover without having to work or study.
- Hobbies and interests.
- A supportive new partner.
- Using Te reo Māori.
- Time together as a family.
- Feeling free.

## Designing a better and safer response system

The victim-survivors who took part in the survey shared a comprehensive range of ideas about the kinds of support that could have helped them get safe, recover and rebuild their lives. We asked women to think about the kinds of support that might have made a difference to their own whānau and also tell us what should be made available to all victim-survivors in New Zealand.

Many women (287) took the opportunity to share their insights regarding the necessary support and services for victim-survivors and their whānau in an open comment box. Some of these ideas relate to practical supports and others to the way in which services should be provided. The overwhelming theme that came through from the responses is the need for safe and specialist support that is ongoing and responsive to what the victim-survivor needs. The participants' ideas for support and services needed have been categorised under the following headings – structural changes to the current systems and support and services needed.

### *Structural changes*

Participants included suggestions for wider structural changes that were needed in order for any support offered to victim-survivors to be able to work effectively. The most common suggestion was that the Family Court should be reformed to respond safely and effectively when women approach it seeking protection for themselves and their children. Many women talked about the need for professionals working in the Family Court to believe victim-survivors, to be nonjudgmental and to ensure that children are safe and not ordered into care or contact with the abuser. Participants talked about the ongoing stress related to court proceedings and the financial damage it created for them and their children impacting on both their own and their children's ability to get safe and recover.

Many participants discussed the need for education for workers providing support to victim-survivors to ensure that they understood the dynamics of family violence and particularly psychological and emotional abuse. Women stressed that it was very hard to prove psychological abuse and when workers did not understand it, they were less likely to believe them and respond safely.

Education for wider society about family and sexual violence was also recommended. Participants felt that everyone needs to understand family violence better in order to learn how to respond to and care for victim-survivors safely and sensitively. Suggestions included education programmes in schools to assist young people to understand family violence, education for whānau and friends about family violence and how to support victim-survivors, education campaigns that were practical and provided information on how to help and how to intervene.

## *Support and services needed*

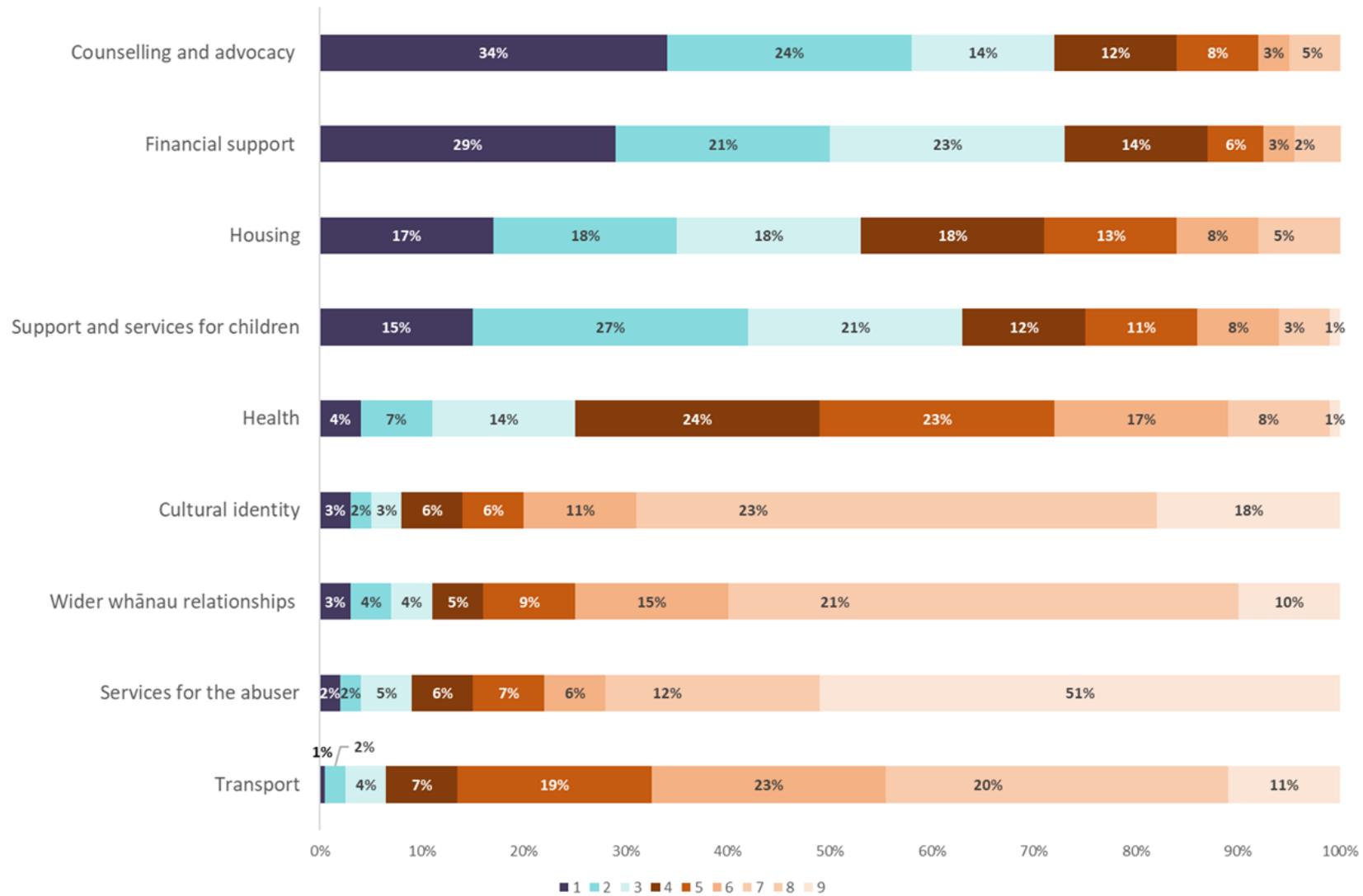
We asked participants to rank how important a number of types of support were for them. Not all participants gave each item a ranking score, but all who responded to at least some of the options in this section gave one item a rank of '1' (assigned as being the most important type of support to enable them and their whānau to recover and rebuild their lives). The following table shows the ranking of the types of support by women who assigned at least one score for the type of support.

**Table 6: Types of support ranked from most popular to least popular (n = 327)**

Item	Overall Rank	Total Respondents
Counselling and advocacy	1	318
Financial support	2	311
Housing	3	299
Support and services for children	4	295
Health	5	299
Cultural identity	6	274
Wider whānau relationships	7	269
Services for the abuser	8	262
Transport	9	265

There was a range of responses regarding subsequent ranking order (2 - 9). Figure 28 shows ranking percentages for each type of support from levels 1 – 9. Further discussion regarding the individual types of support, responses and dynamics will be provided in more detail below.

**Figure 28: Overall ranking for types of support (n = 327)**



Participants shared many ideas about practical support and services that would make a big difference for victim-survivors in getting safe and to their ongoing recovery. In the following section we provide a discussion based on a combination of information: the comments women left relating to types of support needed (in particular what would be helpful, and how important each service would be for them) and a range of service options listed under different types of support, that participants ranked. We provide the star ranking for each service option included under each type of support. The ranking system used was *1-star is least helpful – 5- stars is most helpful* for recovery and rebuilding life after violence and abuse. A ‘not applicable’ option was also available for each option. Some women did select ‘not applicable’. However, ‘not applicable’ selections have not been included in the graphs below and percentages (total responses) were adjusted accordingly.<sup>40</sup>

There is some overlap of participants’ ideas between some of the types of support. These overlaps provide confirmation of the importance that many of the participants placed on particular types of support. For example, in the Financial support, Counselling and advocacy, Housing, Wider Whānau relationships, Services for the abuser etc. issues relating to the Family Court were ranked highly, signaling a need for future attention to ensure Family Court proceedings enhance women and children’s attempts to get safe and recover from the violence and abuse.

### ***Counselling and advocacy***

We heard from many participants who shared their ideas about counselling and advocacy supports that would make a difference for victim-survivors.<sup>41</sup> Their thoughts have been presented below under the main themes evident.

#### ***1. Advocacy and support***

Participants discussed the need for advocacy services to help victim-survivors navigate the system, ensure the people working in the system understood family violence and kept the safety of victims at the centre. The majority of women who asked for more advocacy services wanted it for Family Court proceedings either for themselves or for their children. Many women suggested that there be navigators available who walk the victim-survivor and her children through all the different services available and connect her with appropriate services so that she does not have to find, contact or engage with the services by herself. Women also talked about the need for advocates who could support them in an ongoing way with interactions with organisations including, Police, Oranga Tamariki, ACC, WINZ, IRD, Housing NZ, schools, employers and medical providers to ensure that they felt supported and got the support and response they needed from these services.

---

<sup>40</sup> To see the total numbers of participants who answered each option and the corresponding number who selected ‘not applicable’ please refer to Appendix One for detail.

<sup>41</sup> Participant ideas discussed regarding counselling and advocacy were gathered using comments left by 122 participants under the ‘other’ option of the ranking question combined with comments about counselling and advocacy left by participants in a separate open text question asking what support and services would be helpful for victim-survivors.

Other types of advocacy suggested included support for interactions with the abuser or other triggering or scary meetings, 24/7 helplines, support and education for family members to better understand the abuse and more support services available to provide ongoing love and support for the victim-survivors.

## **2. *Counselling and therapy***

Many participants explained the need for counselling or therapy to help victim-survivors cope and recover from the impact of family violence. In particular they asked that this be free, or affordable, available without waitlists, offered by professionals with specialist knowledge in family violence, be trauma informed, be ongoing for life and not limited to a set number of sessions, be available for specialist situations or groups of clients such as children abused by parents, parents abused by their children, teens, for sexual abuse.

Some women suggested specialist couple, or relationship counselling would be good, but others advised against it arguing it would never be safe. A number of women suggested counselling and support services that focussed on the abuser rather than the victim.

## **3. *Kaupapa Māori support***

Some women suggested more support and services with a kaupapa Māori approach be made available such as culturally appropriate psychologists doing Family Court reports, Māori refuge support, Tikanga Māori services, support to connect with whakapapa and tipuna, hohou rongo (forgiveness healing).

## **4. *Support and safety programmes/groups for women***

Many participants expressed a need for ongoing support groups where they could connect with other victim-survivors, learn more about the dynamics of family and sexual violence, build their self-esteem and self-confidence and gather life skills. These groups should be free, accessible and provided by women. Some participants talked about other support groups that could be run in community hubs and provide holistic programmes for women and children including art programmes and art therapy, yoga, exercise programmes (or gym memberships), self-defence classes, music sessions, massage, and hobby classes etc.

### ***Ranking of counselling and advocacy supports***

Participants were asked to rank a number of possible support services relating to counselling and advocacy. The ranking system was *1-star is least helpful – 5-stars is most helpful* for recovery and rebuilding life after violence and abuse. The highest ranked counselling and advocacy support selected was having access to affordable counselling and/or trauma therapy by someone trained in family violence (with 85% selecting 5 stars = most helpful). Second highest was advocacy and support in Family Court proceedings (with 79% selecting 5 stars = most helpful). The least valued option in the drop-down list was couple counselling with the abuser (with only 22% selecting most helpful).

**Figure 29: Ranking for counselling and advocacy types of support, 1 star = least helpful, 5 stars = most helpful**



## ***Financial support***

Survey participants explained that financial support was required in response to the impact of escaping an abuser, having to set up a home from scratch and also to provide ongoing support as women coped with sole parenting and the financial demands of running a household alone. Some women<sup>42</sup> told us about types of financial support they thought should be made available to victim-survivors which have been sorted under themes below.

An overarching theme that emerged in the comments was the incredible income disparity that many of these women faced compared with that of the abuser. Many participants discussed how their experience of violence and abuse had impacted on their ability to earn or save and that after leaving (escaping) the abuser they faced ongoing hardship for costs related to his ongoing abuse (legal costs, new housing, damages to property and appliances, debt he had incurred, travel to take the children on contact visits etc.). In many cases these women also described how they were penalised by their association with the abuser and this impacted on their ability to be seen as independent of him and therefore eligible for support (e.g. not receiving benefits (Accommodation supplement, Training Incentive Allowance, Disability Allowance) or Legal Aid because of joint home ownership that she no longer had access to, not receiving adequate child support because he hid his income etc.).

### ***1. Basic items***

Participants thought that getting practical help with everyday basic items should be available for victim-survivors including food, petrol, grocery items, lawnmowing, repairs and maintenance on their homes, help with housework, furniture and clothing.

### ***2. Legal costs***

Many participants felt that financial support was necessary to cover legal costs associated with their involvement with the Family Court regarding parenting orders or relationship property proceedings. Women talked about incurring large debt, but many were not eligible for legal aid. These women suggest the legal aid income threshold level be adjusted and that special legal aid support for family violence victims be made available.

### ***3. Funded counselling and therapy***

Many participants stated that financial support was necessary for ongoing counselling and trauma therapy as discussed above.

### ***4. Benefits and state support***

Women discussed the need for benefits for victim-survivors that were set at adequate levels to live on and also included some assistance for children's extra activities. Some women described that these benefits should be available to victim-survivors without being income tested and for as long as were needed without the pressure to return to work (some participants felt too traumatised to work). Others thought that benefits should be provided to women independent of their partner's income when violence and abuse was in the

---

<sup>42</sup> Participant ideas discussed regarding financial supports were gathered using comments left by 159 participants under the 'other' option of the ranking question combined with comments about financial supports left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

background as financial support was critical in supporting women to leave an abusive relationship. Many participants said they needed to know about what benefits and grants were available so that they could check their eligibility. Some need help filling in forms to apply as they were too traumatised by the abuse to do this. Some suggested emergency grants would be really helpful (food, power, petrol) and particularly when women were escaping (for relocation costs and setting up a new house).

A number of participants discussed the need for staff working at WINZ to have a better understanding of family violence and make the process of applying for benefits less traumatic by being more understanding and supportive and having facilities like toilets available for women and their children. It was suggested that WINZ have a special family violence section that women could access and that support from this section would be available for ongoing costs related to their experiences and be provided in a nonjudgmental way. Women explained that they need WINZ to be supportive of the physical and emotional toll that the experience of abuse has had on them.

### **5. Children**

Some women discussed the need for financial support for costs relating to their children including school fees, school uniforms, respite care, carers to help with children with disabilities, children's activities and school camps and sporting fees. Several women also mentioned child support was an issue that they needed help with – finding out about it and how it works or getting the child support payments that they were due from the abuser or having their own payments readjusted.

### **6. Accommodation**

Assistance with housing related costs was a common suggestion (see housing section below). These costs included rent, bond, moving or relocation costs, assistance to purchase a home, help with home maintenance costs, rates and costs associated with setting up a new home (furniture, bedding and whiteware). Women made suggestions that interest free or low interest loans, should be available to help them purchase or set up homes.

### **7. Medical**

Some women suggested that financial support be available for medical costs like G.P. visits, medical specialists, prescriptions, and treatment for their injuries that were a result of the abuse (see Health section below).

### **8. Support to get back to work, retrain or get an education**

Some participants said it would be helpful to have support from people who understand family violence and the impact of it on survivors, who could help women find their own path back into the workforce so that they could be financially independent.

### **Financial information**

A number of participants expressed a need for ongoing financial advice and information pertaining to debt consolidation or management, budgeting, financial planning, support in purchasing a new home, an accountant, or how to avoid being lumped with the abuser's debt.

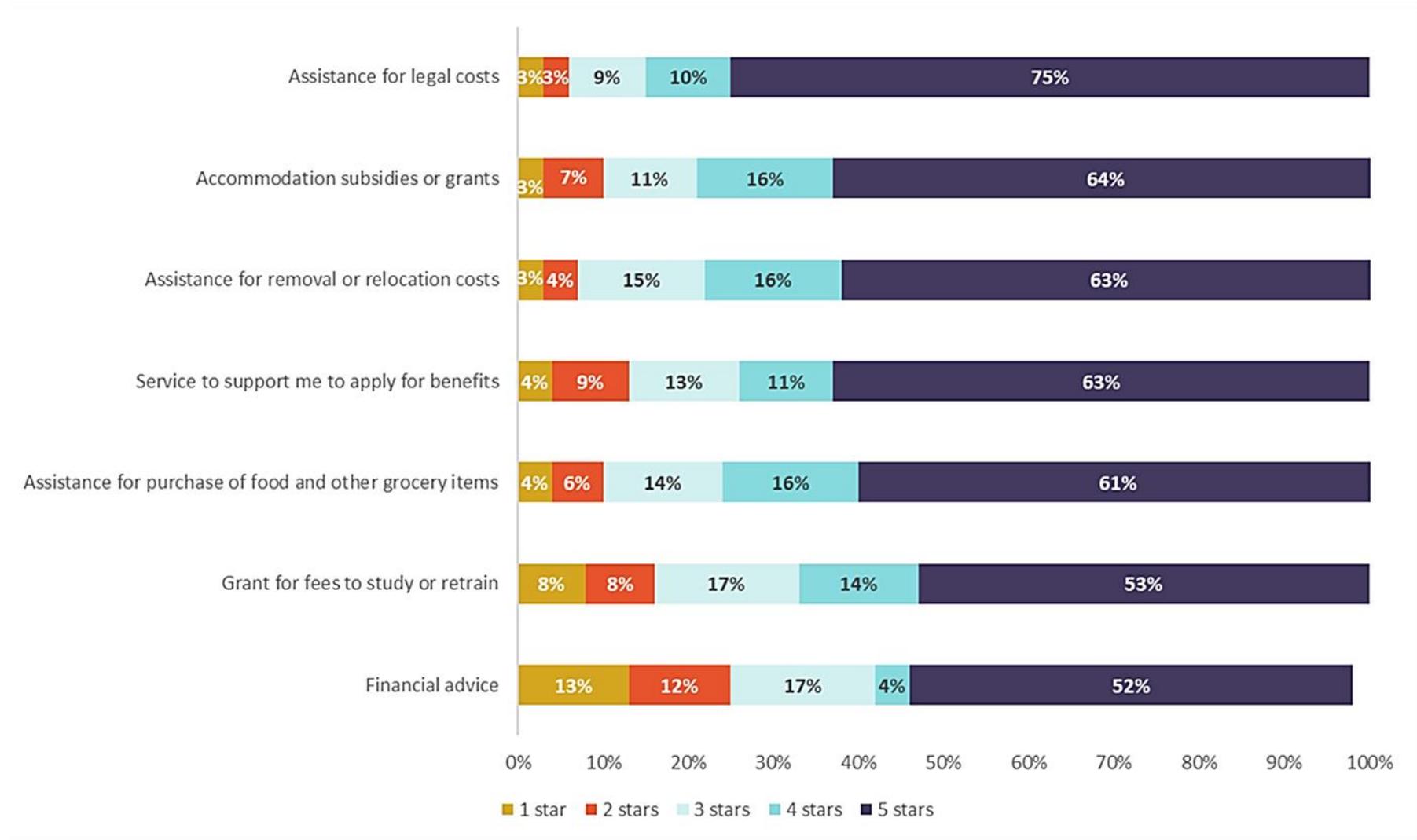
### ***Activities and other costs***

Gym membership, pet costs

### ***Ranking of financial supports***

Participants were asked to rank a number of possible support services relating to financial support. Financial assistance for legal costs was the highest ranked option in the financial support section (with 85% selecting 5 stars = most helpful). This finding is not surprising given that so many of the survey participants discussed how involvement in legal proceedings in the Family Court had an often-devastating impact on their ability to recover and rebuild their lives. In many cases this was due to the ongoing financial costs associated with the legal representation they were forced to fund to either advance their own applications for protection orders and/or parenting orders or to defend ongoing applications made by the abuser. The options for accommodation subsidies or grants was the second highest ranked option (with 64% selecting 5 stars = most helpful). All of the financial support options listed in the survey were rated with 5 stars (most helpful) by at least 50% of participants.

**Figure 30: Ranking for financial support**



## **Housing**

Women shared their ideas for housing supports that would make a difference to victim-survivors.<sup>43</sup>

### **1. Affordable and safe housing**

Survey participants discussed a need for more affordable and safe housing. Victim-survivors need to be safe from the abuser and having a home which is not located near the abuser is central to achieving this state. Many of these women talked about the need to be able to relocate away from the abuser to live somewhere safe. These women explained they were unable to relocate due to Family Court orders. Some suggested a support service should be made available to help victim-survivors relocate to a new area, help them settle in the new region and learn about services and schools etc.

Many participants wrote about how important it is for victim-survivors to have help finding, securing and financing a safe place to live when they leave an abusive relationship. Women talked about how difficult it was to find a place to stay when they escaped the abuser. Other women mentioned that they needed an emergency safe house/place they could go to when they fled. It was important that they could stay in the safe place for some time in order to help them get other supports etc.

### **2. Financial support**

Many participants discussed the importance of financial support for all things housing related (rent, bond, maintenance and repairs, heavy or outdoor work, removal costs, set up of new home costs, insulation or to purchase a home via a home ownership programme like rent to buy for example).

### **3. Better understanding of family violence by workers**

Participants asked that the people who work in housing support services (WINZ, HNZ) are trained to better respond to victims of family violence and provide a more helpful, understanding and non-judgemental service. They also asked that these agencies have systems in place to deal with damages and costs related directly to the abuser's actions without penalising the victim-survivor (costs for damages, impact on credit rating etc.).

### **4. Privacy**

Some women asked that they be able to keep their addresses confidential from the abuser (the Family Court prevented this).

### **5. Legal issues**

Some women suggested that more support was needed to support the legal processes around housing such as occupancy orders, property settlements, processes around selling the home, support with property and belongings being divided.

---

<sup>43</sup> Participant ideas discussed regarding housing were gathered using comments left by 85 participants under the 'other' option of the ranking question combined with comments about housing left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

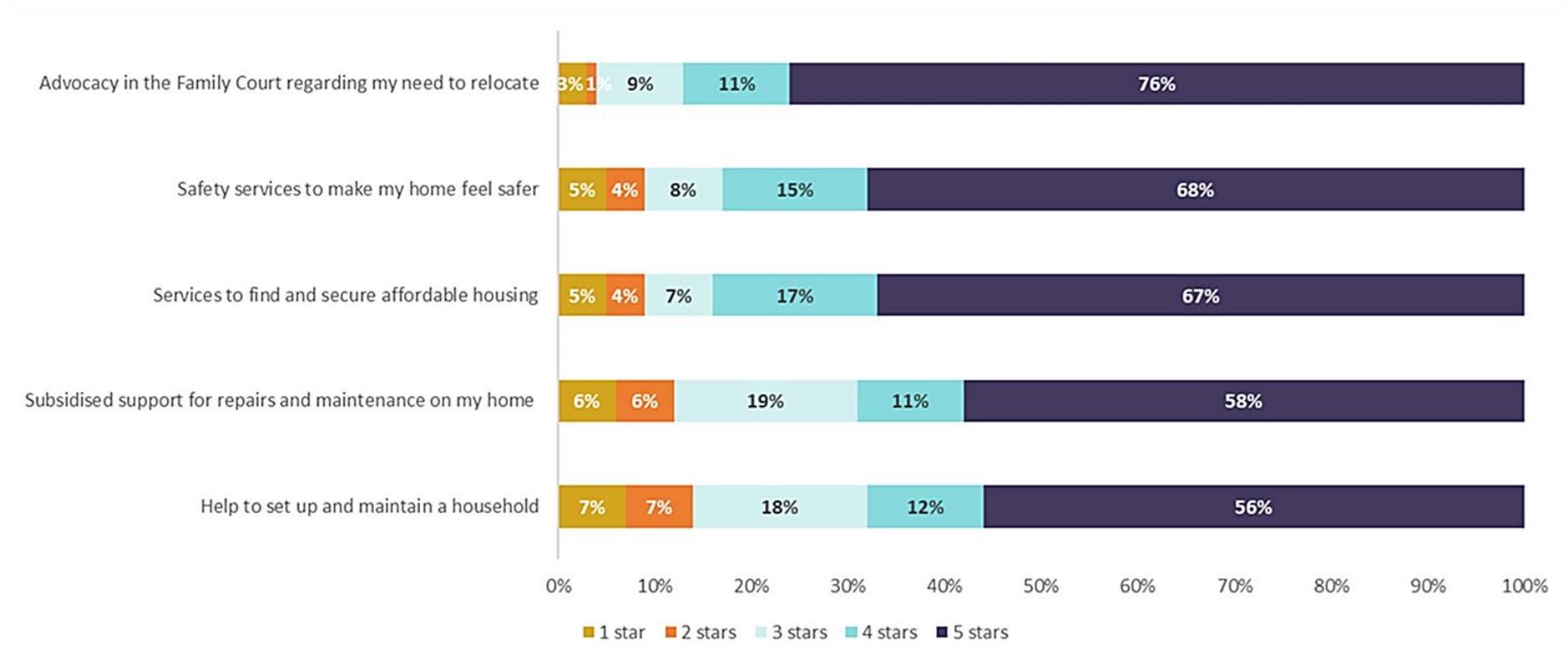
## **6. Safety and security services**

Many women talked about the need for support and funding for home security systems, including video surveillance in their homes due to ongoing risk from the abuser. Some women thought it was necessary to have security experts available who could come to the home and inspect it and their personal belongings (cars, IT devices) for surveillance and tracking devices that may have been installed by the abuser. Women explained that police told women to get security systems installed but the women were not told who to contact or given any financial support in this regard. Participants suggested that victim-survivors should get help to install the most up to date technologies in their home, including locking and alarm systems, video surveillance etc. Some suggested that cyber experts be available to provide free advice on securing their online activity and providing advice on what to do when cyber-attacks from abusers happen (hacking into accounts, sharing images online without consent, sharing abusive and derogatory comments about the victim in social media forums). These security experts could also help victim-survivors understand how abusers can track them via online apps or other devices.

### ***Ranking of housing supports***

Participants were asked to rank a number of possible support services relating to housing. The housing support that received the highest ranking was advocacy in the Family Court to support participant's applications to relocate (with 76% selecting 5 stars = most helpful). Women want to relocate for many reasons related to their safety, recovery and ability to rebuild their lives. Relocating might be so they can be safer from the abuser, closer to whānau, where the work is, or where they can afford housing. The second highest ranking option was services to make women's homes feel safer, (with 68% selecting 5 stars = most helpful) and then help to find affordable housing and maintain their home including repairs and setting it up with furniture etc (with 67% selecting 5 stars = most helpful).

**Figure 31: Ranking for housing support, 1 star = least helpful, 5 stars = most helpful**



## ***Support and services for children***

Participants talked about the need for support services for children who had experienced violence and abuse to help them recover from the impact.<sup>44</sup>

### ***1. Counselling and therapy***

Many participants suggested children have access to free counselling or trauma informed therapy delivered by professionals with specialist skills in trauma and family violence. It is important counselling and therapy is safe, accessible, flexible and ongoing and wait lists are reduced. Some women suggested children should also have access to family counselling (without the abuser) to help mend broken relationships or to help the child connect with the abuser's whānau.

### ***2. Advocacy for children***

Many women explained that there needs to be an independent advocate for children to support and advocate for their safety in the Family Court process. Participants suggested advocates could sit in on interviews children have with the Lawyer for Child and Oranga Tamariki staff. Advocates should assist children apply for Legal Aid, Protection Orders and help them make complaints about people they have dealt with who have undermined their safety. Advocates can ensure that children are believed and kept safe, that decisions are informed by research based best practice regarding children, trauma and family violence and that there is some accountability in the Family Court system and follow up to ensure children's safety after the orders have been made.

### ***3. Education***

Some participants suggested more support and services for children should be available in school settings including more trained guidance counsellors, that schools are trained in family violence and how to respond safely, better supports for children at school who are negatively impacted by their experience of abuse (school work or social relationships), support and information to help them understand family violence, a healthy relationships course available and an advocate who works with schools and other services children use to make sure people understand family violence and trauma and its impact on children. Some also suggested that assistance be available for children to get them into education and training programmes.

### ***4. Support for protective parents***

Some women thought that parenting support should be offered to victim-survivors including, flexible and affordable or free childcare, respite care for when the protective parent needed some time out and that protective parents should be supported to parent their children in a way that recognised the impact of the violence and abuse on that child (trauma or further risk of abuse if child not kept safe), such as by home schooling them.

---

<sup>44</sup> Participant ideas discussed regarding support and services for children were gathered using comments left by 86 participants under the 'other' option of the ranking question combined with comments about services for children left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

## **5. Supervision centres**

Some participants asked for safer supervised contact services and suggested that staff who work in supervision access centres be trained in family violence and are not judgemental of protective mothers.

## **6. Support**

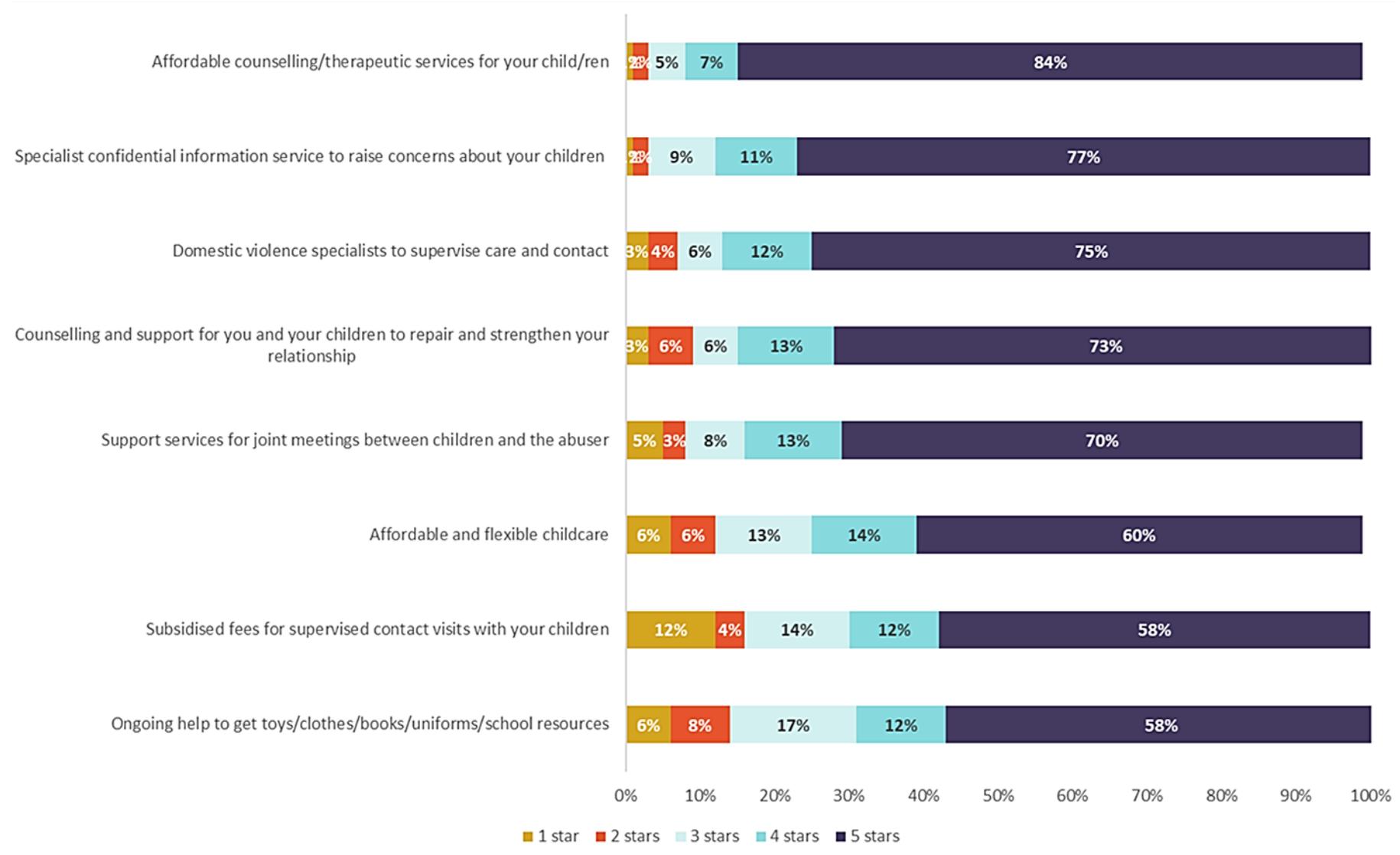
Participants recommended having support groups for children who have experienced violence and abuse which are overseen by a trained facilitator, having support groups for teens and specialist family violence programmes for children.

Some participants discussed the importance of culturally appropriate support including tikanga Māori support such as connecting children to their whakapapa, having meditation and support for hinengaro (mind, thoughts, feelings). Other women talked about the importance of people who work with children having an understanding of cultural beliefs and practices that were relevant to the child or the abuser.

### ***Ranking of support and services for children***

Participants were asked to rank a number of possible support services relating to children. The highest ranked support for children was specialist counselling and therapeutic services to help child/ren to deal with their experiences of trauma and abuse (with 84% selecting 5 stars = most helpful). The second highest ranking support was a specialist confidential information service where mothers can ask questions about any concerns about their children (psychological, behaviour issues, physical safety, sexual safety) to help guide future action (with 77% selecting 5 stars = most helpful). It is significant that the specialist confidential service does not exist in a current form at present (apart from calling Oranga Tamariki) but it was ranked so highly by women in this survey. Its high ranking by these participants signals a need and relevance in providing longer term support that recognises the ongoing impact of trauma and abuse on children even after their mothers have separated from the abuser and that currently many mothers feel unsafe asking for help for their children because family violence is not well understood by many working in the sector or in the Family Court. Some women had expressed in answers to other questions in the survey that they were scared to ask for help because they worried the help would backfire and the children would be taken from them.

**Figure 32: Ranking for support and services for children, 1 star = least helpful, 5 stars = most helpful**



## **Health**

Some participants shared ideas about health supports that were needed.<sup>45</sup>

### **1. A better understanding of family violence and its impact by health professionals**

Many responses explained the need for GPs and other medical professionals having a specialist knowledge of family violence (including being sensitive and non-judgemental) and in particular the impact that trauma can have on physical and emotional functioning. Women also asked that people who undertake gynaecological tests and treatment be specialists as they found having tests by people without sensitivity and expertise can be retraumatising (pap smear tests or medical examinations for criminal investigations).

### **2. Privacy of information**

A large number of participants discussed the need for strict information privacy with their or their children's medical records and asked that such information is not shared with the Family Court or more widely. Women explained experiences of medical professionals sharing their children's or their own medical records with the abuser or the Family Court and this had placed them in further danger.

### **3. Free or subsidised healthcare**

Participants also discussed the need for free or subsidised access to healthcare as they struggled to afford the everyday living expenses and were forced to go without healthcare in many cases. Suggestions for free services included: dentist visits, dental repair due to the abuse, counselling or psychologists and mental health treatment, healthy food or vitamins, optometrists, weight issues and prescriptions. Some women suggested access to other kinds of health services would help such as women-only health collectives and services for children that were not Oranga Tamariki (as they feared taking their child to the Dr would result in the child being removed from their care) and Māori healing practices and support from iwi and hapu, specialist rehabilitation support and care to recover from injuries related to the violence and abuse.

### **Ranking of health support and services**

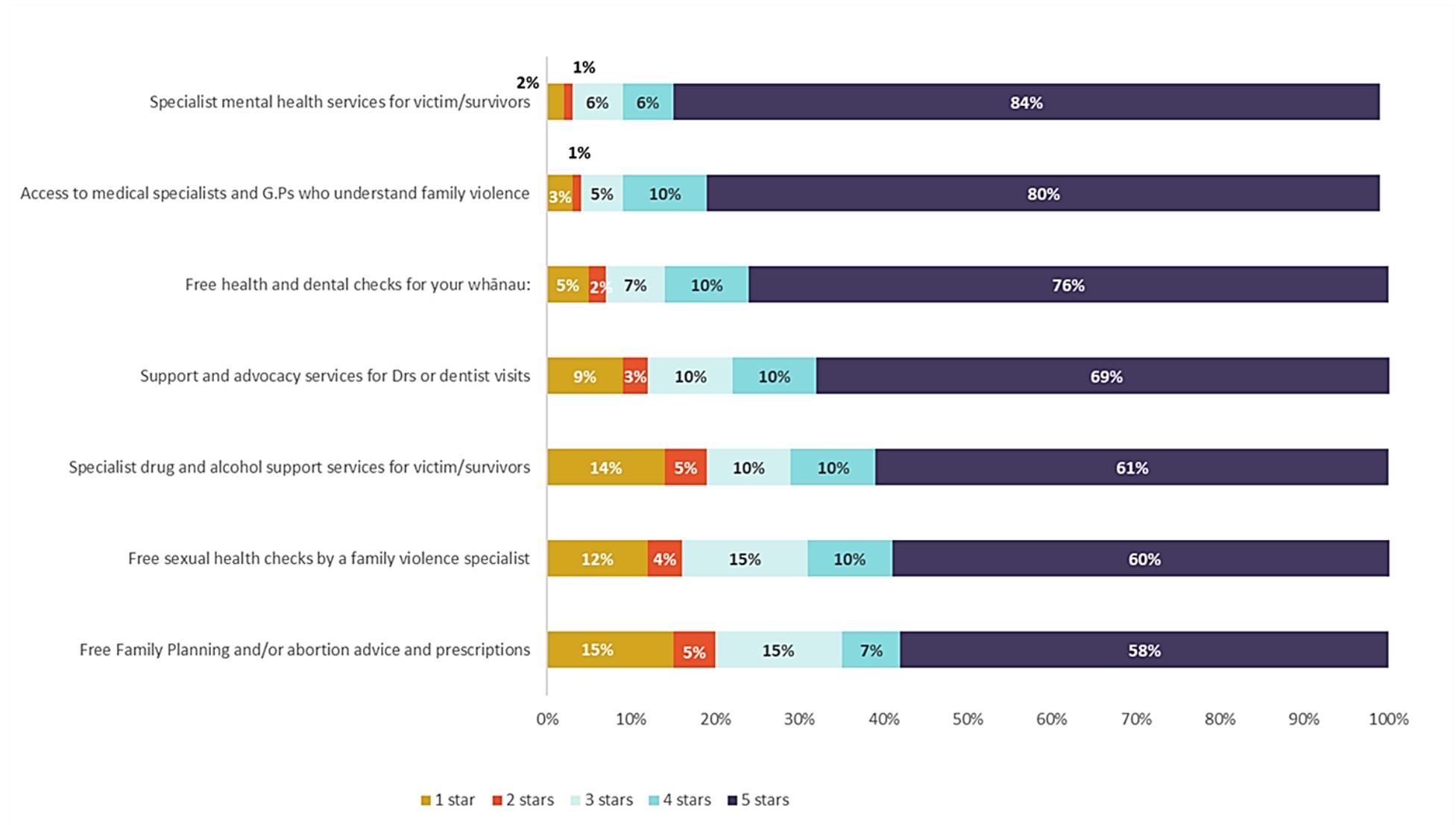
Participants were asked to rank a number of possible support services relating to health. The health support which received the highest ranking was specialist mental health services for victim-survivors (with 84% selecting 5 stars = most helpful). This finding aligns with participants' repeated request throughout the survey responses for free ongoing specialist counselling and therapy services to help with the experience of trauma (and PTSD). Secondly, many women ranked access to health professionals who understand family violence highly (with 80% selecting 5 stars = most helpful). The need for this kind of support could indicate a need for health professionals to have a better understanding about the impact of violence and abuse on the victim-survivor and her children in order to diagnose, treat and refer appropriately. Participants also indicated a need for free health checks for themselves and their whānau (with 76% selecting 5 stars = most helpful). We heard from

---

<sup>45</sup> Participant ideas discussed regarding health were gathered using comments left by 71 participants under the 'other' option of the ranking question combined with comments about health left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

many women that the daily costs of providing for their families was often very constrained by the poverty they faced due to being sole parents and financing Family Court proceedings.

**Figure 33: Ranking for health support and services, 1 star = least helpful, 5 stars = most helpful**



### ***Cultural identity and connection***

There were some participants who detailed their ideas for supports needed to support whānau connection and cultural identity.<sup>46</sup> Some of these women explained that because their family were part of the abuse problem (family members were their abuser or family members normalised abuse or didn't understand family violence and its impact), they felt isolated and without support. Some women wanted education and information to be available for family/whānau so that supporters could learn more about the dynamics of family violence and how to safely help. Some Pakeha women commented that they felt like they needed to be able to access support of this kind but not of a religious nature.

#### ***1. Having support***

Some women explained that whānau support was vital although support should be actively chosen by victim-survivors and not assigned to them without their authority. Others explained that they need to be able to have family/whānau members support them in the courtroom but that this had been forbidden.

A number of participants suggested that support services need to be available for children who have been separated from their cultural heritage and whānau connections because of the experience of abuse by their father or other whānau members, to either learn more about their culture or be connected with safe whānau.

#### ***Ranking of cultural identity and connection support and services***

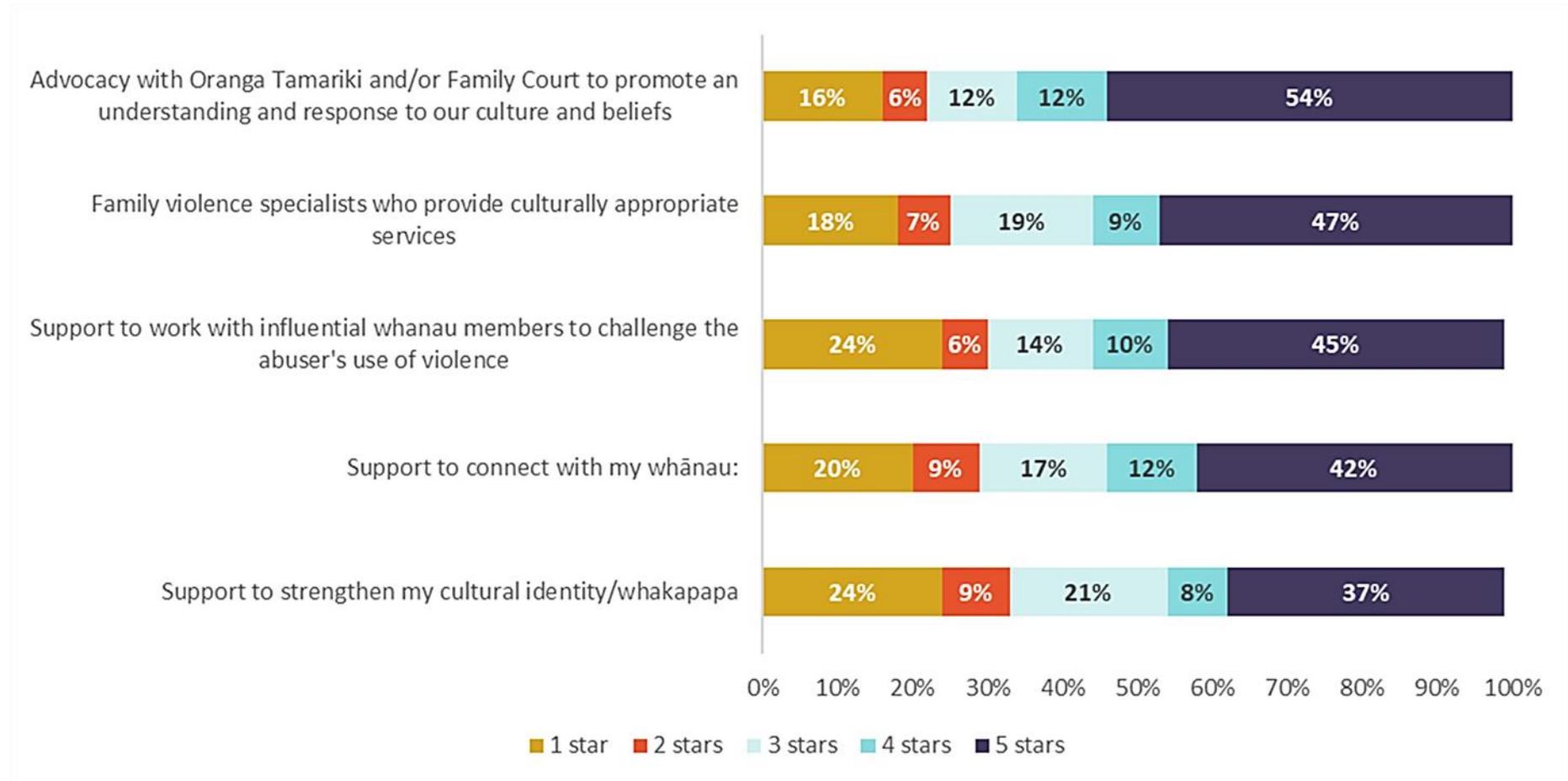
Participants were asked to rank a number of possible support services relating to cultural identity and connection. The highest ranked option was a need for advocacy with Oranga Tamariki and the Family Court to promote an understanding of cultural beliefs and practices and a subsequent appropriate response to those beliefs and practices (with 54% selecting 5 stars = most helpful). The next highest option was the need for specialist family violence services to provide culturally appropriate services (with 47% selecting 5 stars = most helpful).<sup>47</sup> A significant number of participants ranked the need for supports to help them connect with whānau as being very important (with 42% selecting 5 stars = most helpful). Throughout the survey responses we continually heard that support from whānau, family and friends was an important and often vital support for victim-survivors and more valued in many cases than more formal support services. It is therefore essential that women are supported to live near their whānau and for these relationships to be strengthened through Oranga Tamariki and Family Court proceedings.

---

<sup>46</sup> Participant ideas discussed regarding cultural identity and connection were gathered using comments left by 60 participants under the 'other' option of the ranking question combined with comments about cultural identity and connection left by participants in a separate open text question asking what support and services would be helpful for victim/survivors..

<sup>47</sup> Please note some of the responses to the cultural identify options were from women who identified as Tauwiwi. For example, in option 1 – support to strengthen my cultural identity and whakapapa – of the 209 responses (not including NA), 51 were from participants who identified as Māori and 158 were Tauwiwi. There were many participants who answered "Not Applicable" to the cultural identity section (please see Appendix Two for more detail). We found that Tauwiwi were more likely to select NA than Māori participants.

**Figure 34: Ranking for cultural identity and connection, 1 star = least helpful, 5 stars = most helpful**



## ***Wider whānau/family relationships***

Some survey participants left more detailed suggestions about support for wider whānau /family relationships.<sup>48</sup>

### ***1. Safety***

These women discussed a range of support and services for wider whānau relationships but a central theme was the need for the people offering support or services to be family violence specialists who could act in ways to protect the victim-survivor and not make her (or the children) less safe.

Many participants said that it was not safe for them or their children to have any contact with the abuser and an intermediary service (someone who manages communication between the abuser and the victim-survivor) was not something they would want and that it must only ever happen by consent from the victim-survivor. Some women explained that Restorative Justice would not be a safe option for them.

Some women mentioned that it was critical to have safe places where access changeover could take place.

A small number of participants explained that there were no safe members of their family and service providers etc needed to understand this dynamic as it presented particular challenges for some victim-survivors in terms of getting safe and recovering from the abuse.

### ***2. Better understanding of family violence***

Some participants explained how important it was for family/whānau members (on both sides) to understand more about family violence, the risk, the dynamics the behaviours and the impacts, in order for family to respond appropriately. Sometimes the response participants required was for family members to focus on supporting the victim-survivor and her children. For other participants the focus was on needing family members to acknowledge the abuser's behaviour and making that person accountable for the violence and abuse.

Some women shared that relationships with their families had been compromised by the abuser or the Family Court. These women wanted their children to be able to have relationships with extended family overseas or in New Zealand, but this had been prohibited through court orders.

### ***Ranking of wider whānau relationships support***

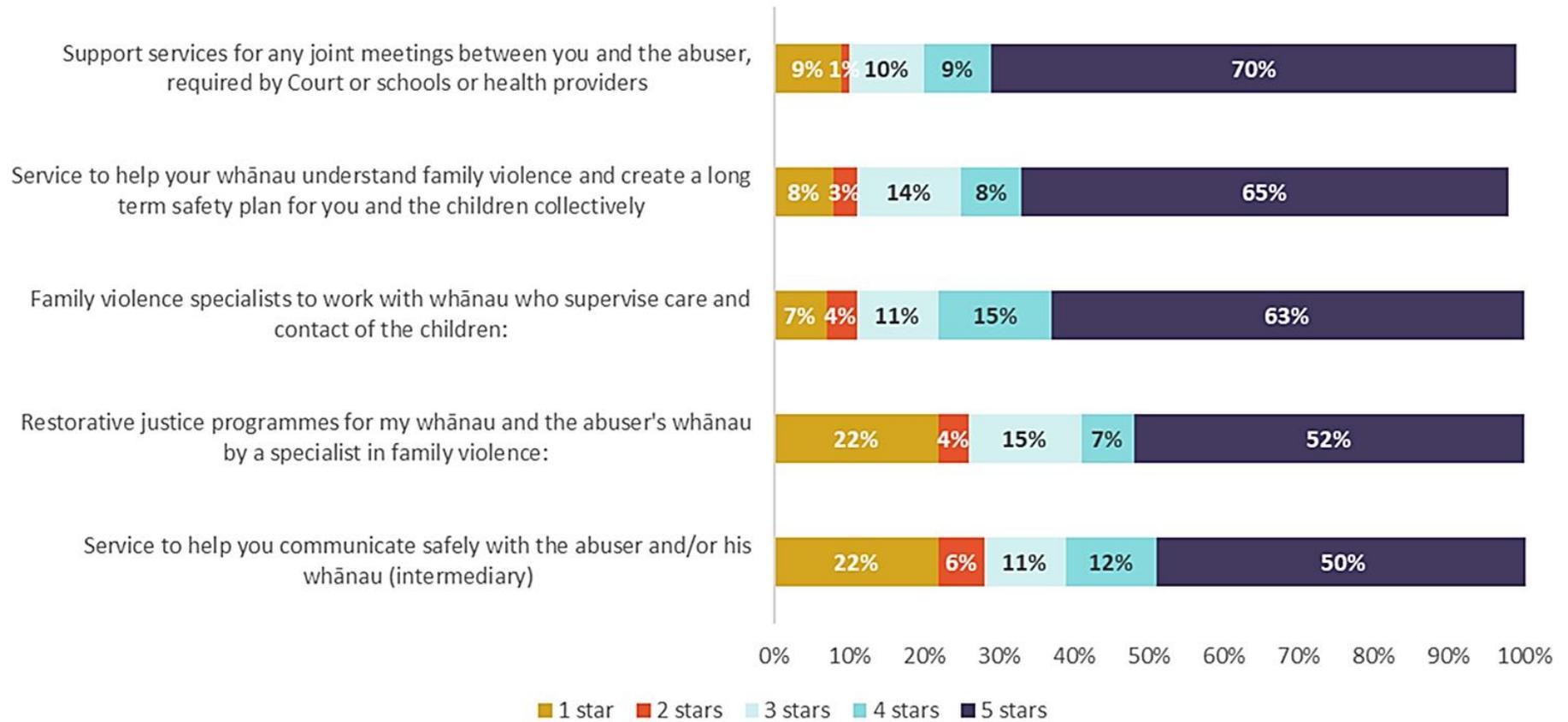
Participants were asked to rank a number of possible support services relating to wider whānau /family relationships. The most highly ranked option was for support during joint meetings with the abuser required either by court, school or health professionals etc. (with 70% selecting 5 stars = most helpful). Many women described throughout their responses being forced to communicate with abusers by professionals and in many cases this

---

<sup>48</sup> Participant ideas discussed regarding wider whānau relationships were gathered using comments left by 60 participants under the 'other' option of the ranking question combined with comments about wider relationships left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

communication (either direct or indirect) was related to the shared guardianship of their children. Women described how unsafe they felt in these communications and also how the professionals requiring joint meetings or communications and decision making failed to understand the enormous power imbalance and risk to their safety in these situations. Similarly, the second and third most highly ranked options are related to improving the understanding of family violence and the risks associated with the abuser (supervision of children by other whānau members, support to help whānau create collective safety plan) of the people around the victim-survivor and her children (with 65% and 63% selecting 5 stars = most helpful).

**Figure 35: Ranking for wider whānau /family relationships support, 1 star = least helpful, 5 stars = most helpful**



### ***Services for the abuser***

There were many participants who left their ideas about other services and supports that were needed for the abuser.<sup>49</sup> The majority of responses to this section (nearly half) explained that for these victim-survivors services for the abuser were not a priority and/or would not be successful because

- the participants were focussed on their own or their children's recovery rather than the abuser's
- they felt their abuser would never change their behaviour because they would not accept that they were abusive.
- that the abuser would manipulate services and support for their own benefit to further abuse.

#### **1. Accountability**

Many women thought that the abuser should be made accountable for the abuse, harm and damage they had caused, some suggested reparation to the victims.

#### **2. Safe interventions with abusers**

Some participants argued that couple counselling would not be safe in family violence contexts. Some women listed types of support services that could be appropriate for abusers including,

- Education and support from family violence specialists who understand abusers and narcissism.
- Mandatory counselling for abusers.
- Culturally appropriate services.
- Mental health services and support.
- Respite housing.
- Long term support for recovery and healing.
- Learning new skills.

Other participants made suggestions about education support that would help such as family violence education programmes in schools for boys, information easily available about what support and services are available, information about how to have safe and predictable contact with children and information for victim-survivors about abusers such as their progress in stopping violence programmes and information for new partners about the risk of abuse.

### ***Ranking of services for the abuser***

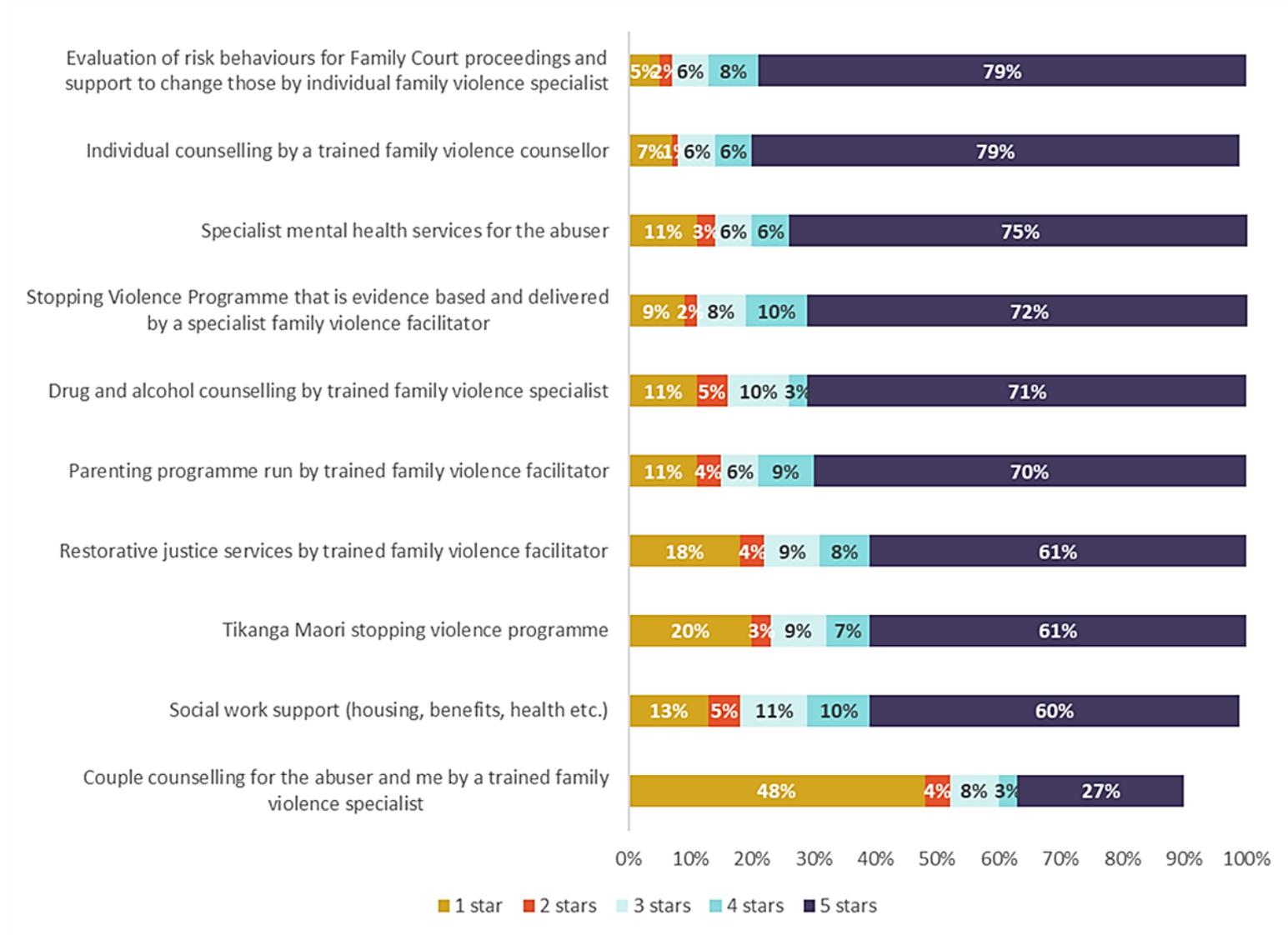
Participants were asked to rank a number of possible support services relating to services for the abuser. The most highly ranked options included the need for individual counselling by a trained family violence specialist and for a service that could undertake risk

---

<sup>49</sup> Participant ideas discussed regarding services for the abuser were gathered using comments left by 113 participants under the 'other' option of the ranking question combined with comments about services for the abuser left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

assessments of the abuser which could help inform Family Court proceedings (with 79% selecting 5 stars = most helpful for both support services). As previously discussed, many participants talked about the unsafe responses they had experienced by professionals working in the Family Court. These women explained that when they or their children were not believed about the abuse, unsafe orders and decisions resulted. These decisions placed their children at further risk from violence, abuse and neglect. The need for specialists to deliver support programmes to abusers was evident with many participants rating highly the dropdown options for stopping violence, drug and alcohol and parenting programmes run by specialist providers (evidence based) (with 72%, 71% and 70% selecting 5 stars = most helpful).

**Figure 36: Ranking for services for the abuser, 1 star = least helpful, 5 stars = most helpful**



## ***Transport***

A number of participants shared their ideas about transport supports that could help victim-survivors recover and rebuild their lives.<sup>50</sup> Their suggestions were focused on the support they needed in order to participate in daily activities such as getting the food shopping, getting children to school and day-care or other appointments.

### ***1. Financial support for transport costs***

A number of participants said they needed financial support for transport costs associated with upholding Family Court orders which required them to drive for long distances to take the children for contact visits with the abuser. Participants also thought financial support would be good to help with transport related costs such as petrol, maintenance, repairs, insurance, road user costs and licensing.

### ***2. Transport and independence***

Transport can be an important part of women's ability to take part in community activities and ensure they and their children have access to services and opportunities such as education or employment. Some women were unable to use public transport due to their disability (including anxiety and fear) and found it difficult to access affordable and reliable public transport options. Some suggested friendly driver services would be good or food delivery options.

While some women explained that having a car or access to public transport was essential for their sense of safety, independence and self-esteem other women said that support for transport related costs would undermine victim-survivor independence.

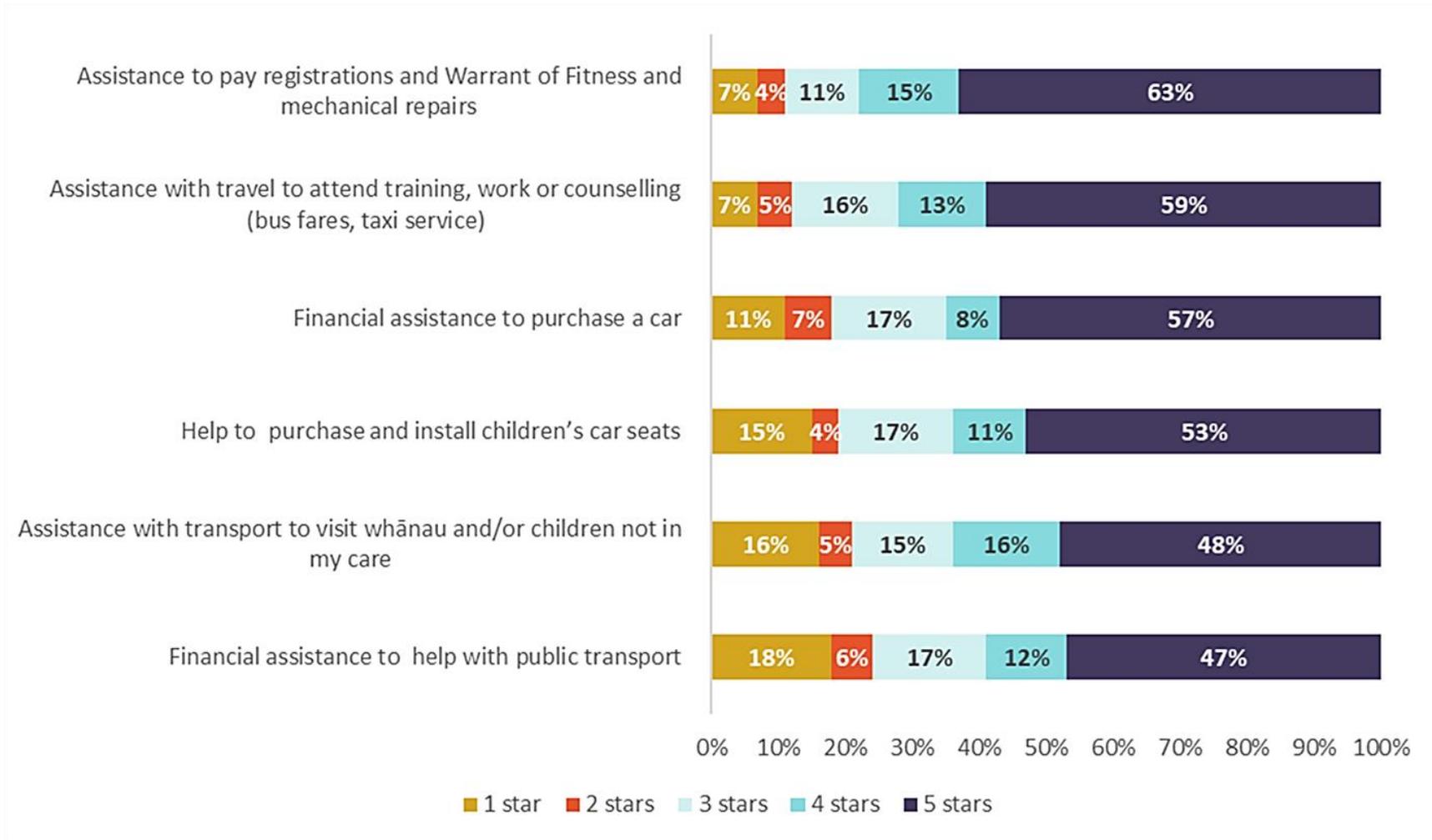
### ***Ranking of transport support***

Participants were asked to rank a number of possible support services relating to transport. Participants ranked financial support towards transport costs highly (paying for car related costs, public transport and purchasing a vehicle) (with 47% - 63% selecting 5 stars = most helpful for transport costs).

---

<sup>50</sup> Participant ideas discussed regarding transport supports were gathered using comments left by 60 participants under the 'other' option of the ranking question combined with comments about transport left by participants in a separate open text question asking what support and services would be helpful for victim/survivors.

**Figure 37: Ranking for transport support, 1 star = least helpful, 5 stars = most helpful**



### ***Other practical supports***

Other practical supports that were suggested by participants included:

- Better services for the LGBTQI+ community.
- Family therapy.
- Free and accessible Protection Orders.
- Online resources or texting services.
- Paid leave to attend appointments.
- Time off work to recover from abuse.
- Phone support – not information lines.
- Storage for personal possessions until they found a new home.
- Housing for their animals.
- Support with vet bills.
- Safe adult role models for children.
- Safe people to care for children if the protective parent dies (not the guardian who is the abuser).

## **Making services work well**

As well as having the right kinds of support available for victim-survivors, survey participants explained how services should work in order to make them more accessible including, cost, availability, design, the skill required by workers and marketing of support and services.

### ***Make it easier for women to engage in support and services***

Most women indicated that they needed the people who deliver the support and services to be specialists in family violence in order to encourage them to engage with support. They also need support to come at no financial cost to them and to be flexible and available at times or in ways other than face to face appointments, that suit them. Many women said that they needed support services to be provided only by women, that services should not force them to work with their abuser and to believe that they were victim-survivors and not insist on them providing ‘proof’ before being eligible for support.

Nearly half (49%) of participants indicated they would like a ‘navigator’ (one skilled person) who could link them in with all the services available. For these women having a navigator would mean they only had to tell their whole story once which could make a big difference in terms of their safety and also their feelings of being retraumatised through the retelling.

**Table 7: What would make it easier to access support and services (n =379)**

<b>What would help better access and engagement</b>	<b>Percent</b>
They are provided by people who are specialists in the dynamics of family violence and coercive control	79%
They are free	72%
They work with me on my own without the abuser	56%

They don't require me to prove I am a victim /survivor of family violence (Protection Order, Police call out sheets)	55%
They can happen outside of business hours (not just 9am - 5pm)	50%
There is one person (a navigator) who can link me to all the support and services I need	49%
They are provided by women	44%
They are flexible - I can take part when I want to (move in and out of the service)	43%
They don't ask me to tell my whole story - I can just share as much as I want	42%
I can work with the service over the phone or via internet (FB messaging, Skype etc.)	41%
They are creative - i.e. they refer to other services in the community that offer what I need (meditation, eating disorder counselling, kapa haka group).	35%
The people come to my house to work with my whānau (I don't have to visit an agency)	33%
They are OK about me bringing a support person/whānau with me to appointments	32%
They are skilled in working with people with mental health issues and/or addictions	31%
Free childcare available	23%
They provide transport for me	18%
There are specialist culturally appropriate services for me in my community	15%
Other	14%
The services are accessible for me and are easy for people with a disability to use	11%
There are specialist services for people from the LGBTQI+ community	8%

There were observable differences in the responses from participants depending on their ethnicity, age, the type of abuse they had experienced and their identification as being part of the LGBTQI+ community or living with a disability.

Factors that would make access and engagement with services easier in some cases were different for Māori women in comparison to Tauīwi women. A higher percentage of Māori women chose some practical things that would make a difference to their ability to engage with services including,

- Having someone come to their house (42% compared to 31%).
- Having childcare available (34% compared to 21%).
- Having transport available (30% compared to 16%).
- Being flexible about when they can happen (58% compared to 48%).

In terms of the way services were delivered Māori women were more likely to select the following options compared to Tauīwi women including,

- Having access to specialist culturally appropriate services (42% compared to 10%).
- Not having to tell their whole story every time (55% compared to 39%).
- Having creative support offered (50% compared to 32%).
- Being able to have a support person present (56% compared to 27%).
- Having one person to connect her to support and services 'navigator' (63% compared to 46%).

There were also differences between what women who identified as being part of the LGBTQI+ community indicated would make a difference to their ability to access and engage with support services and those who did not identify with that community. Women who identified as LGBTQI+ were more likely to say that they wanted:

- Specialist services for people from the LGBTQI+ community (59% compared to 4%).
- To not have to tell their whole story every time (55% compared to 41%).
- Transport support (31% compared to 17%).
- Specialist cultural services (28% compared to 15%).
- Accessible services for people with disability (31% compared to 10%).
- Creative services (45% compared to 36%).
- To be able to bring a support person with them to appointments (38% compared to 32%).

We only heard from 15 younger women (aged 25 or under) about things that would make their ability to access and engage with services easier. The most common responses were that they could take part in support services without the abuser being involved, that they did not have to tell their whole story every time, that services were flexible and happened outside business hours and were provided by women only and that people providing the services had a good understanding of mental health issues and that they don't have to prove they are victims in order to get support. Interestingly we found that younger women were less likely to say that being able to access services in ways that were not face to face (phone, email, skype Facebook messenger etc.) than women aged 26 and over (33% compared to 41%), although it must be taken into consideration that we had a small sample of younger women.

There was a noticeable difference in the responses to what would make it easier to access support and services depending on what relationship context women had experienced violence and abuse in (see Table 8). Of significance is that women who experienced violence and abuse in an intimate relationship were far more likely to indicate they needed services provided by people who are specialists in the dynamics of family violence (including coercive control). Women who had experienced violence and abuse from a family/whānau member were much more inclined to say they wanted to be able to take support with them to appointments, don't want to tell their whole story and don't want to have to prove they are victims, need help with transport and that the services are offered by people who specialise in a range of areas including mental health, cultural awareness, and understand issues for people who live with a disability or who identify with the LGBTQI+ community. It will be important to factor these differences in to the design of longer-term support programmes.

**Table 8: What would make it easier to access support and services by relationship to abuser (Intimate partner n = 333, family/whānau member n = 46)**

What would help better access and engagement	Intimate partner	Family/whānau member
They are free	72%	64%
They are provided by people who are specialists in the dynamics of family violence and coercive control	82%	59%
The people come to my house to work with my whānau (I don't have to visit an agency)	33%	26%
I can work with the service over the phone or via internet (FB messaging, Skype etc.)	41%	39%
They don't ask me to tell my whole story - I can just share as much as I want	40%	57%
They don't require me to prove I am a victim /survivor of family violence (Protection Order, Police call out sheets)	54%	63%
Free childcare available	25%	13%
They provide transport for me	16%	33%
They can happen outside of business hours (not just 9am - 5pm)	50%	48%
There are specialist culturally appropriate services for me in my community	14%	28%
The services are accessible for me and are easy for people with a disability to use	10%	24%

There is one person (a navigator) who can link me to all the support and services I need	48%	50%
They are skilled in working with people with mental health issues and/or addictions	28%	50%
There are specialist services for people from the LGBTQI+ community	6%	22%
They are creative - i.e. they refer to other services in the community that offer what I need (meditation, eating disorder counselling, kapa haka group).	34%	44%
They are OK about me bringing a support person/whānau with me to appointments	30%	46%
They are provided by women	45%	37%
They work with me on my own without the abuser	57%	46%
They are flexible - I can take part when I want to (move in and out of the service)	42%	48%

### *Service Provision and approach*

Some qualities of service provision were maintained to be essential in ensuring they would be safe and effective for victim-survivors including that services:

- Be lifelong or ongoing to respond to the needs of victim-survivors who may need to reconnect with support at various times throughout their and their children's lives.
- Provide follow up support and check ins – it's not enough to provide a short-term support service and then provide nothing further.
- Provide wrap around services that continue over time.
- Provide services that are culturally appropriate and use culturally specific tools for delivery (e.g. kaupapa Māori services).
- Provide holistic services and support that is not modelled on a 'one size fits all' programme but is more responsive to individual needs and situations.
- Work in a coordinated way and do not expect victim-survivors to have to re tell their story every time they engage with a new service.
- Be flexible and accessible – let women move in and out of the service when they need it and at times that work for them.
- Have the support services all in one place so it was easier to access them – especially with children.
- Provide support for new partners as well.
- Have some good male role models for boys who have experienced violence and abuse.

- Offer more practical help (help with errands, form filling and reading etc.).
- Have survivor support groups for companionship and information and connection.
- Provide other kinds of help like occupational therapy.

### *Skills necessary for service providers*

Almost all the participants want workers to understand the dynamics of power and control and psychological abuse (see Table 9). The participants are signaling that they expect a specialist work force to be well trained and available to be able to safely respond to family violence in a way that understands dynamic risk factors, keeps information private and secure, that workers are monitored and work to ensure victim safety. The attributes that workers need to be able to safely engage with victim-survivors are that service providers:

- Understand and are specialists in family violence and trauma and ensure that psychological abuse is well understood.
- Workers have empathy for victim-survivors and an understanding of what it's like for survivors trying to get safe.
- Listen to what victim-survivors want and need.
- Are patient and work at the pace that is set by victim-survivors.
- Are compassionate and work with aroha/love.
- Be non-judgemental.
- Believe and validate women's experiences and do not require them to prove they have been victims of violence and abuse.
- Be respectful.
- Treat victim-survivors well.
- Get training regularly.

**Table 9: What skills should service providers have (n = 397)**

Skill	Percent
Understand the dynamics of power and control (psychological abuse)	96%
Understand the impact of abuse including trauma	92%
Be non-judgemental	90%
Understand ongoing risk (physical, sexual and psychological) to women and children from abusers	87%
Put victim-survivor safety at the centre of everything they do	86%
Keep information strictly confidential and do not share without my consent	84%
Be compassionate, work with aroha	81%

Be suitably qualified and have their skills and practice externally monitored	74%
Follow the pace set by the victim-survivor	73%
Be skilled in working with people with mental health issues and/or addictions	54%
Have specialist skills in working with abusers	50%
Have specialist skills in working with people from a range of cultures	47%
Understand Tikanga Māori, use kaupapa Māori approach	40%
Be able to work with the whole whānau	42%
Be skilled in working with people with disability	32%
Be skilled in working with people from the LGBTQI+ community	29%
Other	17%

### *Specialisation*

Some participants also indicated that workers providing support and services needed to have specialisation in certain areas including, working with abusers, tikanga Māori, working with people from a range of cultures, working with people from the LGBTQI + community, people with disability and people with mental health issues and addictions. When we analysed the responses for particular groups of respondents the importance of the need for specialisation was even more apparent. For example, Māori women were more likely than Tauwi women to indicate that people needed to:

- Understand tikanga Māori and provide kaupapa Māori services (71% compared to 34%).
- Provide support to the whole whānau (62% compared to 37%).
- Have specialist skills working with people from a range of cultures (62% compared to 44%).

In addition, Māori women were more likely to think that workers needed to be skilled in working with people with mental health issues, people living with a disability and people from the LGBTQI+ community than Tauwi women.

Women who lived with a disability were more likely than women who did not live with a disability to think that service provided needed to be skilled in working with people with a:

- Disability (49% compared to 28%).
- With mental health issues and addiction (65% compared to 51%).

It was evident that many women who indicated they lived with a disability commented on how their experience of mental illness, PTSD, anxiety and depression was not well understood by those they had dealt with unless they were specialists. For these women the lack of understanding about the impact of trauma by workers meant they were not offered the help they needed in the way that they needed it.

Some women chose to provide more detail about the skills workers' need.<sup>51</sup> Their ideas have been coded into themes which cover a range of skill sets and attitudinal approaches as follows:

- Have lived experience of family violence so they are more understanding.
- Have life skills.
- Be able to refer to other agencies if necessary, with the appropriate skills and know about other local services.
- Know how to manage the distress/pain that talking about the abuse can cause for victim-survivors.
- Have the right skills to do the work (be trained and accredited), stay up to date with research, learn about electronic online abuse.
- Be monitored in their practice and have regular supervision to ensure safe practice.
- Provide faith-based support.
- Accurately reflect the victim-survivors' accounts in the reports they write.
- Be culturally sensitive and refer to culturally appropriate service where necessary and don't be racist.
- Be able to work with clients who express anger without judging them.
- Be compassionate, kind, respectful, have integrity, be good listeners.
- Know about the system abuse that happens to victim-survivors and share that knowledge with the women they work with to pre-warn them (e.g. Family Court, Police etc.).
- Don't restrict support because of guardianship issues imposed by the Family Court.
- Provide longer term support.
- Know how to provide basic practical support rather than only relying on psychological support.
- Be professional and work in a professional environment.
- Be efficient and help clients move through telling their stories respectfully.
- Work with the abuser separately but use the knowledge gained to inform safer strategies for the victim-survivor.
- Be able to work with the wider whānau.
- Have sound knowledge of the law.
- Provide help regardless of whether or not there has been a conviction.
- Understand PTSD, trauma on clients and hypervigilance etc.
- Know how to strengthen the individual they are working with rather than retraumatise them.
- Be accountable to the victim-survivors they work with.

---

<sup>51</sup> There were 68 comments left under the 'other' option - all of these participants had also selected options from the dropdown menu.

- Promote children’s rights as being paramount.
- Understand the issues for older women who experience violence and abuse.
- Recognise that the victim-survivor may have other skills and strengths and don’t judge her as incapable because she has experienced abuse.

### *Finding out about support and services*

Survey participants had many suggestions about how women should find out about support and services.<sup>52</sup> Many said that it was not helpful just to have an 0800-number advertised. It was more important that victim-survivors could easily find out what actual support was available and what that support cost and how to access it. There was some criticism of the It’s Not OK campaign and the White Ribbon campaigns for just being words and not really helpful.

Women suggested that more information is shared widely about what family violence is – especially the tactics abusers use and what psychological abuse looks like – they felt this would be informative and helpful for them to understand their own situations but also to educate the wider public including professionals working in the system. The majority of responses recommended a wide saturation of information through public places. They emphasised that it helped to have information in places where the abuser had less control over them and where they would not stand out for picking up the information (like at schools, in women dominated places, e.g. in the toilet). Some women shared that this approach would mean that information was always available to them (rather than relying on specific times of the year like White Ribbon day), and this would help them be able to access support when the time was right.

However, some participants felt that information about support services available should be shared with victim-survivors via one advocate or navigator and this should be done face to face. Some suggested that victim-survivors should decide how and when they would access support. Many women shared that they had found it hard to find support and were overwhelmed by the number of services listed. Some suggested it would be helpful to have one specific place where information about support and contact details could be listed – either in an online website or in local resources (pamphlets or resource packs etc.). The following suggestions were made for how to help women find out about support and services (listed in order of popularity).

- Online resources including websites, FB ads, twitter, FB support groups etc.
- Health providers (G. Ps, hospitals, mental health services, Plunket).
- Education facilities (Kindy, playgroups, Kohanga Reo, primary school, intermediate, High school, University and other tertiary institutions, school newsletters, guest speakers, programme about family violence).
- Public ad campaigns and media on TV, radio, newspapers etc. on products.
- Public and community places – noticeboards, libraries, supermarkets, Citizen Advice Bureaus, malls and shopping centers, toilets, hairdressers.
- Services (refuge, family violence services, counsellors making good referrals).

---

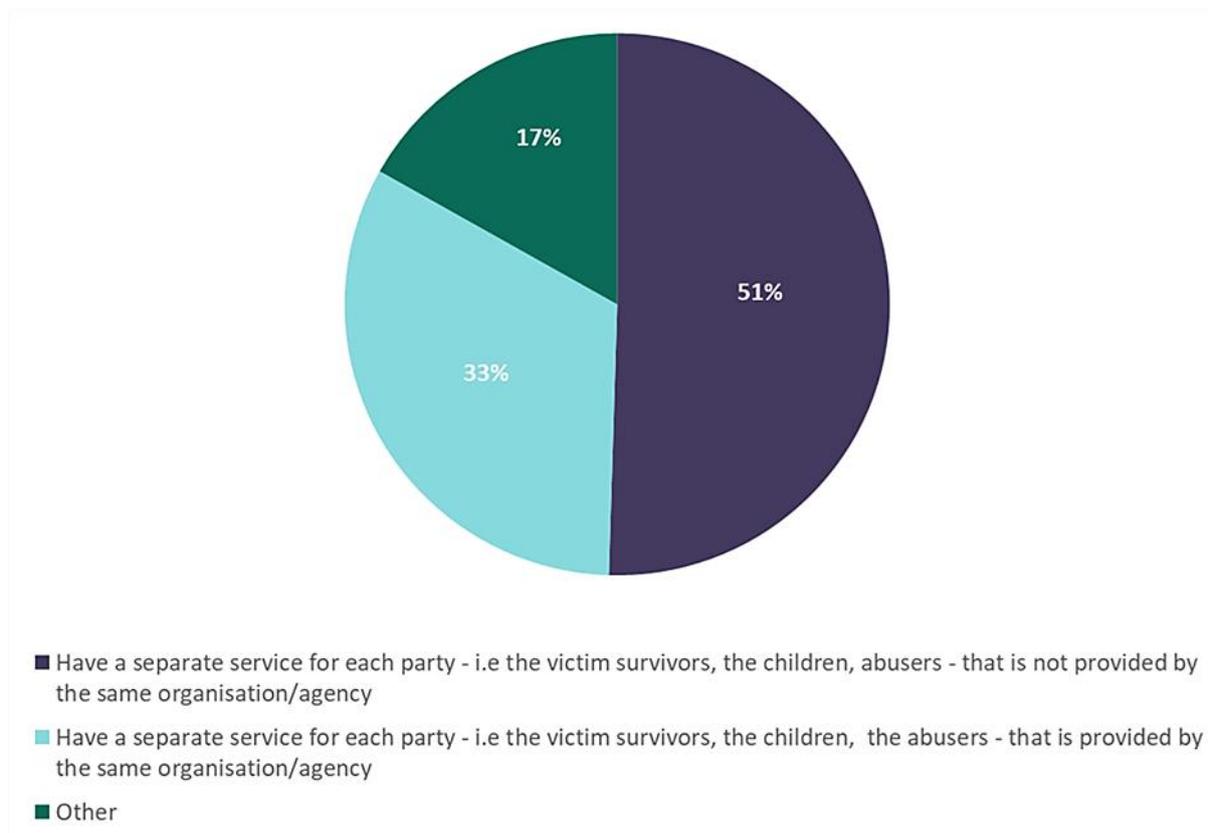
<sup>52</sup> There were comments left by 286 women.

- Government departments (MSD, WINZ, Oranga Tamariki, Family Court, police stations, IRD, Immigration).
- Informal groups (family/whānau, marae, hui, women’s groups, church, whisper groups).

### *Working with different parties*

There is currently no consistent way that services work with people who have experienced family violence in New Zealand. Some agencies work with the whole family/whānau and others only provide specific discrete services to victim-survivors or perpetrators or children. We asked the survey participants how they think support services should be set up in terms of client service delivery. Just over half the participants (51%) think that services to victims, children and abusers should be set up as separate services and should not be provided by the same agency.

**Figure 38: Service design options (n = 364)**



Some participants left further comment to describe their ideas about service provision.<sup>53</sup> There were a range of opinions expressed with some stating they did not know what was best, others saying the service delivery option should be decided on a case by case basis and that both options should be available depending on the situation. Overall, comments included a focus on finding a way that services could be provided that ensured women and children’s safety is at the heart of the service delivery.

<sup>53</sup> There were 59 women who left comment.

We heard from women who strongly believed that services should be provided by completely separate agencies. Many women discussed how manipulative abusers can be and that this dynamic makes it unsafe for one service to provide support to all involved. Many women think that the decision should be up to the victim-survivor as she will be best placed to decide how safe or otherwise it is to have one provider deliver all the services. Some participants discussed the merit of having separate services provided by one agency but insisted this could only happen safely if the services provider was a specialist in family violence, that victim and perpetrator services were not provided in the same building or the same suburb. Some women explained that when they found out their abuser was using the same service as they were they felt frightened and it put them off going back for their appointments in future.

The constraints in terms of funding and available services were discussed as reasons why in some places having multiple services available is not logistically possible and it therefore is important to have service accountability and oversight in place. The importance of communication between services was discussed and some women think that services for children should not be separated out from services for the protective parent.

### *Managing complaints*

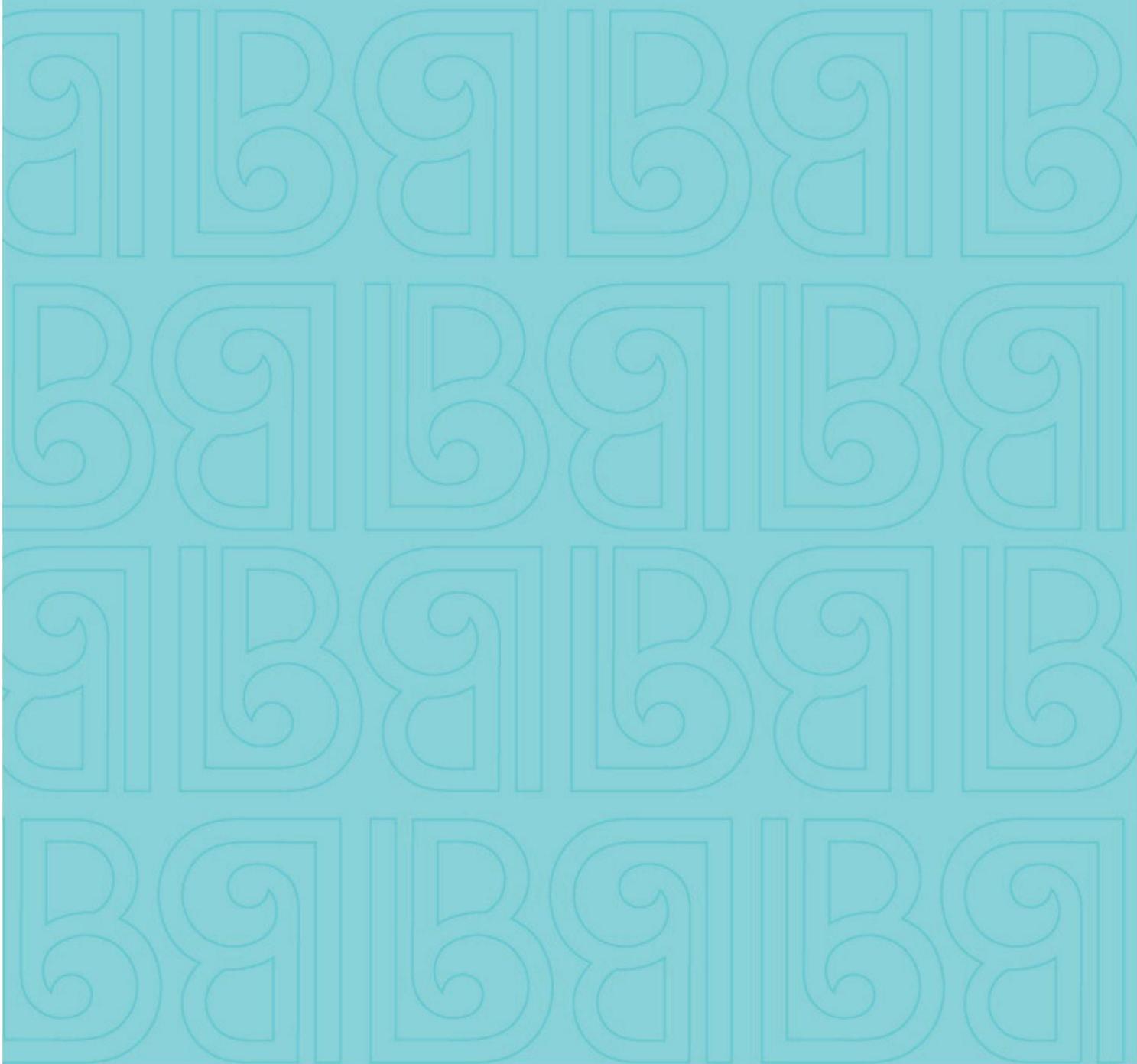
Survey participants were asked who they think should manage any complaints they might have about the support and services they engage with. The majority (79%) indicated they thought an independent body should oversee complaints.<sup>54</sup> Far fewer thought the complaint should be handled by the agency the complaint is about (10%) or the funder of the agency the complaint is about (6%).

Some women (22) shared ideas about how to effectively respond to complaints. Some felt the agency the complaint was about were best suited to respond but that having an independent body (staffed with people who were specialists in family violence) would be a good next step if the agency didn't respond appropriately. Others thought that all of the three options should be part of the complaints process because the system needed more transparency and knowledge should be shared about the failings and gaps to improve everyone's response. Some suggested the independent body be a regulatory service provider, provided for under the Health and Disability Act or Ministry of Health, be monitored by the Social Work registration Board or iwi kaupapa Māori services.

---

<sup>54</sup> There were 382 women who answered this question.

# Recommendations



*1. Ensure the support services keep victim-survivors and their children safe by:*

- Understanding that safety comes before recovery.
- Enabling victim-survivors and their children to choose to have no contact with the abuser.
- Wrapping support and services around victim-survivors.
- Holding abusers to account to prevent further family violence rather than relying on stopping violence programmes as the dominant response.
- Ensuring that services for the abuser focus on accountability and safety and are provided by specialists in family violence.
- Understanding that informal support networks are unlikely to be specialised in engaging with abusers effectively and are not well suited to providing this kind of support.

*2. Remove barriers to safety and recovery by ensuring all parts of the response system work to enable victim-survivors to access and use longer term support including:*

**A. The Family Court**

- Ensure Care of Children Act proceedings and guardianship matters do not prevent children from accessing counselling, therapy or services.
- Enable victim-survivors and their children to relocate somewhere safe or where their support networks are.
- Remove the cost for legal proceedings focussed on protection for the victim-survivor and their children.
- Ensure the abuser cannot use the Family Court to further abuse through ongoing proceedings, financial abuse etc.
- Allow victim-survivors to have a support person with them for proceedings/interviews etc.

**B. Work and Income**

- Provide specialist income support for victim-survivors of family violence.
- Waive partner income assessments or asset tests if the victim-survivor does not have access to her relationship property or to her abusive partner's income.

**C. Housing NZ**

- Have systems in place to deal with damages and costs related directly to the abuser without penalising the victim-survivor (costs for damages, impact on credit rating etc.).

**3. *Have a specialist family violence work force (including health professionals, supervision centre workers, Family Court professionals as well as family violence agencies and frontline staff) where workers are:***

- Well trained and available to safely respond to family violence in a way that recognises dynamic risk factors.
- Required to keep information private and secure.
- Monitored and work to ensure victim safety.
- Understand the impact of trauma on victim-survivors.
- Patient and work at victim-survivor's pace.
- Compassionate and work with aroha.
- Non-judgemental.
- Directed by what the victim-survivor wants and needs.
- Required to work in a way that is victim-survivor centred.

**4. *Improve the understanding of family violence by people who deliver support and services to victim-survivors to also include:***

- How to respond well to the trauma experienced by victim-survivors and its ongoing impact on their lives and ability to access or engage with support and services (including work).
- The ongoing risk to children from contact with the abuser.
- That separation (and the following two years) is a time of great risk so ensure support and services do not put victim-survivors and children in more danger.
- That for many victim-survivors abuse is ongoing even after they leave the abuser and they may have no control over the abuse and therefore little control over their ability to be safe which will impact on how they can engage with support and services.

**5. *Urgently provide longer term support and services to enable women and their children to get safe (early and easily) by ensuring support and services are:***

- Free.
- Ongoing and accessible whenever victim-survivors need them and for as long as they need them.
- Designed with appropriate referral systems in place for each agency/service that the victim-survivor works with.
- Designed to respond to different experiences of abuse and understand how the victim-survivor's relationship to the abuser may impact on the types of abuse experienced and the kinds of support needed (including where the abuser is a female).
- Culturally appropriate.
- Responsive to the LGBTQI+ community.
- Accessible to young women in family situations or dating relationships.

- Accessible for victim-survivors who live with a disability.
- Accessible and personnel are skilled in working with victims of female abusers.

***6. Implement the following types of support and services throughout New Zealand as part of the Whānau Resilience programme:***

- Counselling/trauma therapy – that is free or heavily subsidised, provided by specialists in family and sexual violence, is available long term whenever victim-survivors need it, is culturally appropriate and available for children.
- Independent advocacy services for Family Court proceedings and Oranga Tamariki for adult victim-survivors and children.
- Navigators who walk the victim-survivor and her children through the different services available and connect her with appropriate services.
- Safety programmes for women and children– support groups and educational groups.
- A specialist confidential information service for mothers who have concerns regarding their children’s behaviour, experiences or development in relation to their experience family violence.
- Cultural support and education programmes for children separated from their culture/whakapapa/whānau because of the abuse.

***7. Investigate how to implement the following types of support and services throughout New Zealand as part of the Whānau Resilience programme:***

- Specialist financial support for victim-survivors for costs related to their experience of family violence and associated recovery as detailed in this report.
- Specialist housing support (safe, affordable housing, security systems) for victim-survivors for costs related to their experience of family violence and associated recovery as detailed in this report.
- Free healthcare for victim-survivors and their children.
- Funding to assist victim-survivors with transport costs and consider options (free or subsidised) for alternatives to public transport for victim-survivors who suffer from anxiety/depression/PTSD or are too scared to use public transport.
- Education-based resources and specialist responses for children.

***8. Improve the understanding by general society of family violence so that informal support responses are safe and effective and people:***

- Understand dynamics of family violence and the tactics abusers use.
- Understand the risks involved.
- Undo victim blaming myths.
- Understand psychological abuse and coercive control.

***9. Aim to require that services to victims, children and abusers should be set up as separate services and should not be provided by the same***

*agency. If they are provided by the same agency, ensure safety practices are in place to protect the victim-survivor and her children including:*

- Having different locations for services to the different parties.
- Never scheduling joint appointments or separate appointments on the same day for the parties.
- Ensure those who work with abusers are specialists who understand the tactics abusers use, including manipulation etc.
- Keep information about victim-survivors safe and private from the abuser at all times.

*10. Help victim-survivors find out about support and services and what family violence is by providing information via:*

- Online resources including websites, FB ads, twitter, FB support groups etc.
- Health providers.
- Education facilities – all ages and stages.
- Public ad campaigns and media on TV, radio, newspapers etc.
- Notices, leaflets etc. at public and community places.
- Services (refuge, family violence services, counsellors making good referrals).
- Government departments.
- Informal groups and networks.

*11. Establish an independent body that can manage victim /survivor complaints regarding services they use that don't help them get safe, recover and rebuild their lives.*

*12. Continue to build service-user voices into the design and development of policy and programmes by:*

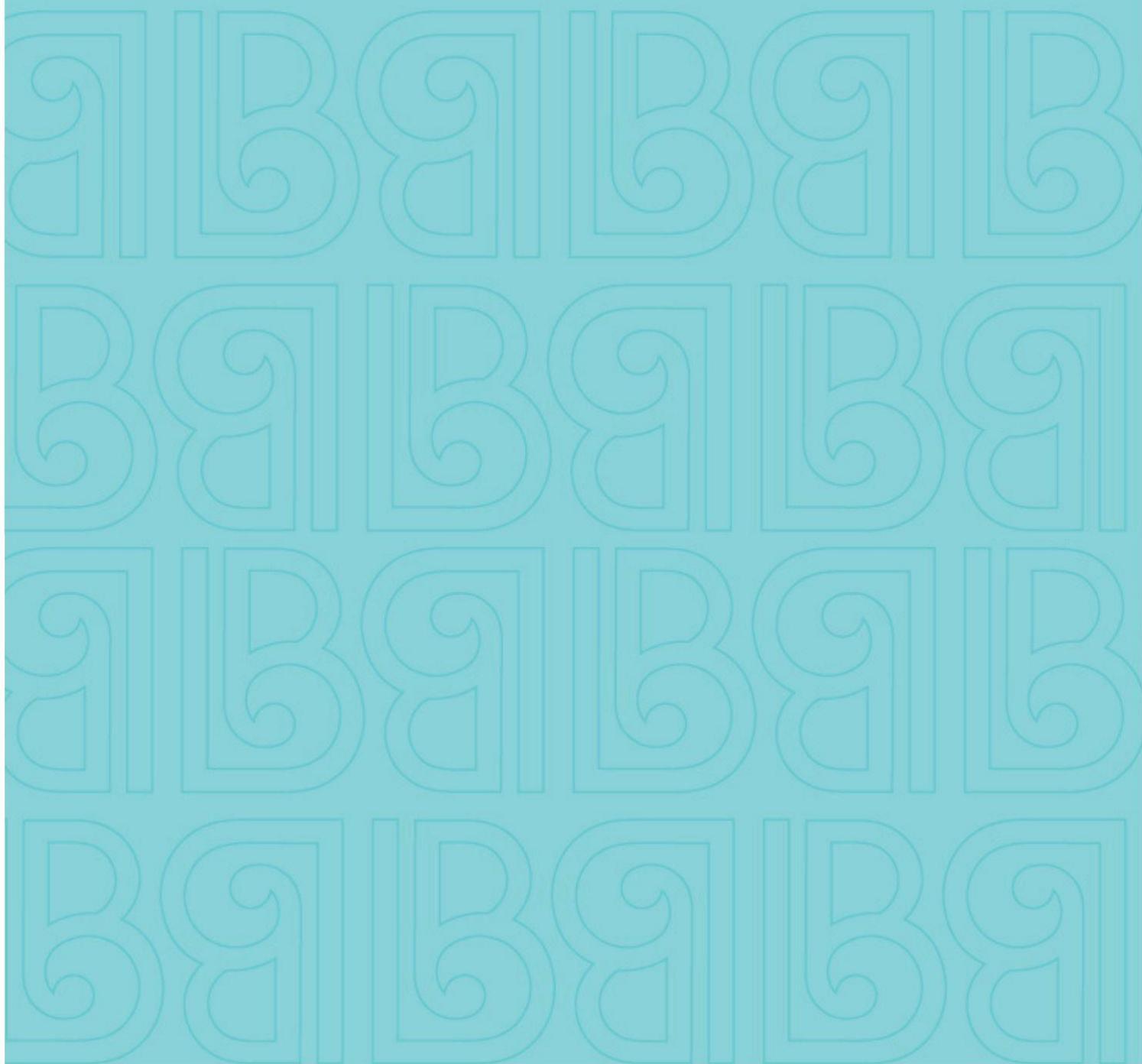
- Incorporating the ideas and insights gathered by this survey into the development of Whānau Resilience programme throughout New Zealand.
- Undertaking more research to determine the effectiveness of relying on stopping violence programmes to enhance victim-survivor's safety given what women have told us in the survey.
- Sharing the insights gathered in this report (in particular, Barriers to accessing support services, Unhelpful responses, Designing a better system and Making it work well) with other Government Departments to improve the overall response to victim-survivors, including Ministry of Justice, Police, Ministry of Health, Ministry of Education, Inland Revenue Department.
- Undertaking future consultation with the following groups in ways that are safe, accessible and appropriate for them.
  - women who identify as Pasifika
  - women who identify as Asian or Indian
  - younger women and women in dating relationships

- people who identify as LGBTQI+
- people who live in Northland and South Auckland.

***13. Undertake follow up activities as a result of this survey and report, including:***

- Provide feedback to survey participants about how ideas gathered from the survey will be used to develop the Whānau Resilience programme such as providing regular updates on the MSD website, sharing updates with Backbone to share in our newsletters etc.
- Consider contracting Backbone for an external evaluation of the impact of the survey findings on Whānau Resilience service design/implementation.

# Appendices



## Appendix 1

### Number of Not Applicable responses for each type of support

<b>Counselling Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Affordable counselling/therapeutic services	20	364	344
Affordable and flexible childcare to attend counselling	105	340	235
Group Family violence programmes for women	39	352	313
Couple counselling for me and the abuser	108	341	233
Advocacy and support for Oranga Tamariki proceedings	158	336	178
Advocacy and support in Family Court proceedings	93	352	259

<b>Financial Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Service to support me to apply for benefits	82	353	271
Assistance for legal costs	65	354	289
Assistance for removal or relocation costs	74	349	275
Grant for fees to study or retrain	64	346	282
Financial advice	70	351	281
Accommodation subsidies or grants	54	354	300
Assistance for purchase of food and other grocery items	69	356	287

<b>Housing Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Services to find and secure affordable housing	69	320	251
Safety services to make my home feel safer	33	330	297
Help to set up and maintain a household	77	323	246
Advocacy in the Family Court regarding my need to relocate	96	321	225
Subsidised support for repairs and maintenance on my home	73	321	248

<b>Support and services for children</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Domestic violence specialists to supervise care and contact	52	269	217
Support services for joint meetings between children and the abuser	59	260	201
Affordable counselling/therapeutic services for your child/ren	28	270	242
Counselling and support for you and your children to repair and strengthen your relationship	51	268	217
Affordable and flexible childcare	72	260	188
Ongoing help to get toys/clothes/books/uniforms/school resources	58	258	200
Specialist confidential information service to raise concerns about your children	37	265	228
Subsidised fees for supervised contact visits with your children	118	256	138

<b>Health Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Support and advocacy services for Drs or dentist visits	46	325	279
Free health and dental checks for your whānau	41	323	282
Specialist mental health services for victim-survivors	30	327	297
Specialist drug and alcohol support services for victim-survivors	137	311	174
Free sexual health checks by a family violence specialist	102	318	216
Free Family Planning and/or abortion advice and prescriptions	118	307	189
Access to medical specialists and G.Ps who understand family violence	20	330	310

<b>Cultural identity Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Support to connect with my whānau	108	317	209
Support to strengthen my cultural identity/whakapapa	145	314	169
Support to work with influential whānau members to challenge the abuser's use of violence	126	311	185
Support and services from family violence specialists who provide culturally appropriate services	134	309	175
Advocacy with Oranga Tamariki and/or Family Court to promote an understanding and response to our culture and beliefs	162	308	146

<b>Wider whānau relationships Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Service to help you communicate safely with the abuser and/or his whānau (intermediary)	75	313	238
Family violence specialists to work with whānau who supervise care and contact of the children	116	311	195
Service to help your whānau understand family violence and create a long-term safety plan for you and the children collectively	75	311	236
Support services for any joint meetings between you and the abuser, required by Court or schools or health providers	91	314	223
Restorative justice programmes for my whānau and the abuser's whānau by a specialist in family violence	107	304	197

<b>Services for the abuser Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Individual counselling by a trained family violence counsellor	24	292	266
Stopping Violence Programme that is evidence based and delivered by a specialist family violence facilitator	41	295	254
Tikanga Māori stopping violence programme	136	273	137
Social work support (housing, benefits, health etc.)	93	285	192
Parenting programme run by trained family violence facilitator	82	292	210
Restorative justice services by trained family violence facilitator	66	278	212

Evaluation of risk behaviours for Family Court proceedings and support to change those by individual family violence specialist	67	284	217
Drug and alcohol counselling by trained family violence specialist	111	286	175
Couple counselling for the abuser and me by a trained family violence specialist	96	277	181
Specialist mental health services for the abuser	47	279	232

<b>Transport Type of support</b>	<b># Not Applicable responses</b>	<b>Total # of responses</b>	<b>Total "Applicables"</b>
Financial assistance to purchase a car	110	312	202
Financial assistance to help with public transport	116	306	190
Help to purchase and install children's car seats	157	302	145
Assistance with travel to attend training, work or counselling (bus fares, taxi service)	68	285	217
Assistance to pay registrations and Warrant of Fitness and mechanical repairs	89	313	224
Assistance with transport to visit whānau and/or children not in my care	160	290	130