Analysis: People who use, or have used, violence

|  |
| --- |
| **Date: March 2022** |

# Purpose

During May and June 2021, the Joint Venture engaged with people across Aotearoa New Zealand to inform [*Te Aorerekura – the National Strategy to Eliminate Family Violence and Sexual Violence*](https://www.violencefree.govt.nz/national-strategy/). A key part of this engagement was the conversation with people who use, or have used violence and specialist practitioners who work with people who use violence. This paper reflects the experience people who use violence have with the family violence and sexual violence systems and the opportunities for improving how Aotearoa New Zealand work to prevent, respond, heal and recover from these forms of violence. Communities, organisations and individuals were generous in sharing their experiences, and through their insight government agencies have worked to develop a 25-year Strategy designed to achieve the moemoeā, or vision: All people in Aotearoa New Zealand are thriving: their wellbeing is enhanced and sustained because they are safe and supported to live their lives free from family violence and sexual violence.

This paper sets out themes that came out of hui and written submissions from people who use, or have used violence and practitioners who work with them. This paper uses, as much as possible, the words and voices of the people who shared their pūrākau (stories) and whakaaro (thoughts).

# Our engagement process with people who use, or have used, violence

## **Who did the JV engage with?**

The JV worked with family violence and sexual violence national bodies to reach their member non-government organisations (NGOs) who deliver services and programmes for people who use violence: Te Kupenga Whakaoti Mahi Patunga – National Network of Family Violence Services (Te Kupenga) and Te Ohaakii a Hine – National Network Ending Sexual Violence Together (TOAH-NNEST).

To achieve as a full a range of feedback as possible, the JV also spoke to Gandhi Nivas (a partnership between NZ Police and Sahaayta), which works collaboratively to provide services for people who use violence. Originally, Gandhi Nivas worked with people who use violence from ethnic communities, however since 2014 it has been working with individuals who use violence from every background.

Alongside Gandhi Nivas, the JV also connected with men from Hawke’s Bay Regional Prison who gave us insight around what tools and supports could have been in place to reduce or stop their offending behaviour.

The JV also had conversations with Safe Man Safe Family, White Ribbon NZ and people who run community services for men who have used violence. We heard from White Ribbon ambassadors across the country, and from men and women who work with men who have used violence, and from people who self-identified as having used violence in the past.

## **How did we hear from people who use, or have used, violence?**

The JV provided family violence and sexual violence NGOs (via their national bodies) with an information sheet to support them to facilitate engagement sessions with the people and groups they work with. The information sheet provided a summary of the purpose of engagement, a process for gathering feedback, some demographics to capture, and five questions to prompt their engagement. A handout was also attached for people who didn’t want to participate. The process was designed to ensure that the NGOs, workers and the people and groups they support could opt out at any point and the process itself was designed to fit within the work NGOs were already undertaking.

The JV also heard from people who identified as someone who uses, or has used violence, through submissions and completed surveys on Citizen Space.

Hui were held and submissions were received from family violence and sexual violence NGOs, community groups and practitioners who work with people who use violence.

**What were the limitations of engagement?**

There may have been people who provided submissions who did not self-identify due to stigma around doing so. There would likely have been many people who use violence who were not aware engagement was happening, and others who chose not to be involved.

Most of what was heard came from those working with people who use, or have used violence, victim-survivors or victim advocates who provided advice and views on the responses and prevention they believe are needed.

The family violence NGOs may have felt constrained by the tight engagement timeframes and therefore chose not to undertake sessions with the people and groups they support.

# What we know about people who use, or have used, violence

## While people of all genders can use violence, women in Aotearoa New Zealand are twice as likely as men to suffer intimate partner violence (IPV), including repeat victimisation[[1]](#footnote-1).

## The Family Violence Death Review Committee (FVDRC) examined all intimate partner violence deaths between 2009 to 2017 and found that:

* During this time there were 104 such deaths, and 98 of the offenders were men
* Many of these 98 men demonstrated the common impacts of trauma e.g. having one or more recorded mental health concern that required health or drug and alcohol services involved[[2]](#footnote-2).

## That FVDRC report is one of the only substantial pieces of research undertaken in Aotearoa New Zealand that focuses specifically on people who use, or have used, violence. While it provides some insight into the factors and influences that contribute to the attitudes and behaviours of people who use violence, the 98 men were identified by the committee as “an extreme group who are a high priority to identify and help” rather than reflective of people who use, or have used, violence at less extreme levels.

## **Main issues and gaps**

The lack of available and suitable services and programmes was considered a key issue for people who use, or have used, violence.

Most services and programmes are only available as a result of the person using violence coming into the criminal justice system (either because police charges have been laid or a protection order has been taken out) and being mandated to undertake a programme.

There are very limited services available to people who have not been mandated by the courts to undertake a programme. Self-referred (non-mandated) people, including those who may be worried about their thoughts or behaviours but have not harmed anyone and those who have harmed someone but have not been brought to the attention of the police, often face long waiting lists to access a service, if there is a service available for them at all.

There is a limited range of services and programmes available, particularly culture- and age-appropriate programmes, and often people who use violence struggle to find the right support.

The programmes and services that are available are time limited. Upon completion of a set number of sessions, a person who uses violence often cannot access ongoing support, even if they feel they need that support.

Young people showing harmful or concerning behaviours have very limited access to services and supports.

Frontline generalist[[3]](#footnote-3) and government workforces often lack understanding of the dynamics of violence. They often see situations in the context of “one’s word against another” and lack the analysis of power and equity. This means people who use violence are often not identified and therefore not held accountable or able to access the support they need, which puts victims at risk of further harm.

There is limited prevention, particularly prevention focused on people who use violence, which in turn means that harmful societal attitudes and social norms aren’t changing. Community attitudes and behaviours often condone or minimise violence and abuse and contribute, for example, to rape myths. This means any progress a person may make through participating in programmes and services can be undone when they go back to their daily life if the whānau and community around them do not support their accountability, support them to change their behaviour, or collude in their attitudes and behaviours. Prevention messaging also tends to focus on the prevention of further harm rather than prevention of harm occurring at all.

# Key themes that the National Strategy and Action Plan needs to cover for people who use, or have used violence

## **Services and supports that focus on people who use, or have used violence**

There needs to be wraparound support for people who use violence from the earliest opportunity, particularly specialist support workers who can monitor progress, help the person navigate the system and link to specialist[[4]](#footnote-4) services and programmes.

There needs to be a range of available, accessible and long-term wraparound services as early as possible. Services should include violence-informed mental health and addictions services, trauma therapy, practical support such as housing and income, long-term specialist behaviour change programmes and ongoing support beyond all the services. Services need to be informed by an understanding that behavioural change is a long-term process rather than a short-dosage, programmatic response.

Men’s supported accommodation options were identified as valuable for providing space for men to address their behaviours while ensuring that victims and children were not displaced from the home.

Some men identified that peer support groups for men by men were helpful in supporting change, as they were places where honest open conversations could be had, and where on-going healing and support could occur. Those services should be an addition to other services and programmes.

There should be a priority to provide swift and early help to young people using violence, or who have harmful sexual behaviours or ideation, so they get help to change.

There needs to be adequate funding and resourcing for specialist violence intervention programmes and services, and the services that support those interventions so people can easily access help and support.

“People have the right to access services to reduce the risk to themselves and their whānau… I am appalled by the lack of access to residential drug treatment when people are ready. Wāhine and tāne usually can't access rehab when they need it. By the time they do, there are more victims, and the violence continues with tamariki being exposed.”

## **Accountability, healing and restoration**

The family violence and sexual violence sector talked about accountability needing to be at the heart of the mahi. Government and NGOs need to be accountable to victims to ensure their safety and people who cause harm need to held accountable.

Accountability is also a cultural and collective concept – accountability to tipuna and for whakapapa ora was seen as important for tangata whenua.

Many submissions talked about the need for a humane, mana-enhancing and trauma-informed approach to people using violence – holding people to account without judging; providing opportunities to understand and heal from past trauma and harm; and supporting people to be in a better space within the context of their whānau and community.

“Just because someone may not conform or fit in to a certain box, it doesn't give others the right to judge them inferior to others. Treat everyone as equal human beings.”

“If we can address the hurt safely, then those whom are hurting will deal with their trauma. We need safe ways to reintegrate those whom have perpetrated, and these ways be interwoven with the community.”

“Without healing the past there is little hope for them to be able to sustain change.”

## **Workforce capability**

Participants said there is a huge need to upskill government and generalist frontline workforces to know how to recognise and refer people using violence in order to short-circuit ongoing risk for victims. These workforces are often in a good position to intervene early and with the following skill set, could respond safely and effectively and link the person and family to the right support and services the first time, every time:

* Cultural safety and culturally appropriate responses.
* Knowledge of the different types of violence and the impacts the violence has.
* Knowledge to recognise signs and deal with disclosures.

Continuing to grow the diversity and the capacity of the specialist workforce that has a trauma informed lens and can address holistic needs, while holding accountability, is needed. A diverse specialist workforce, with the right skills and the right services to support people who use violence, will reduce and eliminate violence.

## **Prevention**

There needs to be national messaging which makes clear that family violence and sexual violence are crimes, not merely unacceptable behaviours or unhealthy relationships.

There should be programmes in schools that focus on consent and what it means to engage in a healthy way when in relationships with others.

Positive messaging, role models and peer support structures are needed for boys and men with resources and support to help men talk about their feelings, support each other to develop positive and healthy attitudes to women and to challenge unacceptable behaviours.

Support for new parents and strategies for non-violent parenting were seen as important to protect children and young people from violence, abuse and neglect by caregivers.

Education and support for carers and addressing ableism and ageism would also reduce violence towards disabled people and older people.

Education and information for new migrants about what family and sexual violence are, and about New Zealand norms, would help shift social acceptance of violence towards women and children in some cultures.

The emergent themes from engagement with people who use, or have used, violence were:

## Support - services and supports that focus on people who use, or have used, violence

* Accountability – people who use, or have used, violence need to be held accountable as well as being supported to heal and restore. Government and NGOs need to be accountable to victims to ensure their safety and people who cause harm need to held accountable
* Workforce - there is a need to upskill government and generalist frontline workforces to know how to respond safely and effectively and link the person and family to the right support and services the first time
* Prevention – national messaging reinforcing that family violence and sexual violence are crimes.

# Bottom lines for people who use, or have used, violence

* Increase access to long-term support services and programmes for behaviour change, grounded in whānau and community connections, for as long as needed, regardless of whether the person using violence is mandated by the Justice system or seeking to make change voluntarily. Recognise that behavioural change can only occur after attitude change and ensure that the person has access to the supports, including mental health and addiction services, that may be needed to engage in behavioural change programmes.
* Increase culture and age-appropriate help for people.
* Increase the capability of frontline government and generalist workers to ensure they notice and take action to stop violence occurring and can respond well the first time to people who use violence, linking them to specialist support as quickly as possible.
* Create prevention initiatives that target sustained change for people who use violence, shift harmful societal attitudes and norms that perpetuate violence, and increase and strengthen teaching around respectful, consensual healthy relationships.

1. Ministry of Justice. 2021. *New Zealand Crime and Victims Survey. Key findings. Cycle 3. October 2019 – November 2020*. Retrieved from: <https://www.justice.govt.nz/assets/Documents/Publications/NZCVS-Cycle3-A5-20210611-v1.0-fin.pdf> [↑](#footnote-ref-1)
2. FVDRC Family Violence Death Review Committee. 2020. Sixth report | Te Pūrongo tuaono. Men who use violence | Ngā tāne ka whakamahi i te whakarekereke, Health Quality & Safety Commission, Wellington. [↑](#footnote-ref-2)
3. Generalist refers to agencies and organisations whose core business is not solely family violence and/or sexual violence, but who spend a significant proportion of their time responding to violence. [↑](#footnote-ref-3)
4. Specialist organisations and practitioners work primarily in family violence and/or sexual violence prevention and intervention. The organisation may work solely in family violence and/or sexual violence or have a department or team that focus solely on family violence and/or sexual violence. Their vision, policies and procedures focus on violence prevention and intervention and their workers are trained specialist practitioners. [↑](#footnote-ref-4)