

Media Release

29 June 2015

ROYAL COMMISSION INTO FAMILY VIOLENCE: SIGNIFICANT AND ONGOING INVESTMENT NEEDED

Ongoing investment, an expansion of prevention programs and the adoption of a public health approach to reducing violence against women are among the recommendations contained in VicHealth's submission to Australia's first Royal Commission into Family Violence.

VicHealth CEO Jerril Rechter said the Commission presented a critical opportunity in Victoria to reduce levels of violence against women through strategies that address the underlying drivers of violence and improve gender equality.

"Violence against women is prevalent and extremely serious. But it's also preventable. Fixing the family violence crisis system is a top priority, but it won't be enough to end violence or to change the attitudes that support violence.

"Victoria is leading the nation on primary prevention and has a strong history of action in changing culture and attitudes. We are poised to become the first place in the world to actually reduce the prevalence of violence against women, but we need significant and ongoing investment."

Ms Rechter said VicHealth had spent the past decade building programs and practical ways to address violence against women through workplaces, sporting bodies, local governments and community organisations across Victoria.

"Primary prevention strategies – which are aimed at preventing violence against women from occurring in the first place – require significant, planned and ongoing investments. A public health approach to prevention, which has been successful in reducing smoking and motor vehicle accidents, is the most promising approach for Victoria to reduce levels of family violence," Ms Rechter added.

VicHealth's recommendations were developed in the context of its framework for action to prevent violence against women. Its recommendations to the Royal Commission include:

1. Primary prevention strategies focusing on the social determinants of violence against women are strongly featured in statewide responses to family violence.
2. Sustained investment with bipartisan commitment at all levels of government to achieve coordination across responses to family violence – including crisis response, early intervention and primary prevention – and to achieve coordination across government and non-government sectors.
3. The adoption of a public health approach to reduce violence against women as a platform for sustained investment and activity in prevention, and as the basis to coordinate delivery of proven methodologies across sectors.
4. The introduction of statewide mechanisms as a priority in primary prevention.

Ms Rechter said that addressing gender inequality in relationships, families, organisations and society as a whole was critical to tackling violence against women.

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“We know that family violence is largely perpetrated by men against current or former female partners, with a key driver of violence against women being unequal access to power and resources between men and women.

“Victoria is well-positioned to contribute to evidence in reducing levels of violence against women. We have a strong emerging evidence base and a high level of readiness across sectors and industries to work towards gender equality goals in the short and medium term.

“However, as the inequalities that drive violence are deeply entrenched at every level – from the division of responsibilities in the home to unequal representation of women in leadership roles – strategies to reduce it require significant, planned and ongoing investment,” Ms Rechter said.

More

VicHealth’s full submission to the Royal Commission can be viewed [here](#).

The Commission is due to provide its report and recommendations to the government in February 2016. Full details of the Commission’s terms of reference are available [here](#).

VicHealth’s Framework for Preventing Violence against Women can be found [here](#).

Additional information:

More than one in three women in Australia (39 per cent) aged over 18 has experienced violence at the hands of a man since the age of 15.¹

Violence against women is a contributor to ill health, particularly as a risk factor for two of the most common forms of mental illness, depression and anxiety. It is more damaging to the health of Victorian women aged 15 to 44 years than any other well-known risk factors for chronic disease, including high blood pressure, obesity and smoking.²

In a recent survey, one in three Victorians said they had witnessed sexism in their workplace, sports club or amongst family and friends in the last 12 months. However, less than half of them did or said anything about it at the time.³

95% of Australians think violence against women is a serious issue; however

- 21% believe domestic violence can be excused if the violent person regrets it
- 19% believe men should take control in relationships and be the head of the household.⁴

¹ ABS (Australian Bureau of Statistics) 2013, *Personal Safety Survey, Australia, 2012*, cat. no. 4906.0, www.abs.gov.au/ausstats/abs@.nsf/mf/4906.0

² VicHealth 2004, *The health costs of violence: Measuring the burden of disease caused by intimate partner violence*, Victorian Health Promotion Foundation, Melbourne.

³ VicHealth 2012, *More than Ready*

⁴ NCAS 2014

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