

Australian Nursing And Midwifery Federation

**SUBMISSION TO THE HOUSE
STANDING COMMITTEE ON SOCIAL
POLICY AND LEGAL AFFAIRS -
INQUIRY INTO FAMILY, DOMESTIC AND
SEXUAL VIOLENCE**

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INTRODUCTION

1. The ANMF welcomes the opportunity to provide a submission to the House Standing Committee on Social Policy and Legal Affairs concerning its *Inquiry into family, domestic and sexual violence*.
2. The ANMF is Australia's largest union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial and political interests of more than 295,000 nurses, midwives and carers across the country.
3. Our members work in the public and private health, aged care and disability sectors across a wide variety of urban, rural and remote locations. Through our work with members we aim to strengthen the contribution of nursing and midwifery to improving Australia's health and aged care systems, and the health of our national and global communities.
4. Approximately 89% of nurses and midwives are women. As family, domestic and sexual violence predominantly affects women, it is highly likely that many nurses and midwives may have been affected at some point.
5. In February 2011, the Council of Australian Governments endorsed the 12-year *National Plan to Reduce Violence against Women and their Children 2010-2022 (National Plan)*. Like the Australian Council of Trade Unions (ACTU), the ANMF exhorts the Committee to recommend that the next National Plan include more emphasis and detail on the vital role of work in the advancement of gender equality and the prevention of family, domestic and sexual violence against women.
6. The ANMF ask the Committee to read our submission in conjunction with that of our peak body, the Australian Council of Trade Unions (ACTU). The ANMF supports the submissions of the ACTU and the recommendations set out in the submission.

RECOMMENDATIONS

7. The ANMF adopts the recommendations of the ACTU in their submission to this inquiry. However the ANMF believes the quantum of paid domestic violence leave available should be up to 20 days per year.
8. In addition, the ANMF recommends that the plan to replace the National Plan must support better funding for front-line workers who are dealing with family, domestic and sexual violence.



INQUIRY TERMS OF REFERENCE

9. The ANMF limits its comments to the following terms of reference:
 - a. Immediate and long-term measures to prevent violence against women and their children, and improve gender equality.
 - d. The way that health, housing, access to services, including legal services, and women's economic independence impact on the ability of women to escape domestic violence.
 - i. The impact of natural disasters and other significant events such as COVID-19, including health requirements such as staying at home, on the prevalence of domestic violence and provision of support services.

a) Immediate and long-term measures to prevent violence against women and their children, and improve gender equality.

10. In the immediate and long-term nurses, midwives and carers have an important role in identifying people who are victims of domestic, family and sexual violence and facilitating their access to assistance and support, while respecting their privacy. Screening should occur in conjunction with an effective system of support following disclosure of domestic and family violence.
11. The ANMF supports an empowerment model of intervention with respect to domestic, family and sexual violence. The primary orientation of this response is the prevention of domestic, family and sexual violence and the safety and ongoing protection of the victim. Interventions should take account of medical, legal, social and cultural issues.
12. Nurses, midwives and carers should be involved in developing and implementing organisational policies and protocols to support an effective strategy for people experiencing domestic and family violence and for all staff supporting victims.
13. Nurses, midwives and carers spend a large amount of their time in the workplace. Their role usually cannot be performed anywhere else. The ANMF believes that employers have an important role to play in helping to assist workers who are suffering from domestic, family and sexual violence. These include:
 - a. Employers develop supportive and non-judgemental environments in which workers feel safe to discuss any domestic and family violence issues they may be facing.
 - b. Employers should develop guidelines and protocols which detail the appropriate action to be taken in the event that an employee reports domestic and family violence.



- c. Employers should educate, train and instruct staff on the guidelines and protocols which detail the appropriate action to be taken in the event that an employee domestic and family violence.
- d. Employers and responsible line management must maintain confidentiality at all times in relation to any report of domestic and family violence by an employee. Confidentiality is the key to those experiencing domestic and family violence having the confidence to seek support in the workplace.
- e. Comprehensive training should be provided to all managers and human resource advisers on how to implement the protocols/guidelines and maintain confidentiality at all times.
- f. Employees should be provided with up to 20 days of paid family and domestic violence leave per year in addition to all other leave.
- g. A worker who supports a person experiencing domestic and family violence should be entitled to access paid domestic and family violence leave in order to accompany the person to legal appointments, to court, to receive health care, to assist with relocation or other safety arrangements, or to assist with childcare.
- h. In order to provide support to a worker experiencing domestic and family violence, and to provide a safe work environment to all employees, employers should approve any reasonable request from an employee experiencing domestic and family violence for:
 - i. changes to their span of hours and/or shift patterns;
 - ii. job redesign or changes to duties;
 - iii. relocation to suitable employment within the workplace;
 - iv. a change to their telephone number or email address to avoid harassing contact;
 - v. any other appropriate measure including those available under existing provisions for family friendly and flexible work arrangements;
 - vi. provision of appropriate security measures to prevent harassment or intrusion into the workplace;
 - vii. privacy and confidentiality (in relation to contact details).
- i. A worker experiencing domestic and family violence should be referred to appropriate domestic violence services and support.



d) The way that health, housing, access to services, including legal services, and women’s economic independence impact on the ability of women to escape domestic violence.

14. The ANMF has long recognised that health, housing, access to services and women’s economic independence have a tremendous impact on the ability of women to escape domestic violence.
15. Branches of the ANMF work with members and the broader community to mitigate the effects of domestic violence by funding non-profit organisations whose goals are to provide much-needed safe, supportive housing for women and children fleeing family and domestic violence. Fleeing domestic violence is now the primary cause of homelessness in Australia. In Victoria in 2017–18, 90 per cent of people seeking support from homelessness agencies were women with children.¹
16. Women’s economic independence is undermined by a range of factors that the ANMF seeks to redress. In this regard the ANMF refers to our recent submission to the Retirement Income Review.² A range of steps could be immediately taken to help women be more economically independent, which the ANMF identified in this submission. The ANMF considers the key reforms that must be implemented to improve retirement outcomes and therefore increase women’s economic independence are:
 - a. Removing the \$450 threshold per month that limits low income workers earning superannuation;
 - b. Superannuation must be paid on parental leave, which is predominantly taken by women;
 - c. Enabling low superannuation balances to be increased with incentives and appropriate tax concessions via an accumulation pathway;
 - d. Ending the compulsory superannuation freeze and increase the superannuation guarantee;
 - e. Making superannuation universal and payable on every dollar earned; and
 - f. Improved education and information³

¹ ‘ANMF-supported housing for at-risk women and children closer to completion’ *OTR* (2 December 2019) <https://otr.anmfvic.asn.au/articles/anmf-supported-housing-for-at-risk-women-and-children-closer-to-completion>

² ‘ANMF submission to the Retirement Income Review’ (10 February 2020) http://anmf.org.au/documents/submissions/ANMF_Submission_to_the_Retirement_Income_Review.pdf

³ *Ibid.*, at [20]



i) The impact of natural disasters and other significant events such as COVID-19, including health requirements such as staying at home, on the prevalence of domestic violence and provision of support services.

17. The evidence to date suggests that more women are coming forward for the first time to report domestic and family violence. This was according to research by Monash University that shows COVID-19 lockdowns have worsened the capacity for abuse in many homes.⁴
18. Members of the ANMF have reported firsthand how the COVID-19 pandemic had led to additional reports of family, domestic and sexual violence. Victorian Branch member Maree Burgess works for Banyule City Council, in Melbourne. Ms Burgess says she has made more referrals regarding family violence than usual during the 'stay at home' period of restrictions.⁵
19. The increase in cases of domestic, family and sexual violence impacts ANMF members both as workers and as victims. Nurses, midwives and carers are predominantly women. Every three hours a woman is admitted to a hospital in Australia as a result of family violence.⁶ Many ANMF members provide services and support to victims of domestic violence through presentations at hospital emergency departments and providing health services to victims in the community.
20. In 2018, a study of female health professionals was done by researchers from the University of Melbourne at a large Australian tertiary maternity hospital. Over two-thirds of those who participated were nurses and midwives. The study found that nearly half (45.2%) of participants reported violence by a partner and/or family member during their lifetime.⁷ Considering that it is highly likely that domestic, family and sexual violence is increasing during the COVID-19 pandemic, this study demonstrates the clear importance of confronting these issues immediately.
21. During the COVID-19 pandemic women have lost their jobs at a faster rate than men and are being helped less by government support.⁸ This has had a corrosive effect on the ability of women to seek help and feeds into the issues that ANMF members are seeing of increased rates of domestic and family violence.
22. The pandemic has also exacerbated existing inequalities in the labour market according to University of Melbourne Associate Professor Alysia Blackham, who researches workplace discrimination and inequality. She told SBS news that "Women were already overrepresented in insecure work and are more likely to be on casual contracts with no paid leave entitlements, so there is no obligation to employ them on an ongoing basis or ensure certain hours."⁹

4 'New reports of family violence spike in COVID-19 lockdown, study finds' *The Age* (8 June 2020)

<https://www.theage.com.au/national/victoria/new-reports-of-family-violence-spike-in-covid-19-lockdown-study-finds-20200607-p55096.html>

5 'MCH services during COVID-19: more family violence reporting' *OTR* (29 June 2020) <https://otr.anmfvic.asn.au/articles/mch-services-during-covid-19-more-family-violence-reporting>

6 Domestic Violence Victoria website (retrieved 23 July 2020) <http://dvvic.org.au/understand/about-family-violence/>

7 McLindon, E., Humphreys, C. & Hegarty, K. "It happens to clinicians too": an Australian prevalence study of intimate partner and family violence against health professionals. *BMC Women's Health* **18**, 113 (2018). <https://doi.org/10.1186/s12905-018-0588-y>

8 'Women have lost jobs faster than men during coronavirus but are getting less assistance, according to new research' *ABC RN Breakfast* (10 June 2020) <https://www.abc.net.au/news/2020-06-10/women-have-lost-jobs-faster-than-men-during-coronavirus-but-are/12338598>

9 'Women have been the hardest hit by Australia's coronavirus job losses' *SBS News* (8 May 2020) <https://www.sbs.com.au/news/women-have-been-the-hardest-hit-by-australia-s-coronavirus-job-losses>