The MuSeS Research Project was a partnership between researchers at the University of Melbourne, University of Tasmania, Flinders University and the Multicultural Centre for Women’s Health. MuSeS was funded by Australia’s National Research Organisation for Women’s Safety (ANROWS) to find out how multicultural and settlement services can better support women experiencing violence.

What do we mean by multicultural and settlement services?

In our study, multicultural services included a wide range of government and non-government organisations working primarily with multicultural communities, including ethno-specific community organisations and groups.

Settlement services receive specific funding from the Australian Government to deliver programs and services to newly-arrived migrants and refugees. Specialist refugee mental health services are part of the settlement services sector.

Talking with service providers, we found that multicultural, settlement and specialist mental health services often overlapped. In this document, when we refer to multicultural and settlement services, we are not distinguishing between the two, unless we make a specific comparison.


What we know: how multicultural and settlement services support women experiencing violence

About the MuSeS research project

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What did we ask?

1. How do settlement and multicultural services support women experiencing violence?
2. What factors strengthen or limit this work?
3. What more can be done?

Who did we ask?

Between 2018 and 2019, we spoke with, interviewed and surveyed:

- 378 service providers, through a national online survey
- 66 service providers in Victoria, South Australia and Tasmania, including specialist refugee mental health services and focus groups with volunteers
- 47 refugee and migrant women

A national advisory group and stakeholders in each of the three states for feedback on our approach and findings.

Thank you to all the stakeholders, service providers and volunteers who shared your experiences and expertise with us. This document provides a quick summary of what you told us.

The full report is available on the ANROWS website: https://www.anrows.org.au/project/the-muses-project-multicultural-and-settlement-services-supporting-women-experiencing-violence/
1. Service providers regularly meet women experiencing violence and often play a vital role in identifying violence, receiving disclosures, supporting women and referring them to services

Multicultural and settlement service providers told us they often felt they needed to go beyond the scope of their role to support women and children experiencing violence. The types of support they provided included:

- Delivering education and information about domestic and family violence
- Hearing disclosures of violence, or identifying signs of violence
- Referring and supporting women to use specialist family violence services
- Working with men who use violence.

2. Service providers agreed that migrant and refugee women who experience violence face enormous barriers to seeking and receiving the help they want and need

Migrant and refugee women experience domestic and family violence at least as much as women in the wider population, but it is much harder for them to access and successfully navigate a new and complex system, to reach a positive and sustainable outcome.

Some specific issues raised included:

- lack of multilingual information
- services’ inconsistent use of interpreters
- financial barriers
- social isolation
- potential backlash from social networks
- threats of deportation
- experiences of discrimination
- mistrust of authorities
- residency rights/visa conditions
- pressure and/motivation to maintain the family unit
- eligibility for services and impacts on migration

The most important things we can do is make sure that they don’t regret telling us… Part of our role is helping them understand the system so they can make informed choices about how they engage with it, because we know it’s pretty high risk… [and] they don’t [always] understand the potential consequences.

(Settlement Service Provider)

So, it’s that fine line…Helping them understand the system but not creating false hope and actually going through a process which is unlikely to succeed.

(Ethno-specific settlement service provider)

[5]olving one need by going to a family violence service denies other needs…I really need my community for my language, cultural continuity for my children, and…there’s only so many…people from my background in this city.

(Mental health service provider)
3. Service providers told us what they needed to support women better: training, support, and sustained, trust-based relationships with clients and communities

Service providers said they were most able to identify and respond to family violence when they have:

- access to regular paid and organisation-wide training for all staff and volunteers
- formal and informal organisational support processes to protect workers' wellbeing, including debriefing and supervision
- strong ties to migrant and refugee communities, which requires a) a strong and supported bilingual/bicultural workforce and b) low staff turnover and continuity of care.

[H]aving a good supervisor, having that training. Having that space [for] peer supervision, being able to talk, bounce ideas with your colleagues [is helpful]

(Mental health service provider)

[B]icultural-bilingual workers...are pivotal to the work that we do. They are our bridge, both cultural bridge and language...It enables our clients to connect with us maybe a bit more quickly than if they went somewhere else, and it is an issue of trust. Unless you have safety and trust, you can't work with people, especially people who have been traumatised before coming here. Safety and trust go hand in hand.

(Settlement service provider)

[E]ven the reception staff should be trained to recognise signs of violence and be culturally sensitive.

(Settlement service provider)

4. Funding constraints, eligibility restrictions on services, and limited referral options all severely limit service providers’ ability to help

Service providers consistently told us that the biggest challenges they faced related to their limited funding, their service scope, and limited options for referral. Specific issues raised included:

- insufficient funding to provide adequate support to women experiencing violence
- conditions of funding that limit who is eligible to use a service, based on their postcode, visa category or time since arrival
- limited referral options for women who are not in immediate crisis, or do not wish to leave their partners
- limited referral options for men using violence, as well as general supports and primary prevention programs for men.

We have more and more people coming through the door and less and less volunteers who actually do that work. We have only a certain amount of time to sit with everyone. People experience so much...and you could help them but...you can’t.

(Volunteer)

[R]esources are limited in general, but for people seeking asylum...there's a big gap in terms of where these women and children can go to, and men as well.

(Settlement service provider)

I think it’s expected that if a woman is in an abusive relationship she should leave. There are a lot of services available for people who leave, but for people who don’t want to leave, it’s harder.

(Mental health service provider)
What more can be done?

Service providers shared many ways that family violence services, multicultural and settlement services and government can improve the ways they respond to violence against refugee and migrant women.

Some fundamental steps on which most service providers agreed are:

1. Recognise that responding to family violence is part of the work of multicultural and settlement services, and they play a key role in the family violence sector

   Somebody might come in wanting help with an electricity bill and then as the conversation deepens we find out the partner has a gambling addiction, there’s no money and that’s just one form of the many forms of abuse that are perpetrated against the woman. Yeah, it’s not always, “Hi, I need help with DV”.
   (Multicultural service provider)

2. Provide funding accordingly and across the entire spectrum of family violence prevention and response activities, services and programs

   So, how do we, as settlement services and ethno-specific services, just support those women? How do we? We don’t … To work with just one woman with her family around that, particularly if they don’t want to leave the relationship, it’s beyond the current means of funding, because we are—because we’ve got—we have hundreds of clients that we need to support. You cannot case-manage a family like this without having the resources and the funding and the expertise and the skills and all of that.
   (Ethno-specific settlement service provider)

3. Build the bilingual/bicultural workforce within the family violence sector

   The client was supported, and we linked her with a family violence service that spoke her first language. So, no need for interpreters and we got the flexible support package for her as well…. And, it was a really positive outcome and the client could move on with her life and re-establish herself.
   (Settlement service provider)

4. Provide training and support structures for multicultural and settlement services staff

   [Training is] necessary because it’s a very specific skill base to be able to assess, especially the more subtle signs of family violence. But also, to be able to have that conversation in a way, where the woman is able to come back.
   (Ethno-specific settlement service provider)

5. Strengthen collaboration between the family violence sector and the multicultural and settlement services sector

   So, family violence people should come to us, but we should also go out to family violence services as well, and talk about if you’re assessing someone from a refugee background who might have torture trauma, or this might help. Because, there’s a lot of knowledge from both sides that could work better together.
   (Mental health service provider)