Domestic and family violence, coercive control and exploring ideas and practices of prevention for migrants and refugees in Victoria

A report by Monash University and inTouch Multicultural Centre Against Family Violence

Acknowledgement of Country

In the spirit of reconciliation, Monash Gender and Family Violence Prevention Centre and inTouch Multicultural Centre Against Family Violence acknowledge the Traditional Custodians of Country throughout Australia and their continuing connections to land, sea, community and culture. We collectively pay our respects to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples.

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Contents

Acronyms

CALD	Culturally and linguistically diverse
DFV	Domestic and family violence
FGD	Focus group discussions
IPV	Intimate partner violence
RRE	Respectful Relationships Education
VRCFV	Victorian Royal Commission into Family Violence

Executive summary

'Migrant and refugee' is a term used to capture a significant part of the Australian population, including those born overseas (29.1% of the Australian population, 31% of the Victorian population). It also describes the Australian-citizen children of parents born overseas (48.2% of the Australian population, 49.1% of the Victorian population) and those who hold temporary visas (such as international students).[1] This means that this is both a diverse and dynamic group rather than a formalised category. This is particularly important in conversations around domestic and family violence (DFV) and primary prevention. While primary prevention 'aims to shift the underlying drivers of violence against women – the systems, structures, norms, attitudes, practices and power imbalances that drive this violence' (Our Watch 2021:55–56), the specificity of the structural, social, economic and political context for migrant and refugee populations is widely varied. This poses important considerations, then, for the specific focus on primary prevention of coercive control for migrant and refugee women and communities more broadly in Victoria, including in the context of the present study. This study involved 2 phases. First, it sought to capture the state of knowledge on coercive control for migrant and refugee women via an examination of the extant empirical and grey literature in Australia and internationally. Second, it sought to work with men and women across Victoria who identify as migrants or refugees, and key stakeholders, to explore coercive control and the role of and opportunity for primary prevention.

The key points drawn from phase one of the research were as follows:

1. **Knowledge gaps around coercive control remain predominant, and in relation to migrant and refugee women this is heightened.** This, in part, reflects the considerable challenge of capturing a complex pattern of control that is largely unseen, and the dynamic nature of the migrant and refugee population.

2. **Structural conditions are key to understanding what sustains and enables DFV for migrant and refugee women, including coercive control.** Attention to structural reform and recognising state harm is required, alongside efforts to identify and reduce the empowerment of perpetrators via structural conditions.

3. **Prevention work in the area of coercive control remains in its infancy**. There is no clear evidence that is specific to coercive control prevention. What is clear is that the understanding

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[1] ABS (2021). Australia's population by country of birth. https://www.abs.gov.au/statistics/people/population/australias-population-country-birth/latest-release. State of Victoria (2021). Discover Victoria's diverse population. https://www.vic.gov.au/discover-victorias-diverse-population. The term 'migrant and refugee' is used in the Australian research and policy context, including in the latest National Plan to End Violence against Women and Children 2022-2032, to refer to individuals who live in Australia and were born overseas or were born in Australia but whose parents or grandparents were born overseas (e.g. Chen 2017; Henry et al. 2021; Segrave 2017, 2018; Vaughan et al. 2015, 2016). The term provides recognition of the ways in which lived experience is shaped by the migration and settlement process, as well as other aspects of social location, including race and ethnicity, citizenship or migration status, class, and cultural heritage (Sokoloff and Pearce 2013).

of primary prevention as a strategy that occurs simultaneously with other practices, such as early intervention, is critical given the dynamic nature of the refugee and migrant population.

From this foundation, we undertook a detailed empirical phase of the research, working with men and women across Victoria.

Findings

There are 5 key findings from this work in phase two:

1. **'Migrant and refugee' is a dynamic category that comprises people with diverse identities and experiences. Care is needed to ensure that challenging gendered practices that cause harm does not inadvertently criticise or blame a particular group for violence.** Prevention strategies need to be informed by an understanding that gender dynamics are fluid across ethnic, linguistic, faith/religious and migrant groups, including people in cross-cultural relationships. Furthermore, there needs to be an understanding that targeting specific communities can result in negative consequences.

2. **Understanding of DFV among participants in the present study was diverse and nuanced: coercive control was not a term that resonated across the participant group. A key focus was the question of who speaks about gendered violence, how they speak and to whom, plus the importance of questioning the prioritisation of coercive control.** This study drew on a diverse participant group (i.e. comprising professional stakeholders, community leaders and people from the general population). This was reflected in wide variation in both the understanding of and comfort in discussing gendered violence, including DFV and coercive control. We found that some participants wanted to ensure that any discussion about violence also engaged with the question of who is responsible to lead conversations and share knowledge, who can decide the language that is used to speak about violence and abuse, and the ways in which individuals and groups from diverse communities are engaged in these processes. The emphasis on coercive control was viewed among many in the study as narrowing the focus of discussion about DFV and was seen to undermine the ways that people were talking about these issues at the community level and in different community contexts. This includes those who were engaged in prevention and intervention work. Many reiterated the importance of diversifying how concepts are used and explained.

3. As per definitions of primary prevention strategies (Our Watch 2021), forms of prevention work are difficult to separate as discrete practices: **it was emphasised that primary prevention cannot exist in isolation from early intervention, owing to the diversity and complexity of the migrant and refugee experience.** For example, a large proportion of migrants arrive married and with families, or arrive as adults and are no longer the key target for primary prevention activities.

4. **There are gendered views regarding primary prevention and early intervention, with an emphasis on the importance of men's engagement and leadership.** Consistently, discussions

centred on the need to empower women. While for men, the focus was on the need to engage men primarily, as well as the challenges regarding balancing visibility and accountability of men.

5. **Structural inequality and reform were consistently identified as critical to the work of all forms of prevention (primary, early intervention and response).** For some participants, what was clear was that addressing the structures and systems that sustain inequality was a more urgent priority than interrogating or translating the notion of coercive control or bringing it to the fore as a priority issue in the context of prevention.

The findings from this research offer a substantial insight into understandings and attitudes to coercive control and DFV more broadly, and the ways in which migrant and refugee men and women view the opportunities to address gendered violence. We drew on these findings and the input of the advisory board to identify implications for prevention ideas and practices, which we outline below.

Implications for prevention ideas and practice

There is currently significant activity and conversation around domestic and family violence broadly and in relation to coercive control. At the time of writing, this included a national consultation to review the draft National Principles to Address Coercive Control (the National Principles), and the release of the next ten-year National Plan to End Violence Against Women and their Children. This signals the continued importance of commitments to primary prevention and early intervention.

This research was exploratory: it was not designed to specifically translate into actionable prevention activities. Rather the findings point to some important implications for understandings of and future directions for prevention approaches.

One of the clearest messages from this research was that leadership in the area of prevention must be diverse, culturally engaged and aware of the context of people's lives. The implications we identify are drawn from the findings of the second phase of research and our discussions with stakeholders at the Action Review (see p. 12):

1. There is a need to develop a more comprehensive account of activity and reconciling different approaches to prevention, to monitoring, to engagement and to the quality and reach of that work across Victoria. This could take various forms and include, for example, an up-to-date account of work that is happening. Support is also required for monitoring and evaluation, as well as reviewing existing work and considering both the impact of the variation of funding models and the potential for ongoing, quality, expert work that cuts across primary prevention and early intervention.

2. There is an opportunity to support the development of a community of practice, focused on how best to moderate a variety of approaches to different levels of primary prevention and early intervention activity that reflect diverse needs across a dynamic and complex subset of the broader Victorian community, and that intersects with the need for a range of voices, leaders and approaches to support safety as the priority. Building on from this, there is scope

to position Victoria as leading in community-led practices that are informed, dynamic and tailored to needs of various communities.

3. More broadly there remains ongoing work in understanding impactful practice in prevention and recognising how primary prevention may sit alongside early intervention.

4. Engage men and recognise and valorise multiple ways for positive masculine identities.

This is not the work of one organisation alone, but these findings point to the importance of prevention and intervention conversations being led across the sector and with communities.

Background, objectives and methodology

Background

The objective of this research report is to highlight key findings from a study that was designed by an external funder to specifically look at the context of coercive control for migrant and refugee women and girls in Victoria, Australia. The original objectives of the work included:

- establishing a baseline of what we know about coercive control for migrant and refugee women and girls and identifying gaps in knowledge

- undertaking action research as a way to verify the experience and explore the full extent of coercive control for Victorian migrant and refugee women and girls

- providing guidance to inform programming and advocacy for policy makers and practitioners to assist in the appropriate design for primary prevention in coercive control that is inclusive of migrant and refugee women's needs and perspectives.

Once the research was contracted, the research team (from Monash University and inTouch Multicultural Centre Against Family Violence) worked with the funder to refine the scope and intent of the project to fit within the proposed timeframe and stated objectives. Researchers at Monash University and inTouch have an extensive relationship working collaboratively in a variety of capacities, extending over the past several years. They bring expertise and specialisation in research, advocacy and service delivery to this work.

Objectives

This project was designed to lead the development of the evidence base on the specificity of the DFV experience among migrant and refugee women and communities more broadly, with a focus on coercive control, and a specific view to explore the role of and opportunity for primary prevention.

Recent research has demonstrated that migrant and refugee women experience specific forms of DFV (e.g. Segrave et al. 2021; Boxall and Morgan 2021). But there is limited research specifically on coercive control. This project did not seek to establish the prevalence of coercive control. Rather, it sought to build on the existing knowledge base in order to:

- review the extant research on coercive control for migrant and refugee women

- explore experiences and understandings of coercive control with a sample of men and women from migrant and refugee backgrounds across Victoria

- identify views and strategies surrounding primary prevention and coercive control.

In undertaking this project, we were aware of our obligations as researchers to think critically about the ways that power shapes how research projects are framed and who controls their

design and implementation. These dynamics are brought to the fore in research on DFV on specific groups, including migrant and refugee women and communities, given the influence of various understandings of gender and culture and how this connects to some of the drivers of violence. We recognised that static accounts of difference, as others explore (see e.g., Murdolo and Quiazon 2015), have contributed to the siloing of migrant and refugee perspectives in prevention policy and practice in Australia. Not only does this play a role in shaping how resources are allocated (e.g., Abraham and Tastsoglou 2016) but it also has the potential to undermine the need to address how structural conditions contribute to DFV in different socioeconomic, political, ethno-cultural, geographic and transnational contexts. While this research focused on migrant and refugee communities, our findings reflect that thinking about this population as a single entity and/or as individual identities as tied only to that community or population is limiting and undermines the complex work and considerations in the area of DFV prevention.

Methodology

The research design, which is captured in the diagram below (figure 1), was developed to align with the original request from the funder and to ensure engagement with the findings from stakeholders and experts (including participants in the research). The project was designed to enable each phase to inform the next. The advisory group was involved in key stages of the project, reviewing and providing input on the proposed research design and reviewing the analysis and providing input into the findings arising from the project.

Figure 1: research design and process overview

Phase one
Desk review of scholarly and grey literature.

Phase two
Empirical research (Qualitative FGD and survey).

Action review
Presentation of findings to, and development of, implications with advisory group and stakeholders (including research participants).

Final report

Phase one: desk review

The desk review of academic and grey literature was the first phase of the research process. It enabled an understanding of key issues and gaps in knowledge. The aim of the desk review was to highlight what is known about coercive control broadly, and specifically as it pertains to migrant and refugee women and populations. The desk review sought to highlight gaps in the literature regarding primary prevention of coercive control perpetrated against migrant and refugee women. This work was undertaken via key word searches of relevant literature. The authors of this report conducted a thorough search of relevant social science, legal and health databases for articles that relate to coercive control perpetration, victimisation and prevention. Given the varying terminology used, searches included 'power and control', 'intimate terrorism', 'patriarchal terrorism' and 'social entrapment' as terms used synonymously with 'coercive control'. Additionally, a targeted search was conducted for behaviours that are often characteristic of coercive control, such as emotional and psychological abuse, economic abuse, and stalking. While physical and sexual

abuse often form part of the perpetration of coercive control, this report does not include studies that consider these forms of violence in isolation. In recognition of the large and ever-growing body of literature on DFV broadly, the desk review scope was limited specifically to a review of research on coercive control. However, given the minimal research conducted on primary prevention and coercive control specifically, the research team drew on the broader literature, highlighting what can be learned from larger violence against women primary prevention initiatives.

informed by the findings from the first phase of the research (desk review) and in consultation with the advisory group. The schedule that was designed for the FGD focused on the following areas:

1. Community identity
2. Domestic and family violence
3. Coercive control
4. Prevention

The survey instrument was designed to follow the same structure. It allowed participants to share their views in an anonymous online platform. The advisory group provided input into the question design and the recruitment strategy.

Table 1: data sample overview

Target sample	Aim	Final sample
Adult women who identify as migrants/refugees	10 (5 women p/group, n=50) focus groups with women, across Victoria	16 FGD (n=46 women)
Adult men who identify as migrants/refugees	4 (5 men p/group, n=20) focus groups with men. Focus on findings from phase one, understanding, experience and action	6 FGD (n=17 men) 2 FGD (mixed) (n=6 women and n=2 men)
Adults who identify as migrants/refugees	20 survey completions	n=2 participants (women)
Total sample	90 participants	73 participants (n=54 women and n=19 men)

Phase two: empirical data collection

The applied research component of this project was designed as a qualitative exploration conducted via small focus group discussions and a survey instrument to canvass discussions around DFV, coercive control and prevention with migrant and refugee adults across Victoria. The summary of the final sample is in table 1.

Focus group discussions

The focus group discussions (FGD) were semi-structured, with the key areas of discussion

Ethical approval to conduct this research was obtained from the Human Research Ethics Committee at Monash University (MUHREC#34635). Subsequent approval was also obtained to undertake some of these discussions in person (as some participating organisations had indicated that this was their preference), plus with women and men where participants were known to each other and/or colleagues at the same organisation and were participating in a professional capacity (e.g. as settlement support workers). The FGD were

designed to be attentive to a series of potential risks to participants and researchers. The 3 most pertinent risks were:

- the need to be attentive and responsive to emotional or psychological distress in both online and in-person settings
- ensuring confidentiality and privacy of participants
- obtaining informed consent.

These risks were managed by providing detailed information regarding support available to participants and ensuring their ability to leave/not answer/keep their video off during calls on the video platform Zoom, and/or rename their username, which was confirmed at the beginning of FGD. All participants read the Explanatory Statement ahead of participation and understood how confidentiality was being managed. All participants confirmed their consent to participate verbally before FGD began.

The recruitment strategy drew on the team's extensive experience in research and service provision networks, and the advice and support of the advisory group. The research team relied on a diverse range of recruitment techniques, including:

- emailing and cold calling internal and external stakeholders from across Victoria to share information about the project
- sharing details about the project with the research team's professional networks and colleagues who passed on information via word of mouth, email and dissemination of a project flyer including via social media
- snowball sampling.

For potential participants to sign up, they were either sent an online form with a series of dates and times to choose from or an email with a list of suitable dates and times after contacting the research team directly. Participants indicated to the research team their gender identity by self-selecting from the following categories at the sign-up stage:

- 'Woman'
- 'Man'
- 'Non-binary'
- 'I use a different term'

(Note: participants were asked to specify where they indicated they used a different term). We intended to invite people to attend individual or small FGD or mixed groups. However, no participants selected this.

All FGD were conducted in English. However, in some cases participants asked others (who they knew and who were part of the discussion) to translate when they were trying to explain complex issues (this was outlined as an option in the Explanatory Statement). All except 2 of the FGD were held on Zoom. Only the audio recordings were saved for transcription purposes. This strategy enabled more flexible engagement (i.e. geographical reach without the financial and time cost associated with travelling across the state to undertake the work). Two FGD were undertaken in person as per the preference of the community groups. This was possible in the absence of any COVID-19-related restrictions impacting the research team's ability to travel and undertake such work.

In some FGD, there was a discussion of definitions and participants expressed interest in how the research team was defining 'coercive control'. The approach in the context of this research was to acknowledge that there were different definitions. The research team provided examples of coercive and controlling behaviours, rather than a single definition, and this reflected the intention of the project – to explore understanding and how participants engaged with these issues, rather than to explain what the concept was and examine reactions or responses to it.

Survey

The online survey was set up using Qualtrics survey software. The survey was designed to reach additional participants who were interested in participating in the research, but who could not participate in the scheduled focus group and/or who were less inclined to discuss their views in a group setting. The survey tool was not separate to the FGD, but the same prompts were used to elicit long-form qualitative responses. The survey was shared with participants who were unable to attend the FGD and with organisations once the quota of FGD participants had reached 90%. This reflected the prioritisation of the semi-structured FGD interviews as a much richer way to gain insight and to prompt for additional information.

Analysis

The research team utilised NVivo software to undertake thematic analysis (Braun and Clarke 2006) to identify key findings around understandings of coercive control and, critically, views on prevention initiatives, activities, messages and how to best impact migrant and refugee communities from a prevention perspective. The audio recorded discussions were transcribed verbatim. Transcripts were de-identified and all attributable information was removed (except for gender identity). The transcripts from the FGD and the survey responses were uploaded as one data set and analysed together.

Following preliminary analysis of the data, the research team ran a workshop with the external project advisory group and other stakeholders (including participants who expressed interest in taking part), in early October 2022. The focus of the workshop was, specifically, to seek feedback on the findings and input on the emerging implications of the research.

The data set: participant demographic summary

The research team specifically asked participants about the communities they identified as being a part of, in addition to information about their age and postcode. Participants cited ethnic, national, faith-based, work-based and other communities. This provides insight into the diversity of the sample.

Participants ranged in age: the majority were 25 to 44, as captured in table 2 (noting also that some participants opted to not disclose their age, as indicated below).

Table 2: demographic information: age

Age range (years)	No. of participants
18–24	5
25–34	19
35–44	15
45–54	6
55–64	2
65+	2
Not provided	24

There was a commitment to reach participants across Victoria from the outset of the project. Significant time and energy was invested in reaching out to community organisations across the state and working with advisory group members and other stakeholders. However, the combination of time limitations, alongside the noted reticence regarding the research focus, ultimately created challenges in translating interest in the research into commitments. This resulted in a more concentrated pool across the state: our successful recruitment occurred within a reasonably concentrated area of Victoria.

Summary of evidence synthesis

Key points

1. **Knowledge gaps around coercive control remain predominant, and in relation to migrant and refugee women this is heightened.** This, in part, reflects the considerable challenge of capturing a complex pattern of control that is largely unseen, and the dynamic nature of the migrant and refugee population.

2. **Structural conditions are key to understanding what sustains and enables DFV for migrant and refugee women, including coercive control.** Attention to structural reform and recognising state harm is required, alongside efforts to identify and reduce the empowerment of perpetrators via structural conditions.

3. **Prevention work in the area of coercive control remains in its infancy**. There is no clear evidence that is specific to coercive control prevention. What is clear is that the understanding of primary prevention as a strategy that occurs simultaneously with other practices, such as early intervention, is critical given the dynamic nature of the refugee and migrant population.

Introduction

Despite increased attention on coercive control in the domestic and family violence (DFV) sector and advocacy space, there is a dearth of research that looks at how the primary prevention of DFV can be operationalised to specifically address coercive control. Further, migrant and refugee women[2] [3] in Australia face notable risks of experiencing coercive control from an intimate partner; however, little work has been done to translate what is known about the unique context of coercive control against migrant and refugee women into primary prevention strategies. The aim of the desk review is to highlight what is known about coercive control, broadly and specifically, as it pertains to migrant and refugee women. More importantly, this desk review seeks to highlight the notable gaps in the literature regarding the primary prevention of coercive control perpetrated against migrant and refugee women. The review also highlights an intersectional approach to understanding, preventing and responding to coercive control.

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[2] As others have also argued within the Australian context, the term 'migrant and refugee' captures a diverse cohort of women who differ according to, for example, ethnicity and national origin (see, e.g. Chen 2017; Vaughan et al. 2016).

[3] This desk review did not extend to girls and children in the literature search. The conceptualisation of coercive control for children requires a different lens and understanding and, therefore, a stand-alone examination. A significant body of research has captured the specificity of children's experiences of family violence, and the importance of tailoring both prevention and intervention efforts to children based on appropriate, focused evidence (see, e.g. ANROWS 2018).

Understanding coercive control

Evan Stark defines coercive control as 'a course of calculated, malevolent conduct deployed almost exclusively by men to dominate individual women by interweaving repeated physical abuse with 3 equally important tactics: intimidation, isolation, and control' (Stark 2007:5). Stark further describes coercive control as a 'liberty' crime, in that it 'prevents women from freely developing their personhood, utilizing their capacities, or practicing citizenship' (Stark 2007:22). Perpetrators often engage in multiple forms of violence for sustained periods of time (Basile and Hall 2011; Boxall and Morgan 2021a; Brewster 2003; Frye et al. 2006; Johnson 2008; Krigel and Benjamin 2021; Munro-Kramer et al. 2021; Øverlien et al. 2019). According to Hahn and Postmus (2014), key behaviour types include:

- threats and/or use of physical abuse
- sexual abuse
- emotional/verbal abuse
- economic abuse/financial abuse
- stalking.

Additional manifestations of coercive control include social abuse (e.g. isolation from friends and family) (Park and Jeon 2021), reproductive abuse (or coercion) (e.g. forcing the victim-survivor to have an abortion or denying access to an abortion) (Grace and Anderson 2018), technology-facilitated abuse (e.g. digital stalking) (Douglas et al. 2019; Dragiewicz et al. 2018; Woodlock et al. 2020), legal systems abuse (e.g. vexatious litigation) (Douglas 2018; Douglas and Chapple, 2019) and spiritual abuse (Dehan and Levi 2009).

Determining the prevalence of coercive control is difficult, particularly as definitions and measurements of coercive control differ significantly (Hamberger et al. 2017). The deeply contextual nature of coercive control presents challenges to measurement. For example, some forms of power may be perceived as 'normal' expressions of love within an intimate relationship, with no definitive line between what is normal and what is abusive (Dragiewicz et al. 2018). In a recent UK study, Myhill (2015) found that of victim-survivors who had only experienced one abusive relationship since they were 16, 24% of the abuse experienced was coercive control[4]. Furthermore, it was found that, overall, 30% of women's reports, and 6% of men's, could be classified as coercive control. Research has demonstrated that women who have experienced family violence, particularly coercive control, have a diminished quality of life (Adams and Beeble, 2019; Lucena et al. 2017). Coercive control impacts women's social wellbeing (Stark 2007), economic wellbeing (Adams and Beeble, 2019; Corrie 2016; Sanders 2015), mental health (Dillon et al. 2013; Dutton 2009; Howard et al. 2013) and physical health (e.g. disability, drug and alcohol abuse) (Dillon et al. 2013; Leone 2011; Leone et al. 2004; Vella et al. 2017). Coercive control is also a predictor of homicide (Campbell et al. 2007; Dobash et al. 2004; Family Violence Death Review Committee 2020; Johnson et al. 2019).

Feminist researchers argue that gender inequality, which fuels problematic gender norms and misogynistic attitudes, underpins coercive control, and that patriarchy plays a key role in reinforcing and supporting men's violence against women (Babcock et al. 1993; Pence and Paymar 1993). Gender alone, however, is insufficient to understand why men engage in coercive control and how women experience it. Gendered drivers intersect with other forms of discrimination and oppression, including those that pertain to a person's race and/or ethnicity, class, disability, sexuality, age, religious

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[4] The author of this study categorised respondents as victim-survivors of 'intimate terrorism' when they had 'experienced abuse that was ongoing, denigrating, perceived as threatening, and had caused a degree of fear' (Myhill 2015:362).

background and citizenship or migration status (Durfee 2021; Nancarrow 2019; Our Watch 2021; Richie 2012). Using intersectionality as a lens in primary prevention research and practice can help to enhance understanding of drivers of violence and abuse which privilege gender as a unit of analysis and help to address the complexity of lived experience, which is mediated by multiple and intersecting systems of inequality (Crenshaw 1991; Sokoloff 2008).

Researchers have used the term 'omnipresence' (Stark 2012) to describe perpetrators' whole-of-life surveillance of victim-survivors, which minimises opportunities for help-seeking (Johnson 2008; Øverlien et al. 2019; Stark 2007; Tolmie et al. 2018; Woodlock 2017). Nevertheless, research tells us that victim-survivors of coercive control *do* seek help. Often, help-seeking is 'a *process*, rather than a unitary event', which is demonstrated by the fact that women often attempt to leave the relationship multiple times before they are successful (Leone et al. 2007:428). However, formal support services – such as healthcare systems, family violence support services and the legal system – are plagued by shortcomings in their responses to victim-survivors of coercive control, tending to focus only on physical violence (Doran et al. 2019; Ison et al. 2022; Owen and Carrington 2015). Legal responses to coercive control in particular have received significant attention in the last decade, with conversations about the *criminalisation* of coercive control dominating sector discussions (Evlin 2021; Fitz-Gibbon et al. 2020; inTouch 2021; Parliament of New South Wales 2021; Watego et al. 2021; Women's Safety and Justice Taskforce 2022). The backdrop to this debate centres around the shortcomings of existing laws that provide scope for police to respond to patterns of controlling behaviour that do not meet formal, incident-based definitions of violence and abuse (Stark 2012). Coercive control has been criminalised in England and Wales, the Republic of Ireland, Scotland, and Tasmania, Australia. At the time the research was conducted the Australian state of NSW has passed legislation to criminalise coercive control while Queensland and South Australia have also recently committed to the criminalisation of a standalone offence. We note that advances have been made in the interim including the release of the National Principles to Address Coercive Control in Family and Domestic Violence (Attorney-General's Department 2023).

Migrant and refugee women's experiences of domestic and family violence and coercive control

Pearce and Sokoloff (2013:786–791) suggest that immigrant women's experiences of DFV are influenced by the interactions between:

1. the contexts of women's exit from countries of origin or departure
2. the contexts of women's reception, which includes the 'social conditions of life' in the destination country
3. social hierarchies related to race and class
4. cultural heritage.

Research in Australia and internationally has sought to diversify understandings of the nature of DFV and how it manifests against different groups of women from migrant and refugee backgrounds (including, for example, marriage migrants, refugees and other temporary migrants such as tourists, students and migrant workers) (e.g. Erez et al. 2009; Pearce and Sokoloff 2013; Vaughan et al. 2015, 2016). Research has highlighted that DFV against migrant and refugee women varies, with studies drawing attention to different types, including violence that is physical, sexual, social, verbal, psychological, technological, related to reproduction and economic or financial (see, e.g. Crandall et al. 2005; Henry et al. 2021; Kim 2019; Louie 2021; Murray et al. 2019; Sheeran et al. 2022; Sullivan et al. 2021; Tarzia et al. 2022;

Vaughan et al. 2016. See also, Department of Social Services 2015; Mitra-Kahn et al. 2016; Vaughan et al. 2015). Research has also examined the distinct ways in which DFV manifests in the migration context, with empirical studies documenting forms, such as migration-related violence and abuse (e.g. Anitha 2008, 2011; Segrave 2017; Vaughan et al. 2016; Villegas 2019) and its intersections with trafficking and slavery offences, such as forced marriage, forced labour and sexual servitude (e.g. Koegler et al. 2020; Liversage 2021; Segrave 2017; Zeweri and Shinkfield 2021) as well as dowry-related abuse (e.g. Roy et al. 2019). Other studies have focused on the involvement of other family members in the enactment of abuse (e.g. Jordan and Bhandari 2016; Mayeda et al. 2019; Segrave 2017; Vaughan et al. 2016). Over the past few years, considerable efforts have been made to build the Australian evidence base on migrant and refugee women's experiences of DFV. And while research on coercive control as a pattern of abuse is emerging, much can be drawn from existing qualitative studies conducted both in Australia and internationally.

Attention to the issue of coercive control against migrant and refugee women has further enhanced understanding of the dynamics of gendered violence, including the specific tactics perpetrators use to constrain women in intimate relationships – prior to and following the move to destination countries – and limit their agency (e.g. Aizpurua et al. 2021; Anitha 2019; Bartels 2021; Chantler and McCarry 2020; Chiu 2017; Cho et al. 2020; Dudley 2017; McIlwaine et al. 2019; Segrave 2017, 2018, 2021; Segrave et al. 2021; Singh and Sidu 2020). Feminist scholars such as Chantler and McCarry have argued that using coercive control as an 'analytic frame' in research with migrant women 'allows for a nuanced and multilayered analysis by illuminating the under-appreciated dynamics relating to gender-based violence in particular contexts' and with women from different migrant and refugee groups or backgrounds (Chantler and McCarry 2020:105, 91).

For example, Anitha's research with marriage migrants in the UK has highlighted how structural inequalities provide opportunities for coercion and control in transnational marriages, and can result in women being subjected to specific 'patterns and manifestations' of abuse (Anitha 2019:1,855). Her findings detail the ways in which victim-survivors in her study – including those who were waiting on sponsorship documents – were subjected to forms of economic control, exploitation and sabotage by male perpetrators and other family members in countries of origin and destination. It was in these situations that women also experienced forms of deprivation (e.g. denial of food and medical care), were coerced into domestic labour and were also exposed to other 'techniques of degradation' and humiliation (i.e. deliberate acts that deny women their dignity, such as preventing them from using cutlery, furniture or amenities) (Anitha 2019:1,866). These experiences were exacerbated by factors such as 'insecure immigration status, lack of awareness of services, distance from natal family, and isolation through coercive control' (Anitha 2019:1,869). Indeed, migration status can be used as leverage in the enactment of coercive control. In the Australian context, Segrave (2018:127) provides examples of the ways that perpetrators are able to control temporary migrant women by using children as leverage and making threats to harm other family members, including in countries of origin. While these forms of abuse share similarities with the experiences of women who are citizens, they are also distinct owing 'to the transnational element that is present', which can see women threatened in ways that are 'reinforced and enabled by the operation of the migration regime' (Segrave 2018:127; Segrave 2021. See

also, Dudley 2017). Research that draws attention to controlling behaviours and practices of abuse in intimate relationships has also been conducted with victim-survivors from other migrant cohorts (e.g. students, workers, undocumented migrants and, more broadly, temporary migrants) and in different national contexts (e.g. in immigrant-receiving Western industrialised countries, including Australia as well as Canada, New Zealand, UK and US (see, e.g. Erez et al. 2009; Erez and Hartley 2018; Forbes-Mewett and McCulloch 2015; Mahapatra and Rai 2019; McIlwaine and Evans 2020; Segrave 2017; Vaughan et al. 2016; Vasil 2023).

Prevalence data concerning migrant and refugee women's experiences of DFV is limited in Australia to recent studies. Predominantly, studies focused on prevalence are impacted by methodological limitations, such as English-only surveys, the tendency to treat migrant and refugee women as a homogenous group, and, oftentimes, an under representation of women from diverse backgrounds and countries of birth/origin (see, Vaughan et al. 2015). Importantly, many studies use the single variable of 'language other than English spoken at home' to capture a non-English speaking sample (Segrave et al. 2021). This results in a limited understanding of women's experiences of DFV, as structurally and socially significant factors – such as visa status, citizenship, religious identity or cultural heritage – are not captured.

Prevalence data on migrant and refugee women's experiences of coercive control is limited by the small number of surveys that seek to capture this form of abuse, and the broad limitations previously outlined. Two recent studies stand out in attempting to capture this in Australia. Boxall and Morgan (2021) found in their study of 1,023 Australian women that a total of 11% of respondents reported experiencing 'emotionally abusive, harassing and controlling behaviour' in the 3 months prior to the survey. Of those, 35% (n=357) were from non-English-speaking backgrounds (Boxall and Morgan 2021:3). This survey, however, was limited by the single variable of language spoken at home, and also by the definition of coercive control. A recent Australian study drew on findings from a survey with 1,392 women from migrant and refugee backgrounds. It asked about controlling behaviours, including a broad range of behaviours specifically connected to migration status (Segrave et al. 2021). This study found that 33% of migrant and refugee women who participated had experienced some form of DFV, and that controlling behaviours were the most prevalent at a rate of 91%, followed by other forms, such as violence towards others and/or property (at a rate of 47%) and physical or sexual violence (at a rate of 42%) (Segrave et al. 2021). The surveyed also reported, for the first time in a national study, migration-related controlling behaviours. It found that temporary visa holders were proportionately more likely to experience DFV generally, and more likely to experience migration-related controlling behaviours (Segrave et al. 2021).

Paying attention to the specificity of migrant and refugee experiences of DFV is important: there are unique contextual factors and structural issues that contribute to sustaining abuse and also, specifically, impact access to support. Non-citizens who experience DFV are often less able to access family violence support because their migration status limits access to housing, financial and other supports (inTouch 2020; National Advisory Group on Women on Temporary Visas Experiencing Domestic and Family Violence 2022; Segrave 2017; VRCFV 2016). Different groups of migrant and refugee women confront a series of cultural and structural barriers in receiving contexts, which can impact disclosure and how they seek help. These include:

- social isolation
- commitment to marriage
- fear of separation from children
- pressures relating to women's cultural or religious identities or belonging to community
- restrictive migration policies
- financial dependency
- negative experiences with state services and/or authorities.

(For further discussion see, e.g. Block et al. 2022; Ibrahim 2020; Lemma et al. 2021; Mengo et al. 2022; Vaughan et al. 2015, 2016). Leaving a perpetrator may also have specific implications for women's families in countries of origin, which further complicates women's situations in receiving contexts such as Australia (Vaughan et al. 2015, 2016; McCulloch et al. 2017). Those who do seek formal help may also experience considerable challenges once they are in the system (see, e.g. Jelinic 2021; Mulvihill et al. 2019; Murshid and Bowen 2018).

Preventing and responding to coercive control against migrant and refugee women

Few empirical studies have focused on the issue of the prevention of coercive control. Prevention initiatives specific to coercive control are predominantly secondary and tertiary in nature – most notably, regarding criminalisation efforts (noted above) (see, Walklate and Fitz-Gibbon 2019). Perpetrator interventions, such as men's behavioural change programs, also form a significant arm of this response (see, O'Connor et al. 2021). Primary prevention literature is scarce, with most of the work done in this space being broadly directed towards violence against women more broadly. This is significant within the context of Johnson's (1995, 2008) work, in that if we acknowledge that not all domestic and family violence is the same, many primary

prevention initiatives may overlook coercive control, instead directing focus towards situational couple violence which is more commonly characterised by physical violence born out of relationship and life stress than coercive control, which has far more complex drivers. International research on attitudes towards violence against women highlights the challenges of primary prevention, in that, despite improving attitudes, gender bias against women is deeply embedded in society (Horowitz et al. 2017; Phillips et al. 2018). In Australia, the 2017 National Community Attitudes towards Violence Against Women Survey (NCAS) revealed that young Australians have a 'high level of understanding that domestic violence involves physical and non-physical forms of abuse' (Webster et al. 2018:20). However, 22% of young men agreed that men should take control in relationships and two in five young Australians believed that 'it's natural for a man to want to appear in control of his partner in front of his male friends' (Webster et al. 2018:23). Evidently, while knowledge of non-physical forms of DFV grows, the underpinning attitudes and drivers remain an issue – and there may be a discord in people's understanding of the ways in which control often underpins DFV. Primary prevention seeks to dismantle these attitudes. And – as highlighted by Respect Victoria (2021) – primary prevention of coercive control cannot be a 'one-size-fits-all' approach:

> … coercive control may present differently and require tailored approaches (to both prevention and response) depending on systemic issues and/or the individual circumstances of the victim and perpetrator … (Respect Victoria 2021:2).

Thus, primary prevention must address the drivers of violence against women in a way that recognises and responds to varying forms of oppression, acknowledging that what may work

in one community context may not work in another.

Many of these issues and gaps also extend to the scholarly literature on migrant and refugee experiences, as few studies have focused on the specific issue of coercive control prevention. Most of the emphasis on responses, in recent years in Australia, has focused on the impact of the introduction of new legislation to criminalise coercive control (inTouch 2021). This has generated considerable debate among researchers, practitioners and advocates, with different stakeholders pointing to the potential implications of legislative change – cautioning that 'education, training and policy change' is also required to ensure 'that the risk of adverse impacts on vulnerable people are mitigated' (inTouch, 2021:1). Notwithstanding gaps in the literature on coercive control prevention, much can be drawn from existing research in Australia and internationally that focuses on the prevention of DFV against migrant and refugee women more broadly (e.g. Claussen et al. 2016; Marrs-Fuchsel and Brummett 2021; Marrs-Fuchsel et al. 2012; Ogunsiji and Clisdell 2017; Orpinas et al. 2021; Robbers and Morgan 2017; Sasseville et al. 2022; Serrata et al. 2016; Taft et al. 2021; Vaughan et al. 2016; Zeweri 2022; Wong and Bouchard 2021; WHO 2014).

In their literature review, Ogunsiji and Clisdell (2017) synthesise existing scholarly research on intimate partner violence (IPV) prevention interventions with migrants, with a view to examine the process, outcomes and challenges encountered. The authors report on findings from 10 empirical studies, which were predominantly conducted in the US. They observe that knowledge about specific interventions for migrant populations is sparse, that the 'outcomes of evaluated IPV interventions among migrants are underrepresented' and that 'no conclusions have

[so far] been made about interventions that are effective' (Ogunsiji and Clisdell 2017:441). The articles reviewed focus on a range of interventions, such as media campaigns (e.g. Yoshihama et al. 2012), community education and training (Ben-Porat 2010; Hancock et al. 2014), group counselling (e.g. Marrs-Fuchsel and Hysjulien 2013; Molina et al. 2009; Singh and Hays 2008), and perpetrator behaviour change programs (e.g. Echauri et al. 2013; Hancock and Siu 2008; Parra-Cardona et al. 2013). Program evaluations took a variety of forms (e.g. surveys, in-depth interviews and observation), and the authors report that findings from each of the studies suggest that interventions had positive outcomes for the participants (e.g. changes in attitudes and increased knowledge of IPV) (Ogunsiji and Clisdell 2017). A number of challenges were also identified, including financial issues, which impacted participation, access issues and retention of participants, as well as challenges in cross-cultural communication – despite strong collaboration between researchers, practitioners and community members.

In a more recent paper, Sasseville et al. (2022) undertake a review of the literature on immigrant women's vulnerability towards IPV and the current state of knowledge on prevention. The authors reinforce the importance of recognising that 'vulnerability to IPV is not a consequence of [women's] individual characteristics' and that different cohorts of women are exposed to 'adverse conditions that accumulate over the course of their lives, making it difficult for them to get help and, consequently, to end the cycle of violence' (Sasseville et al. 2022:95). While the authors point out that prevention interventions need to take these 'contexts of vulnerability' into account (Sasseville et al. 2022:92), there is currently limited knowledge about the efficiency of different strategies to respond to violence against immigrant women. Despite this, they

state that existing studies highlight the importance of early detection of IPV for immigrant women (see, e.g. Hassan et al. 2011) and the need to ensure that risk assessment tools are not only culturally appropriate but also tailored in ways that reflect the complexity of women's intersectional needs (see also, McCulloch et al. 2016). They also point out (Sasseville et al. 2022:95) that existing research suggests that primary prevention and early intervention approaches should:

- raise awareness of intimate partner violence risk factors for immigrant women
- promote women's social inclusion in different settings (i.e. childcare and at work)
- facilitate interdisciplinary training of practitioners and promote intersectoral collaboration
- adopt a community-based approach that involves community members, including women with lived experience of IPV
- use an intersectional lens that emphasises the 'heterogeneity of [immigrant] women's social statuses and experiences'.

In their state of knowledge paper, Vaughan et al. (2015) undertook a review of international and Australian literature on the prevention of DFV against immigrant and refugee women, noting that there are significant gaps in research, including with men and boys. They state that there is some evidence to suggest that '"universal" population-based approaches', including those that take place in schools, have the capacity to exclude people from immigrant and refugee backgrounds, as many arrive having completed both primary and/or secondary education (see also, Murdolo and Quiazon 2015:39; Pruitt et al. 2017). They also argue that there is a gap in literature that examines immigrant and refugee women's leadership in the context of primary prevention (Vaughan et

al. 2015). They point to evidence which suggests that prevention programs are more likely to be effective if they are driven by the community, are 'tailored to suit the specific cultural context' and take into account the migration-specific factors that elevate women's risk in receiving contexts (Vaughan et al. 2015:41).

Having undertaken a brief review of key findings from scholarly studies, the final part of this report draws from Australian grey research that focuses on the prevention of DFV against migrant and refugee women, noting what is relevant to coercive control. Findings are discussed according to the following themes: engaging people from migrant and refugee backgrounds in primary prevention work, attending to diversity and complexity and addressing structural factors that exacerbate vulnerability, prevention work in different settings, and engaging migrant and refugee men and young people in primary prevention.

1. Engaging people from migrant and refugee backgrounds in primary prevention work

Existing research has highlighted several key principles to consider when engaging with diverse communities in prevention initiatives. Koleth et al. (2020) reflect on findings from an action research initiative, which involved 26 projects that were 'aimed at preventing violence against women and creating safer pathways to crisis and support services' for people from culturally and linguistically diverse (CALD) backgrounds in Australia (Koleth et al. 2020:9). The authors discuss a series of lessons learnt, which include ensuring that time and resources are put towards establishing trust, recognising the diverse individuals and leaders who form part of communities at the local level, ensuring that projects include funding for in-language material and events, and that future projects build on 'the

achievements and internal organisational infrastructure created by previously funded projects so that … capacity-building and relationship building does not have to start again' (Koleth et al. 2020:78. For further discussion, see AMES 2017; AMRC n.d.; Equality Institute n.d.). Another point of discussion centres on the need to ensure that interventions are *culturally safe* (see, e.g. Koleth et al. 2020; Poljski 2011; Murdolo and Quiazon 2015, 2016; Vaughan et al. 2015, 2016. For further discussion, see Ramsden 2002). Vaughan et al. (2015) highlight the importance of 'tailored and sensitive community education strategies' and point out that approaches which 'reflect understanding of the contexts and concerns for immigrant women are important strategies for effective prevention practice' (Vaughan et al. 2015:41). They point to findings from a project with South Asian and Chinese women in Sydney which show that the framing of these strategies is important and that, in some instances, focusing on 'family relationships' can help to build trust and '[provide] opportunities for a "soft entry" into the program' (Vaughan et al. 2015:41).

Although much of the literature has pointed to the importance of cultural sensitivity in primary prevention, there is also evidence to suggest that more work is needed to redefine 'universal approaches' so that migrant and refugee women's experiences are incorporated from the outset and not treated as an 'add-on' (Murdolo and Quiazon 2015:46). Poljski (2011) suggests a number of primary prevention strategies that can be used to engage individuals and groups from diverse migrant and refugee backgrounds across Australia. These include:

- advocacy
- community strengthening (e.g. leadership opportunities for young people, women and men)
- communication and social marketing (i.e. through community forums)

- direct participation programs (e.g. education for young people and bilingual health education for women)
- professional workplace training
- legislative and policy reform.

As Poljski (2011) notes, it is difficult to ascertain the effectiveness of these interventions, including the extent to which they have contributed to cultural change, as evaluations are limited (for a detailed discussion, including the challenges of measuring effectiveness, see Poljski 2011:31–34).

2. **Attending to diversity and complexity and addressing structural factors that exacerbate vulnerability**

Existing research highlights the need to think broadly about primary prevention in the migration context and to ensure that interventions consider the heterogeneity of lived experience. Poljski (2011) provides recommendations for strategies that are targeted to migrant groups who are known to face specific challenges (e.g. newly arrived women) (for a detailed discussion of these cohorts, see Poljski 2011:64–68). Given the role that changes in socio-economic status play in shaping migrant and refugee women's vulnerability to abuse (see, e.g. Anitha 2019; Pearce and Sokoloff 2013), another priority group are women in precarious employment, as well as visible minority women, whose experiences of discrimination have been shown to influence how they seek help in Australia (Poljski 2011). Over the past few years, researchers, practitioners and other stakeholders have also highlighted the need to adopt an intersectional approach in efforts to prevent DFV for migrant and refugee women (see, e.g. Chen 2017; Hatch and Aryal-Lees 2019, Koleth et al. 2020; Vaughan et al. 2016). Reflecting on their research, Vaughan et al. (2016:83) detail the challenges of engaging in

prevention work owing to assumptions about people from immigrant and refugee backgrounds, including those who rely on an essentialist view of culture, whereby 'violence is seen to stem from immigrant culture' (Murdolo and Quiazon 2015:51). As participants (key informants, victim-survivors and community members) in Vaughan et al.'s study noted, prevention initiatives must address the 'impact of negative stereotyping' in order to effectively engage with communities on the issue of DFV (Vaughan et al. 2016:83). Moreover, given that a growing body of intersectional feminist research has focused on the impact of migration processes on women's vulnerability to violence, researchers, practitioners and advocates have in recent years emphasised the importance of systemic change, including legislative and policy change, to enhance migrant and refugee women's safety. This is also relevant to prevention discussions (see, National Advisory Group on Women on Temporary Visas Experiencing Domestic and Family Violence 2022; Our Watch 2021).

3. Prevention work in different settings

Available research has also examined the different settings of prevention work for migrant and refugee women, which includes workplaces and faith settings. Hach and Aryal-Lees (2019) (see also, Poljski 2011) put forward an evidence-based model for workplace equality, which draws from the findings of the Victorian-based Equality@Work project. The project engaged migrant women workers in the aged care sector and drew on an intersectional framework to change organisational culture, norms and practices in a way that built the capacity of migrant women to seek out leadership opportunities. The project also had a health promotion component, with bilingual health educators providing tailored sessions to women on a range of issues relating to gender equality

(for a detailed discussion of the best-practice model, see Hach and Aryal-Lees 2019). As part of their research, Vaughan et al. (2020b) developed an evidence guide on the role of faith settings in addressing violence against women, drawing from participatory consultations with faith groups and a review of Australian and international literature. Vaughan et al. (2020b) note that while the research indicates that faith leaders express interest in wanting to address the issue of men's violence, they are often unsure about how to take action. Reporting on 2 prevention interventions, which underwent formal evaluation, the authors reflect on the tensions associated with 'promoting male faith leaders as agents of change and challenging male domination of leadership roles' (Vaughan et al. 2020b:10). Findings also show that primary prevention programs need to build the capacity of faith leaders to ensure they are able to respond to family violence disclosures (Vaughan et al. 2020b:10).

4. Engaging migrant and refugee men in primary prevention

Researchers, practitioners and other stakeholders have focused on the need to engage men from migrant and refugee backgrounds on the issue of DFV and its prevention (see, e.g. Fisher et al. 2020; Koleth et al. 2020; Murdolo and Quiazon 2016. See also, Poljski 2011; Vaughan et al. 2015, 2016). Koleth et al. (2020) highlight that more funding is required to establish tailored services for migrant and refugee men who use violence, including those who participate in prevention programs and require additional support. They also suggest that there is some evidence that points to a 'gap in the sector for culturally appropriate staff training programs that can fully equip practitioners to understand and address both issues of structural racism and CALD men's roles in gender-transformative prevention work'

(Koleth et al. 2020:78). Fisher et al.'s (2020) project developed a series of principles for working with men from refugee backgrounds who use violence. The project found that in order to effectively engage men, there is a need to understand their use of violence within the contexts of refugee trauma, settlement challenges (see also, Fisher 2013; Zannettino 2012), and family and community structures. These findings are important, but what also stands out is a tendency to focus on early intervention and response rather than primary prevention, and what it might look like to engage men of differing age and from diverse communities in these initiatives, as well as at the population level more broadly.

5. Engaging migrant and refugee young people in primary prevention

Research regarding effective prevention practices with migrant and refugee youth is still in its early stages. In their participatory research, Koleth et al. (2020:27) (see also, Murdolo and Quiazon 2016) point to the importance of making space for young people from diverse cultural backgrounds to participate in the design of prevention messages, including respectful relationships education. Findings also indicate that projects that were targeted towards parents were enhanced by young people's participation, as this 'offered an effective way to learn from and extend the changes that young people were already negotiating to cultural norms around gender equality' (Koleth et al. 2020:34. See also, Save the Children 2020).

Conclusion

It is clear that the knowledge gaps around coercive control – broadly and in relation to migrant and refugee women – reflect the considerable challenge of capturing a complex pattern of control that is largely unseen beyond the familial context. Migrant and refugee women experience coercive control as all women living in Australia do. However, there are no simple delineations of prevalence. What is clear is that for some women, the nature of their experiences is influenced by their status as migrants. The data also indicates that kinship family structures, which are not the exclusive remit of migrant and refugee women, can be the source of complex dynamics of coercive control where family members beyond the intimate partner are responsible for, or are contributing to, abusive and coercive practices.

Broadly speaking, prevention work in the area of coercive control remains in its infancy. There are clear gaps in prevention research on coercive control with different groups of migrant and refugees in terms of:

1. primary prevention and secondary prevention (i.e. early intervention) initiatives that have been documented
2. evaluations of these initiatives.

While existing work on DFV provides a good starting point, research on primary prevention with migrants and refugees – more broadly and in specific cultural, geographic and faith settings – remains limited. A key question to consider is how would approaches that examine coercive control as a pattern of abuse look different? And what is possible given the diversity of the migrant and refugee cohort? The evidence suggests that primary prevention alone cannot be the strategy. Rather, primary prevention efforts need to operate in complementary ways with tailored secondary and tertiary initiatives that are informed by an understanding of community and context. Given the diversity of the migrant and refugee cohort – both in terms of migration experiences and pathways and how these experiences are mediated by factors such as gender, migration status, education, socioeconomic status, age, language, work experience, faith, parental/carer status,

relationship status and cultural heritage – primary prevention strategies need to also be well defined in relation to what can and cannot be achieved, and who they are targeting.

In thinking about prevention initiatives at the every level, addressing the known barriers to migrant and refugee people's engagement is essential. Likewise, it cannot be dismissed that coercive control is not occurring in a vacuum, and is not the outcome of individualised practices. There are systems and structures (e.g. citizenship, financial, employment) that contribute to empowering perpetrators – discussions of prevention cannot put the onus back on communities as the sole focus. In conclusion, the evidence base on impactful primary prevention remains limited, and it is more limited when it relates specifically to coercive control. The evidence base is even more limited in relation to migrant and refugee cohorts. It is clear that more carefully designed initiatives, and well-designed evaluation, is key.

Findings

Key points

1. 'Migrant and refugee' is a dynamic category that comprises people with diverse identities and experiences. Care is needed to ensure that challenging gendered practices that cause harm does not inadvertently criticise or blame a particular group for violence.

2. Understanding of DFV among participants in the present study was diverse and nuanced: coercive control was not a concept that resonated across the participant group. A key focus was the question of who speaks about gendered violence, how they speak and to whom, plus the importance of questioning the prioritisation of coercive control.

3. It was emphasised that primary prevention cannot exist in isolation from early intervention, owing to the diversity and complexity of the migrant and refugee experience.

4. There are gendered views regarding primary prevention and early intervention, with an emphasis on the importance of men's engagement and leadership.

5. Structural inequality and reform were consistently identified as critical to the work of all forms of prevention (primary, early intervention and response).

The findings in this report are organised around the structure of the discussions with participants. This is key to the research team's approach to the work. Ensuring that presumptions about community and the identity of belonging to a 'migrant and refugee community' are interrogated must be the foundation of any work that seeks to understand how DFV, and coercive control specifically, is understood and responded to. This lays the foundation to consider with care the intention and impact of various approaches to primary prevention and early intervention.

1. Migrant and refugee communities

Reflections on community membership

The research team's discussions with participants from different national, ethnic, religious and linguistic backgrounds highlighted the diversity of the individuals and groups that form part of the population captured by the term 'migrant and refugee'. Discussions consistently highlighted that participants identified as being a part of multiple groups and communities – in Victoria, across Australia and in countries of origin and/or departure. These included

religious, faith-based, ethnic and/or migrant communities, as well as peer groups and community organisations (such as women's groups), plus work, school and other groups. As the following participants stated:

> I'm a social worker and have been working in the family violence sector for – I think now it's about 12 years. I'm also a single mum ... I'm an Indonesian – I was born in Indonesia, however, I also have my Australian citizenship, so now I am an Australian. So that intersection; that not quite Indonesian, but not quite Australian. (Women's focus group participant)

> My identity is formed in various ways … first, I identify as an African … but also in terms of religion, I am a Christian … So basically, religion and being an African, those two things I think to me play a significant role in being involved in several communities here. (Men's focus group participant)

In the focus group discussions (FGD) many participants also reflected on what community membership meant to them. As the following account highlights:

> Community for me is a broader term. I take it initially as a community of a neighbourhood, where I'm living and the place where I'm going to interact on a daily basis, maybe shops or local libraries or something without specifically confining myself through a particular faith. … And second thing for me, the community is mainly – as a migrant itself – [it] is a wider community. (Women's focus group participant)

Many participants spoke about the challenges of categorising the community or communities they identified with. They also drew attention to the plurality of lived experience and highlighted the differences that exist within a specific ethnic, faith-based, national or migrant community. These differences were impacted by factors such as gender, age, language, migration status, length of time in Australia, education and employment. Another consistent theme within these discussions was the impact of the migration process on a person or family's sense of belonging. This influenced how some participants spoke about their relationship to community (e.g. for some who were newly arrived, it did not necessarily make sense to speak about their connection to a local ethnic or migrant community. Instead, they spoke about their sense of belonging to a workplace, a community-based organisation, or a student or peer group). Alongside this, it was identified by a number of participants that the focus on primary prevention of coercive control experienced by migrant and refugee women must extend beyond this population as women build intimate relationships with people outside of the migrant and refugee population. Collectively, these findings point to the need for significant care in labelling primary prevention activities as 'migrant and refugee initiatives'. This, in part, is because 'migrant and refugee communities' are not a monolith. Furthermore, people who identify as migrant and refugees may also be in relationships with people who do not identify with the label. As such, both understanding experiences of coercive control and strategising primary prevention and early intervention require this understanding as a starting point (see also, Murdolo and Quiazon 2015; Vaughan et al. 2016).

The difficulty of speaking about violence and abuse as a community issue

A common reflection among participants was the difficulty of talking about violence and abuse in community contexts without running the risk of viewing 'communities' in simplistic terms. In highlighting the diversity that exists within and across the migrant and refugee cohort, participants also spoke about the fact that what constitutes violence and abuse, and the issues that are important, will differ among people from specific communities. This is a finding that has also been observed in multicultural literature on DFV in Australia and internationally (e.g. Erez et al. 2009; Vaughan et al. 2016; Zannettino 2012). It is highlighted in the following response:

> It is really important to not view … a cultural group or a group of people for example, refugees and asylum seekers, as a mono group I guess, or as a one individual group that one intervention can work. (Women's focus group participant)

How participants spoke about community dynamics, understandings and the issue of DFV more broadly depended on their position within and the extent to which they identified with one or more community. Some of these discussions also resulted in participants reflecting on their relationships to their families and ethnic communities in countries of origin, which further complicates how community is understood in this context. As these discussions highlight, it is very difficult to speak about migrant and refugee communities as a singular group. Attending to the diversity and complexity of community membership in discussions about DFV is particularly salient in order to be alert to the tendency to silo communities. As participants in this study noted, the realities of people's everyday lives as members of diverse communities can be overlooked. Moreover, these findings suggest that care needs to be taken in discussions to avoid the risk of 'othering' communities (Anitha 2019; Kapur 2002; Murdolo and Quiazon 2015; Vaughan et al. 2016). This theme is returned to in section 4, regarding prevention and education.

2. Domestic and family violence

Perceptions and understandings of domestic and family violence: individuals and communities

Discussions about DFV were diverse and revealed a variety of understandings among participants. This is not specific to this sample. Broadly, past research suggests that both attitudes around and understandings of DFV across the general population are divergent (Webster et al. 2018, 2019). Participants in this study spoke about DFV in different ways. There were disparate understandings about what it was and what behaviours fall under the 'domestic and family violence' umbrella. Many of these discussions moved to generalities, while others spoke about DFV as a continuum. Discussion also focused on what forms of DFV tend to be recognised as violent or abusive; the view of many was that the focus on physical violence remains consistent. As one participant put it: 'the physical abuse is the most obvious one people can recognise' (Women's focus group participant).

Recognition of DFV was varied. However, many participants also drew attention to more subtle behaviours and practices, including acts of control that were financial, social, emotional and migration-related. These practices were described as significantly limiting women's freedoms in Australia (e.g. their ability to drive or visit or communicate with families). Attention to these practices is highlighted in the following account:

> Someone just at home not talking to [the] other partner, just deliberately [ignoring] everything from the other side ... financial control, like ... some migrants came here, there is no income because stay-at-home mums ... and not giving enough money to go out to buy food, or buy clothes, or even socialize. I think other things would be social lives control, like control what kind of person you can meet. ... I think this all belongs to the family violence. (Women's focus group participant)

Discussions also focused on the variation in language that is used to describe DFV within and across communities. For some participants, certain practices, such as controlling the family finances, were viewed as domestic and family violence. For others, these same practices were viewed as a normal part of family life, particularly in relation to the role of men as husbands and fathers. In these instances, although the language of DFV was not used, it is important to note that this did not equate with a lack of recognition or understanding that these practices can be harmful. Rather, understanding the context was key to recognising where it became abusive and controlling, and how it impacted women's safety.

Domestic and family violence as a structural issue connected to gender and other forms of inequality

Discussions with participants illuminated the ways that DFV was generally viewed as a structural issue that is connected to gendered inequalities. While some participants spoke about violence and abuse as an individual problem, the majority reflected on the broader issue of women's unequal status in society and how this sustains different forms, patterns and dynamics of violence. This speaks to the ways in which discussions in the study moved towards a focus on the gendered drivers of violence (e.g. condoning attitudes and rigid gender stereotyping). This demonstrates that conversations like these are taking place even outside of the context of primary prevention (OurWatch 2021). Questions about DFV facilitated discussion about gender roles within

families and communities, as well as in workplaces, in relation to the state and to society at large. This is highlighted in the following discussion:

> Because of the status issue, a lot of men think women should do something – like women should take care of the family and to the point that they just force them: 'why don't you quit your job to take care of the children? Why don't you stay home? Why are you not cooking now? Why are you not washing dishes?' So, it's the conflict between traditional gender role … it's so different because everybody works nine to five, so it should be equal. But the reality is the gender role is still making women feel like they should do more work. (Women's focus group discussion)

Much of the discussion around gender roles also involved participants reflecting on the impact of migration processes on relationships and on family dynamics. As one participant responded:

> So, all these things happen in a way to give that dominance and some men do that because they begin to ... In a society where they're beginning to lose the power of being the head of their families, or they begin to use some of these subtle measures to actually trample upon the other family members, especially women children because they feel that their headship is being challenged. (Men's focus group participant)

Migrant and refugee men in particular made note of several 'pressures' (e.g. social, financial or migration-related) as being connected to the experience of DFV. Conversely, much of the discussion about DFV with women in the study moved to the issue of how migrant and refugee women are made vulnerable by migrant-specific and other structural factors, which were seen to undermine their safety and security in Australia and limit their options outside of the relationship. A series of factors were raised, including:

- issues with information and mainstream services being predominately delivered in English
- discrimination impacting access to services
- limited safe housing options
- restricted social entitlements, heightening dependency
- visa conditions creating additional leverage for control.

(See also, Anitha 2011; Segrave 2017, 2021; Segrave et al. 2021; Vaughan et al. 2016). Some participants – including women with a lived experience of DFV – also reflected on their negative experiences with services. As one participant highlighted: 'I've lived in India, and I've lived in the UK and I moved to Australia, but all they saw first was my ethnicity before anything' (Women's focus group participant). These factors were seen to impact women's help-seeking pathways and searches for support, which was a dominant theme in FGD with women. The study found that discussions about perceptions, understandings and experiences of DFV consistently moved to a focus on help-seeking and intervention.

3. Coercive control

Overall, participants in this study were at different stages of perception and understanding around both coercive control and DFV. This had flow-on implications for how primary prevention and early intervention were explored. Community perceptions and the different ways participants spoke about coercive control as a priority area of focus are examined in the following section. **This lays a foundation for careful consideration of the diverse strategies required for primary prevention and early intervention.**

Tracing community perceptions and understandings of coercive control

FGD revealed that, for individuals and groups who took part in the study, knowledge about coercive control varied and understanding of the concept was in its infancy. We stress that this is not a specific finding that any group or population is not clear on this terminology: this is a phenomenon linked broadly to community attitudes being in their infancy (e.g. Coumarelos et al. 2023. See also, Boxall and Morgan 2021; Robinson et al. 2018). The researchers found that the terminology of coercive control was not how people spoke about issues that pertain to patterns of control. And, furthermore, that controlling behaviours were rarely the focus. Even when prompted, conversations frequently returned to the broader issue of DFV. While many participants were comfortable speaking about patterns of behaviour that would otherwise be defined as 'coercive control', using the term as an entry point into these discussions did not necessarily resonate or align with the ways participants spoke about these issues.[5]

When prompted, some participants discussed a range of subtle behaviours, tactics and practices regarding their understanding of coercive control and what it meant at both individual and community levels. These included controlling women's day-to-day activities. For example:

- who women could speak to and socialise with
- preventing women from driving or leaving the house
- forms of monitoring and financial control
- manipulation and threats.

A small group of participants also pointed to the dynamics of coercive control. As the following response highlights: 'It's a pattern, a consistent pattern of controlling and coercive behaviour that exists in a relationship' (Women's focus group participant). For those who were able to precisely articulate their understanding of coercive control, their contributions highlight the variation in understanding the concept. As the following participants stated:

> Let's say in a relationship where there is an imbalance of power … that one partner is trying to control everything. … the finances, who he or she meets who or she talks to, how they interact with other people … that's how you control other people. … you want that person to behave, to act the way you want to. (Men's focus group participant)

> Coercive control is like using that imbalanced power to make others do something that they don't … they're not willing to. It has something to do with the ones who are disempowered feeling unsecure and unsafe. (Women's focus group participant)

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[5] The researchers note that these findings about how coercive control is (or is not) spoken about are not specific to this cohort, and reflect community understandings around the use of the term more broadly (see e.g. discussion in, Commonwealth of Australia 2022).

It doesn't always start with a physical abuse, it always starts with small steps … by the time the victim survivor realizes she is in that abusive relationship. So, it doesn't start always with like a physical abuse, it starts slowly for example 'It's not safe for you to drive. Or it's not safe for you to go out alone'. So that pattern might be shown as care, but there's a thin line between care and controlling behaviours and also monitoring their movements. (Women's focus group participant)

I think a sign of coercive control is when someone in the relationship start to grow dependency on the other one, and if the one [uses] some strategies to nurture this dependency, I would say that's a sign of coercive control. (Women's focus group participant)

Participants also reflected on whether coercive and controlling behaviours would be considered part of the DFV experience among members of their families and their broader community/communities (see also, Vaughan et al. 2016). This is highlighted in the following excerpts:

Coercive control is a concept that is very nuanced. If I speak to my family, they wouldn't know what coercive control is because … that control is seen as a sign of affection … it's to protect the women in the family or the children in the family or the young girls especially … because it's that you are almost sort of kept as a fish in a glass bowl where you're watched constantly. (Women's focus group participant)

So I think it's one of those [things] – coercive control is so nuanced that if a woman, say a migrant woman in Australia, is relaying back to her family [that] the husband is being very controlling of where she goes, who she speaks to, what she does, has trackers on her phone or has passwords to all her accounts, they will say: 'Oh, that's being so lovely. He loves you so much'. So that's misinterpreted … he loves you enough to protect you from all bad. But protection is on a spectrum. You have to see where it's a healthy control or a healthy protection or if it's severe control and takes away the autonomy of the other person completely. (Women's focus group participant)

Participant accounts reveal the tensions that exist within familial and community contexts. Particularly around the parameters of coercive control and at what point it reaches the threshold of being coercive, controlling and unacceptable. As one participant expressed:

I'm wondering because culture is … different cultures, I don't know what government want to do. They want everybody to be the same. People coming from other countries, they can't leave their culture altogether … we have respect … And there are laws in that house, we have rules in our house. … I don't know how you're going to separate this controlling behaviour to the discipline that we have, the culture and the other beautiful stuff that I personally believe that we have. So how can we differentiate that this is controlling? How can, as parents, we need to have control of our kid … A husband need to control the wife and a wife need to control the husband. It's a life we have to have respect and mutual respect. (Women's focus group participant)

Some respondents reflected on how young people had pointed out to them the ways their familial structures and experiences with parents was akin to coercive control. This is demonstrated by the following participant:

> I just was thinking about a young women's group I ran earlier in the year … And something that came up quite a lot was that young people … so these young people were all … most, all like 16 to 19, so pretty late teens and some of them are considered adults and they were asking questions like, 'Even if I'm 25, does my parents have to …' These were questions by law, like, 'Legally do my parents have to say it's okay for me to date someone?' And then there was questions around either, 'Can my parents force me to terminate a pregnancy?' Or, 'Can my parents force me to keep a child if I have a pregnancy?' and things like this and I think questions around being forced to get married and things like that as well, which I felt was quite interesting, especially for those who were … they were talking about, 'Oh, but what about when you're over 18?' Or, 'What about when you're …' Yeah, there was lots of questions around that which sort of said … I don't know, said it quite a bit to me about what their experience of their … control from their parents might be, their understanding of what is actually legal or not or even I guess acceptable, like whether or not that's cultural or not either. (Mixed focus group participant)

Comments such as the above reveal both the need to recognise non-Western models of family and relationships and the need to ensure careful consideration of the impact of coercive control and how it is understood, defined and operationalised in prevention or early intervention strategies. This point is re-examined in section 4. Similarly, many respondents made the point that what may be seen from a 'Western' perspective as controlling was considered exemplary practice for men in some settings. Within these broader discussions, participants spoke about men's attitudes towards control and reflected on the relationship between control and men's status within families and communities, noting the likelihood that there would be resistance to the idea of coercive control as something that is associated with violence and abuse. This is also explored further in section 4.

Additionally, some participants highlighted issues which they viewed as being significant in specific contexts. However, few participants used the language of coercive control to describe these behaviours and practices, which included:

- dowry and other forms of economic abuse or financial control
- social isolation
- multi-perpetrator abuse
- migration-related controlling behaviours, or 'visa abuse'.

(See, e.g. Anitha 2019; Chiu 2017; McIlwaine et al. 2019; Segrave 2017, 2018, 2021; Segrave et al. 2021; Singh and Sidu 2020; Vaughan et al. 2016). Within these conversations, discussion also tended to centre on the ways in which the state – via the migration system and restrictive social welfare policies – is seen to play a role in exacerbating some migrant and refugee women's vulnerability to acts of control by an intimate partner or other family members (Segrave 2021). One participant shared their view that:

> It's mostly perpetuated by men, especially in this situation where … Men who come and later go home and marry and bring their wives along. So once that

happened and then you begin to have asserted yourself, and say, 'Look, it's this guy who brought you here', please be careful. So, all these things happened in a way to ensure ... Because they're educated, they will not use violence physical, but they use certain terms to begin to say, 'Look … I brought you here. If you don't, I'll send you back'. (Men's focus group participant)

As has been documented in the broader literature on DFV both in Australia and internationally, the ways that men controlled women's ability to communicate with family members in other countries was frequently discussed. As were the implications that stem from this, such as women being prevented from financially supporting family members (e.g. parents and children) in countries of origin (Abraham 2000; Erez et al. 2009; Vaughan et al. 2016; Vasil 2023). Many participants also reflected on the involvement of other family members as perpetrators, as has been documented in the broader literature (see, Segrave 2017; Segrave and Pfitzner 2020; Vaughan et al. 2016). As one participant expressed: 'It's not only men that try to perpetuate the control, but it's also the women, particularly the elder women … they're trying to protect their family' (Women's focus group participant). The issue of how perpetrators utilise structural inequality is re-examined in section 4.

It is also important to note that across many of the FGD, conversations about coercive control consistently moved to a focus on controlling young people. However, this is largely outside the scope of coercive control and how it is spoken about in the broader literature. The examples highlighted in this section reveal that there was varied and diverse understanding of what coercive control is, with broad-ranging discussion about its parameters.

The value of coercive control as a focus

As previously noted, very few participants specifically used the language of coercive control in discussions in this study. However, the value of using this terminology and concept as a focal point was a consistent area of discussion. Participants reflected on whether this may undermine broader efforts to address DFV. Overall, the discussions revealed that, when asked specifically about coercive control, this did not generally align with the ways participants spoke about these issues. Rather, participants consistently reached back to broader ideas around DFV. This highlighted a limitation in emphasising coercive control in a siloed way – that is, it raised the question of whether moving towards a focus on types of violence is useful rather than addressing the underlying issues, noting that this sits in tension with the original purpose of the concept of coercive control and the patterns it has sought to draw attention to (see, e.g. Stark 2012; Walby and Towers 2018; Walklate and Fitz-Gibbon 2019). The authors wish to emphasise here that this research cannot answer this. Rather, this report demonstrates the pattern of how participants wanted to speak to underlying issues rather than types of abuse.

The authors also note that many participants questioned the utility of introducing 'new' language, terminology and concepts to multilingual communities, noting that considerable efforts at the local level were already taking place in relation to DFV more broadly. As part of these discussions, many participants highlighted the potential challenges of translating the term 'coercive control' into other languages. The primary concern was that the language of coercive control may be confusing and not necessarily translatable. A common suggestion among participants was to use examples to highlight specific practices and

patterns of behaviour and generate shared understanding (rather than relying on the specific language of 'coercive control'). This is underscored by the following response:

> The word 'coercive control' in English isn't transferable or [can't] be … translated to a word in Hazaragi. It can be explained. So, there could be an explanation of what it means and what it means in English. There might be cultural terms for it, I haven't actually thought about what there might be but there is a conversation beginning in younger women in particular in the community … who are speaking out about this whole issue of being controlled as to what they wear and … where they go, what time they come back. (Mixed focus group participant)

Rather than reflecting on this as a question of identifying culturally appropriate terminology, this is a reason to reflect carefully on priorities as they relate to the broader question of coercive control. Of how it is understood, and where it fits within broader discussion and debate around DFV in Australia and legislative reform across different jurisdictions.

That said, a handful of participants argued that the language of coercive control has value. They were generally of the view that it helps to broaden out (at a general level) a discussion around violence as being many different things. This included the recognition that domestic and family violence is more than physical violence, which they felt remained a consistent view held by many in their networks. At best, this research identifies the need for care, nuance, and community and population-led efforts around coercive control to be key to decision making. This leads to the next section of the report, which examines the priorities that arose with respect to prevention in this context.

4. Primary and other forms of prevention

The research has established that the exploration of primary and other forms of prevention for migrant and refugee communities remains in its infancy, as a well-researched phenomenon. This is even more pronounced in relation to the specificity of coercive control (Koleth et al. 2020:78. For further discussion see, AMES 2017; AMRC n.d.; Murdolo and Quiazon 2015, 2016; Vaughan et al. 2015, 2016). The main focus of this study was to explore and understand coercive control and identify strategies to inform primary prevention. Critically, what participants expressed – first and foremost – echoed other studies that explored prevention in CALD communities (Koleth et al. 2020:9; AMES 2017; AMRC n.d.). Numerous discussions in this study focused on:

- who speaks
- who the target audience is
- how to integrate more informed and complex engagement with diversity across ethnic, faith, and other identities and communities.

These points are explored in this section, before turning to the specificity of how participants spoke about women, men, education and system reform.

Community and communication

Participants consistently focused their comments and conversations on how information around DFV, including but not limited to coercive control, could or should be communicated and targeted at populations or communities – a challenge identified in existing research on DFV prevention in migrant communities (see, Ogunsiji and Clisdell 2017; Vaughan et al. 2015; Yoshihama et al. 2012). While these discussions were wide ranging, they broadly covered the importance of understanding diversity and privileging voices from communities, considering the language of DFV, and considering who speaks on issues of violence and abuse. For example, some participants raised the need for cultural training based on their concerns that bias remains an ongoing problem in the family violence sector which they indicated 'others' newly arrived migrants and refugees:

> I think making services very respectful and having this cultural training in every field … I think especially working with families and working in areas of family violence [we need to] make cultural respect … for the clients … mandated that at no point an assumption's made just based on … someone's name … or their accent [where] the practitioner puts themself on a pedestal and says, 'Oh, the client doesn't know any better', or, 'They know what's best for them**.'** (Women's focus group participant)

> There's a bit of that thing of like … 'we shouldn't tell these people because they are not *for* us' and when they say 'these people' they mean the Australian people, white people, because they are not one of us … in the end they can just dump you, in the end you may just end up with no visa … with any form of support you will just be stuck and on your own. Imagine you are coming from a very traumatised and war-torn country … and then you come in this system and you just don't know who to trust. … we need more support. We need to push more support for new arrived migrants. (Men's focus group participant)

This echoes other research which points to the importance of culturally tailored approaches (see, Fineran and Kohli 2020; Vaughan et al. 2015, 2016). Participants in this study consistently emphasised the need for careful consideration of who delivers any communication strategy, and how they deliver it. Participants pointed to the need for not focusing exclusively on recognised 'leaders'. For example: 'leadership is important, but leadership expects it's just going to trickle down. No. You need to tackle it at the top and right at the bottom' (Women's focus group participant). It was also emphasised consistently among participants that all communication and intervention strategies, including any aspect of prevention, should prioritise community members. This is demonstrated by the following several responses:

> It is incredibly important to have representation from community members, particularly women and men, particularly young women and young men from refugee and asylum-seeking communities on boards and in organisations, where policies and practices of such nature that aims to get rid of, or not get rid of, to sort of target domestic violence. It is really, really important to have people from those communities with experiences [involved]. … I think when people see a member of their ethnic community or religious community in an organization or a setting, [they] almost always resonate or connect. (Women's focus group participant)

> But specific to the Chinese community because there are language barrier, there are cultural barriers … there should be more campaign dedicated to … culturally appropriate and also culturally inclusive

to make people feel safe. (Women's focus group participant)

> I think the main approach from my perspective would be to target each community. I mean, you shouldn't target a broad community because the way each community works is quite different. Let's say the Afghan and the Iranian, though they are very similar, they do have some differences on how they perceive other people and how they talk to other people. What family violence would that be for some people. What the tolerance is for those people. Let's say, I think if you could have targeted information or campaigns for each community, that would be great. (Men's focus group participant)

> It is … really important to have people from those communities with experiences to actually come along and talk to you and people about why certain things need to be done in a certain way. Because they will come with an informed view, with personal experiences and with an understanding, a deep understanding of their communities. … When you see a representation of yourself in settings, you almost always want to hear what these people have to say. Representation really matters. (Women's focus group participant)

> I think it's important that we change mindsets in a community. And I guess that's where it's important that community members themselves kind of take a stand and try to eliminate this as they go about. (Men's focus group participant)

These participant reflections echo some of the findings of Vaughan et al. (2016) regarding the

importance of diversity in who leads any work around DFV, including primary prevention and early intervention.

The discussion around *who* speaks was interwoven with *how* DFV, as a concept, is spoken about with different communities. There was no single or consistent view: some people pointed to sensitivities in talking about DFV and the need for trust (see also, Vaughan et al. 2020), reiterating the importance of people with deep knowledge and engagement to be leading communication. For example:

> It's a very sensitive topic … in Afghan community, you have to be very mindful, very culturally appropriate to bring it up. (Women's focus group participant)

> You can't just open this discussion, unless you trust someone. (Women's focus group participant)

A consistent focus of the research was how to best reach people to have conversations around relationships, violence and abuse. Often, the view was to lead with positively focused conversations. As the following participants stated:

> It's more about … engaging very softly … with just normal fun conversation … starting with ice breakers. What is typical? How does a man look like once they're coming home? … So, things like that, that as a fun subject and not bringing up quickly saying like, 'You know what, this is wrong'. (Women's focus group participant)

> But some communities, they are reluctant to talk about family violence and for example, some community they say, 'Oh we don't want any information

session on that', and you won't get anybody to come to your session if you're going to hold one. (Women's focus group participant)

> If they would talk about family violence, the wife goes to home and talk with family. The husband not let them come back again …The family is happy [if the focus is] … health. Afghan men doesn't like us … doesn't want to women empowering. (Women's focus group participant)

Other participants spoke less about sensitivity. Rather, they emphasised the need for discussions to simply be approached in an appropriate way. For example:

> When we talk about domestic violence and we're trying to educate more refugees or immigrants, I think to suit their culture is really important … Because if we talk about just one standard to everything, then it won't work … it won't prevent in any way. I can say, for Chinese, if you're talking about something way different from our culture, we'll just ignore it … Okay … I will still do the same thing. (Women's focus group participant)

Vaughan et al. (2016) suggest that prevention work is undermined when the assumption is made that one strategy is needed for all migrant and refugee communities. And where such a strategy stereotypes 'all or entire immigrant and refugee communities with respect to gendered violence' (Vaughan et al. 2016:83. See also, Murdolo and Quiazon 2015). It is important to note the need to be very attuned to specific settings and contexts, as this impacts how receptive the audience and their families,

communities or friends may be to their engagement in conversations around DFV.

Similarly, issues around specificity of language and translating concepts were also raised. Some participants emphasised that setting is important, but so too is the language when specific terms and concepts are used. Several participants identified that translating English-based messaging fails on many levels. As one stated:

> Seriously, [to take] those four gender drivers [posters], translate them in print or social media and do the online version in a [foreign language] … It makes zero sense. (Women's focus group participant)

For some participants, the goal was to focus on how to introduce coercive control, a very specific term and concept, into other languages and cultural settings. For example, one participant explained how she would do this by introducing the concept of patterns rather than the language of coercion or control:

> So, it's language around patterns of behaviour. What does that look like? What would that make you feel like? How would you feel if you were actually doing that to someone else? There may be insight there. There may not be. You can only spark the conversation. Well, what else are you meant to do? (Women's focus group participant)

Another participant suggested that education should, simply, be conducted in a person's native language:

> It would be helpful if they're educated in their mother language … Because even before you talk about coercive control, if it's in Chinese, then I will immediately

understand it. … I will remember it longer than in English. (Women's focus group participant)

These findings illuminate how differently participants thought to best engage with language, cultural and faith-based differences when understanding relationships, violence and abuse.

In addition to how DFV is framed, participants consistently emphasised the importance of who is speaking. The concept of leadership was explored. Views on who should speak were not consistent: for some participants, faith leaders were important (see also, AMES 2017), while others raised concerns about leaders, including faith leaders who encouraged women to remain in relationships and to: '[resolve] it between yourselves' (Women's focus group participant) (see also, Block et al. 2022; Yoshihama and Nakashima 2006). In a study by Block et al. (2022), one participant recognised the critical importance of engaging with faith-based organisations and leaders to 'create safe spaces for women of faith', but they were concerned that 'channelling funding to combat violence against women through faith-based organizations could also potentially reduce leadership opportunities and safe spaces for some minority women' (Block et al. 2022:390).

Another key suggestion was that understanding faith, cultural or ethnic contexts can also translate into understanding that sometimes discussions around sensitive issues, such as DFV, may more effectively come from people from similar but different backgrounds. As one participant explained:

> Because it is a small community, everybody knows each other. It's like they are not very comfortable to talk about that [DFV], even with their translator … I

am working right now with the Afghan community … And … I think they are happy, because I am not a part of the community. (Women's focus group participant)

This is key to understanding the need for a diversity of voices and leaders. And the need to seek input from a wide range of people and, therefore, for a range of communication strategies that target the diversity of needs and experiences from across the migrant and refugee population. This builds on Sasseville et al.'s (2022) identification for the need to recognise the heterogeneity of migrant and refugee experiences. They argue that 'a homogenous and universal reading of the violence experienced by these groups of women could hide the existence of differences within each one of them' (Sasseville et al. 2022:95).

Empowering women: intervention and prevention

Participants in this study spoke in very specific ways about the role of and efforts to target women in the context of primary prevention and early intervention. Studies have identified that primary prevention and early intervention approaches should promote women's inclusion (Sasseville et al. 2022; McCulloch et al. 2016; AMES 2017; Vaughan et al. 2015). Vaughan et al. (2015) similarly found that women's empowerment in primary prevention strategies is central, and that these strategies 'must be done on women's own terms in ways that are creative and culturally sensitive rather than prescriptive of western values' (Vaughan et al. 2015:44). The importance of empowerment was echoed by participants, often in the context of intervention. But as the following excerpts demonstrate, empowering women was also viewed as a prevention strategy for DFV broadly and coercive control specifically:

I'm thinking maybe with the term of prevention as well, maybe we do more about empowering women … Particularly … let's say Asian woman, we not brought up to be a strong, talk back or stand up for what we do believe … I think that … empowering them [women] to make sure that stand up for what you believe, stand up for yourself that also help to prevent that because you know you can have confidence and know what you well do … and leave that relationship. You don't need to put up with that crap. … So yeah, I think maybe work around that as well. (Women's focus group participant)

I think the best way to prevent coercive control, and domestic violence is to empower these women. Because, the reason that it happens is that they don't feel empowered enough to step up and claim their rights. And one of the biggest reasons for that is poor literacy … with navigating the Australian system, because obviously we grew up in a different kind of government system. And having poor navigation literacy with the system means that they don't know of their rights, they don't know the services that are available to them, and they don't know that what they're experiencing is illegal. (Mixed focus group participant)

Empowering women was also explored in different ways. For example, in a group of 4 participants, the discussion focused on working with Afghan women and the recognition of small steps, where encouraging women to have their own phone – so they could communicate without their husband's phone – was a great beginning point. Other participants focused on pre-arrival strategies to empower women with information around Australian laws, social

services and support. This point is re-explored later in this report – however, it is worth noting that such a strategy is both important and limited to specific forms of longer-term migration, and more difficult to extend, for example, to those who enter Australia on visitor visas.

Another aspect of the discussion focusing on the importance of empowering women was a concern shared by many participants that supporting and empowering women could not be a siloed activity. The broader community setting was important, not least because empowering women and women's assertion of independence, or resisting dominant narratives around gendered norms, for example, can have various negative consequences. Our Watch (2021) has identified individual 'backlash' as presenting a key challenge to the prevention of DFV. Individual backlash, 'can be displayed by anyone who seeks to maintain the status quo of gender relations, holds sexist attitudes, or helps create or maintain settings or contexts characterised by sexism, gender segregation and male dominance' (Our Watch 2021:52). Community/collective backlash may also shape migrant and refugee women's experiences where, as previously mentioned, women's empowerment may risk ostracism from the community. Some participants emphasised that the consequence of encouraging women to stand up for themselves or to seek to lead community conversations around DFV could, in fact, lead to women being ostracised, shamed or punished by the broader community. This is also a commonly cited barrier to seeking help for DFV (see also, Band-Winderstein and Freund 2018; Erez and Globokar 2009; Fineran and Kohli 2020; Segrave 2017). As one noted:

> We know what is wrong and what is right, but it's just the very sensitive way that needs to be getting into it, where if they come one session, they wouldn't be told

off by their man saying like, 'Ah, is this what you discussed? They are trying to separate us'. Actually, the reason why I came back with my family from Germany, and we went back to Iran after I was raised there for eight years, that was the reason, because my father was seeing everybody getting separated, men and women get separated. (Women's focus group participant)

This participant reflected that there is knowledge of the problem of violence and abuse in her community. And that there is also fear and resistance to discussions around identifying violence and abuse and concerns regarding family separation, which can result in efforts to reduce women's access to information and support. This is an aspect of backlash that may be less evident but is important to understand. Both women and men expressed the concern that talking about DFV and coercive control can raise fears about separation and divorce as the only outcome. A number of participants said that their fear of family separations was met by men and women alike shutting down conversations about abuse and women's independence. It was most often recognised that men who were being challenged about their own behaviour would continue to control women and prevent them from engaging in education and other activities. As expressed by one participant:

> Nobody wants to change. And especially in man who you are telling them, you are wrong. Whatever you do, whatever you think is wrong. And they are complaining about their wives … being changed once they see here [in Australia]. … That's why they try to even stop them from the beginning when they start to try to start actually learning English. (Women's focus group participant)

Another participant pointed to the impact on women who seek to lead these conversations and the consequences this can have for them:

> When you are challenged as the people trying to bring these messages and trying to work with communities, when there's backlash … we actually deal with it. That we don't just go, 'Yeah, I understand, I really respect that'. No, I actually don't respect that you are actually minimising family violence and its occurrence. We've got actually stop being afraid of calling shit out. I'm not disrespecting my community, the Greek community or Greek Australian community by saying, 'Well, that's BS'. (Women's focus group participant)

These findings highlight the importance of understanding how intervention and support is framed, what the focus is and who is a part of these discussions (Sasseville et al. 2022; Vaughan et al. 2015). Participants consistently spoke about how to work with women, how women should be involved, and the challenges in engaging women in every aspect of work to address DFV, including coercive control. Our Watch (2021:69) emphasises that prevention strategies must plan and prepare for backlash at all levels: individual, community, collective, organisational, institutional, structural and systemic. These findings point to the importance of community-led strategies to understand the subtle efforts to undermine and resist engagement.

It is also important to note that **discussions about women's empowerment, and the role of empowerment in the context of primary prevention, were inherently gendered.** For many of the women and men involved in the study, the onus was put on women to equip themselves with information. In addition, the research team found that women leaders within specific communities took on the responsibility of this work, and worked creatively (often with limited funding and in a voluntary capacity) to enact change by focusing on the behaviours, attitudes and practices that they could target in the context of their own communities. While much of the focus tended to be on women – particularly at the outset of these conversations – many from across the participant group also spoke critically about the role of men.

Targeting men: intervention and prevention

There is recognition in the broader literature on the need for men and boys to be a core focus for primary prevention efforts among those from migrant and refugee backgrounds (see, e.g. Koleth et al. 2020; Murdolo and Quiazon 2016). This was consistently articulated across the participant group. As were the difficulties in achieving this. Some of the discussion on prevention and intervention revolved around men's resistance to women's empowerment, as detailed above (noting it is not only men who exert backlash at the individual or community level). The importance of targeting men specifically to disrupt existing patterns of gendered violence, and to be changemakers in the community, was also frequently raised. As the following participants noted:

> But if we are only educated victims, then it doesn't matter, to prevent. Women are already the vulnerable groups. … I would suggest target more men, trying to educate them a little bit more. (Women's focus group participant)

> I think men should be involved into all these activities, because they're part of the problem. So they need to be a part of

solution as well. (Mixed focus group participant)

Some participants echoed the importance of men's leadership and their role in prevention and intervention efforts:

> You can't see any men … I think it is important for us to educate men in an appropriate way about family violence and that kind of stuff. (Women's focus group participant)

> I think that's a very critical intervention in terms of prevention strategy [is to have] Filipino men. So to break that barrier. (Men's focus group participant)

One challenge that was widely acknowledged is the significant absence of men in leading conversations or caring to lead in the area of DFV. There was a range of reasons put forward for this. Some participants reflected on the gendered social norms and demasculinising impact of being supportive towards women's empowerment. For example:

> [But] not many [men] are interested in this. You will always find those, you will struggle to find men participants except one or two who would be very more into this women empowerment and that too they can [experience] a backlash. They're like men controlled by their wives and all that stuff. (Women's focus group participant)

Participants consistently noted that engaging men requires directly challenging cultural patterns and hierarchies – an issue not exclusive among those from migrant and refugee backgrounds (see, Casey et al. 2018; Flood 2011, 2019; Jewkes et al. 2015). Wells and Fotheringham (2021) have argued that attempts to prevent men's violence against women on individual levels are insufficient, as meaningful prevention requires targeting 'social and cultural environments, within which people are embedded – such as families, schools, communities and institutions', as these 'influence and reinforce individual behaviours, attitudes and beliefs' (Wells and Fotheringham 2021:3). Part of this work requires interrogating men's positioning within these systems. As one participant commented:

> I think that when we're talking about coercive control and how to shift this to not being coercive, so I'm thinking that we're talking about taking men's entitlement. Men wouldn't like it. What would be the benefit for them, right? Talking about coercive control, that have been their entitlement all their life, and now we're saying to them, 'No, you can't do this anymore'. So there's got to be an education and training around what is coercive control and what is the benefit for men of not acting on being coercive or controlling to their partners or to their household, what it is for them. (Women's focus group participant)

Some participants said that they felt men had more to lose than women because moving to Australia was associated with their loss of power and commonly women gaining power and a newfound autonomy (see also, Bui and Morash 2007). For example:

> In a society where they're beginning to lose the power of being the head of their families, or they begin to use some of these subtle measures to actually trample upon the other family members, especially women [and] children because they feel that their headship is being

challenged. (Women's focus group participant)

Some participants also reflected on very specific reactions regarding the clash of gendered norms and social hierarchies between Australia and their previous countries of origin, which they had observed in different settings. For example:

> One thing that I really saw … is a pattern where [someone from] a refugee or migrant background, so I'm including both, comes to Australia, the problem with how people would have their values, let's say from Afghanistan and they come here and there are different values in Australia. So there is Australian values versus the other person's values that they have adopted when they were young or they're now adult. The problem is when they come here in Australia, one thing that I really hear a lot is that the men especially, they said that they have lost their power … The problem is … that perception that men have lost their power and that they always talk about that. And when there is a discussion about family violence, there's always that … defence from the other person's perspective that, 'nah, I haven't done nothing wrong and I was not guilty and what Australia has done is, I've lost my power as a man'. (Men's focus group participant)

Research has identified that understanding men's violence – and, more broadly, men's reactions to settlement and shifting family and gender dynamics – requires a nuanced understanding (Fisher et al. 2020). It can occur within the context of refugee trauma, settlement challenges, and family and community restructures. This position is reaffirmed by the findings from this research.

A final key finding is the view of participants that men are both critical to making change and also wield power. And that care is essential in the engagement of men. Many participants expressed the desire for men to lead. For example:

> And hopefully you can also have some male ambassadors to advocate for that kind of primary prevention program. (Mixed focus group participant)

> I think connecting them within their own roots, within their own cultural community, provided that community leaders are not themselves perpetrators of family violence. That's another issue that comes up because I worked with someone who was a migrant and ambassador but was also a perpetrator of family violence. (Women's focus group participant)

However, there was also a view among participants that centred on managing how men are positioned and celebrated in the context of primary prevention and early intervention work on gendered violence. The concern for some participants was that efforts on gender-based violence had been built on the collective effort of women and that men's involvement could undermine the recognition of women's efforts:

> And again, when men start hopefully coming on board it's probably quite important not to put them in a pedestal. Like, 'Oh, wow, there's a man talking and he's a great man'. Whereas we women have been talking about it for hundreds of years and no one listen to us. (Women's focus group participant)

Flood (2015) has noted that framing the movement of engaging men and boys in prevention work is 'politically delicate' due to 'concerns that the development of efforts to engage men in preventing violence against women may reduce funding for women's programmes and services, dilute the feminist orientation of prevention agencies, marginalise women's voices or involve only rhetorical rather than substantive support from men' (Flood 2015:161). Such sentiments were reflected in participant perceptions on the role of men in prevention. They reinforce both the need for prioritising men to lead and to do so in a way that is strategic and inclusive for men and women.

Education strategies for prevention

This research was not designed to explore an understanding of primary prevention, per se. However, an important initial observation demonstrates that conversations around prevention revealed different levels of understanding of prevention. Many participants reflected on prevention conversations as being, at best, in their infancy. As the following stated:

> I was just actually saying to someone yesterday that in a lot of these migrant communities, the concept of prevention doesn't really exist in their mind … it's a very new concept for a lot of people in, let's say, I won't talk about all the migrant communities, but because we do a lot of work with the South Asian communities, Indian community. (Women's focus group participant)

> The feedback is that a lot of people have never really participated in these kinds of education initiatives before, because as I said, they're not familiar with that concept of what prevention work entails and how [we] really need to, I guess,

challenge cultural norms, social norms, gender norms, and be aware of certain concepts. (Women's focus group participant)

> And I also think very importantly is for the multicultural communities to teach them what is primary prevention because some multicultural communities, they don't understand what primary prevention is because back in their country of origin, they don't have that kind of system. (Mixed focus group participant)

Reflecting, in part, the varying degrees of knowledge and awareness of what primary prevention may entail, the majority of participants focused, almost exclusively, on education as the main strategy for primary prevention (i.e. to challenge the condoning of violence against women and negative peer relations, especially for young people). This sentiment also extended to aspects of early intervention (i.e. in particular, the focus was on women so they know that help is available but also are encouraged to seek help) (for discussion on the value of culturally safe prevention education see, Ben-Porat 2010; Poljski 2011; Vaughan et al. 2015). This was reflected by the following participants:

> Ongoing education in the community [is what we need]. So there is this, the second and third generation now that you have to really educate and also to bridge the gap between the generations of migrants. (Women's focus group participant)

> Education is a great way to populate this concept and to prevent this from happening. Because I saw this poster in our hospital, that it says, 'Family violence is a public health issue', and these slogans

like, 'Stop doing family violence to women'. I think it kind of helps. (Women's focus group participant)

While the connection to family violence as a public health issue was not widely raised, both of the above participant responses point to the role of education in increasing recognition and understanding of DFV, and as a means towards broad changes in a range of settings around the non-acceptance of violence and a recognition of its impact.

As detailed in section 3, participants in this study generally recognised that the concept of coercive control was not well-understood in their communities – across social, familial, work, faith and other settings. In the context of conversations around primary prevention, healthy relationships were the core focus at every level. This relates to youth, parents, people experiencing violence and perpetrators of violence. And, as detailed below, participants suggested that conversations should be targeted or adapted to different audiences and contexts. Likewise, the focus was on specific populations across the diverse collective label 'migrant and refugee' – a term that encompasses many different people, from international students to newly arrived migrants, refugees on permanent visas, temporary visa holders on partner visas and second generation migrants. The resulting focus of discussions around education were, often, targeted towards specific populations. Conversation around when, where and how prevention and education should be delivered varied. As Poliski (2011) noted, this is critical to mapping how to think about future strategies with different groups from the broader 'migrant and refugee' cohort.

Education and information pre/post-migration

Much of the research on the pre-arrival context – such as 'family separation or loss of family

members, exposure to torture and trauma' (Poljski 2011:20) – is focused on informing prevention efforts in the country of arrival rather than how pre-arrival may potentially be utilised as a primary prevention or early intervention space. In other settings, there is recognition that pre-departure training and information can be a limited tool in relation to abuse and exploitation (see, e.g. McKenzie and Yang 2015; Pocock et al. 2020). The ideas and suggestions of participants reflect how they identified points of opportunity – though these are not well-evidenced as effective prevention practices or programs. Some participants saw pre-migration as an opportunity for both education and early-intervention, as described in the following excepts:

> Even if you say that to them … it's connected to the Department of Immigration of the Philippines and connected to the Department of Immigration [in Australia and you] get … someone … explaining around what is happening in Australia ... what are the forms of family and domestic violence? ... Because even if they would not probably really make sense of that [at the time before they depart], at that point when something happens to them [in Australia], they will definitely remember that point that they heard that. And that is not happening at the moment [pre-arrival]. (Women's focus group participant)

> When she's coming to Australia, we are trying to let them know [that] … according to the universal human rights the domestic violence is unethical and also nobody has the right to do that. However, what is the law for Australia and what is acceptable behaviour and what is unacceptable behaviour? We try

to give them information. …We try to use the interpreter to just give them a proper message what is really happen. (Women's focus group participant)

A more common discussion among participants was around the early stages of arrival as a key opportunity to engage in education. Many highlighted this time as a key opportunity to provide education and information to newly arrived migrants. For example:

> At the beginning, when they're coming to Australia … they [should] have to compulsorily [get information about domestic violence just like they] go … to [get] a bank card, go to Medicare. This should … also [be] part of the settlement [at] the beginning. (Women's focus group participant)

> I think, it would be even great to have that, for example, for the settlement of the Afghan community, we have already those English classes, which are obligations for them to be able to start a job. Maybe then that conversations could [include] family roles [and] … how it's usual here in Australia … for example. So, even small conversations that can bring up the information, not as forceful, but informative. (Women's focus group participant)

Some participants reflected on the importance of targeting these programs at men, given that, historically, efforts in education and early intervention have focused almost exclusively on women. As one participant stated:

> When I run the program in 20 years before, all the time we running program for womens only, we empower women but … men doesn't know any things.

Women know the right but men doesn't give them their right and conflict is started instead of decrease, become increase the family violence … For this time also I said we should be empowered both at the same times. At the moment we so many program for women but not much for men. It's important to educate the same time and also stop the Centrelink money if they're not coming for the session. When they're coming the stuff, the modern refugee coming to Australia, it should be compulsory. (Women's focus group participant)

These suggestions were not only limited to adults. Efforts around early arrival can also be focused at young people. According to one participant:

> If we start educating the boys, the young girls at school having this compulsory subject, then moving on from school, coming to the communities, new migrants, whether it's the young girls or young boys, middle age, whoever comes, compulsory. Not you have to turn up, it has to be [culturally] informed. It has to be in their language. Say if they're a religious group, a synagogue, a person who's educated, a person who knows the law of Australia, bring and tell them what's violence, what you can do and what you cannot do. So that's the kind of things I think if education is key, that we have to have it. (Women's focus group participant)

The above comment identifies the importance of young people who settle in Australia. It also demonstrates that messages on arrival can come from peers, leaders, elders, and others who bring different perspectives, knowledge and expertise. Importantly, a recent stocktake of

Respectful Relationships Education (RRE) material has placed an emphasis on the need for RRE to be culturally safe and culturally responsive – specifically highlighting the educational needs across diverse groups (Pfitzner et al. 2022)[6].

The importance of young people as a key focus

Research regarding effective prevention practices with migrant and refugee youth is in its infancy. Koleth et al. (2020:27) point to the importance of making space for young people from diverse cultural backgrounds to design and be involved in prevention and education strategies. While this report's research did not include young people (i.e. anyone under 18), young people were a consistent focus as a group that should be directly targeted. Participants emphasised this in a range of ways, recognising the intergenerational reality of DFV and the importance of disrupting gendered inequality and patterns of violence and abuse via education. For example:

> I get very emotional against family violence because you just hear so much about it. So to me, education, especially the young ones, because we don't want them to follow their father's footstep. We want to stop them somewhere and that's the only way to do it, to educate them. (Women's focus group participant)

> In education from elementary to high school, educate the students about domestic violence so when they grow up, slowly, this is a long-term plan, the educational plan, to educate some ... For example, some part of curriculum in school from elementary to high school, so

when they grow up, they're exposed now about what is domestic violence in the family. (Men's focus group participant)

> Because from generation to generation, as new generations are born, it's important that we kind of inject the new ideologies into them. If they've been living a certain way, that does not mean that it's the right way to live. For example, if it's promoting freedom for example, or freedom of education for example. (Men's focus group participant)

Focusing on young people was considered, by some participants, to have a twofold effect: it engages parents in conversations and it prepares the next generation of parents and adults. This is similarly observed by Poljski (2011), who states that 'young people may also be in a position to challenge violence-supporting beliefs of parents, elders and authorities' (Poljski 2011:35). As the following participants stated:

> If it's [the education program] for the children, parents should be involved with it. So it's not only a child going and attending that classes, it's also for the parents to go and attend that. (Women's focus group participant)

> A lot of migrants, they will have kids in schools … Those kids could be educated with some information regarding what is the family violence, what is the coercive control. Because, a lot of the migrants, if their language is a barrier, but their kids, actually ... They speak English. So they can be absorbing information very well and can pass on the information to the family

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[6] RRE targets students to assist in developing understanding and shifting attitudes regarding gender, equality and relationships (see State of Victoria [2022].

Respectful Relationships. https://www.vic.gov.au/respectful-relationships).

as well. (Women's focus group participant)

Getting [to] the young people in these communities to teach … them respect … teaching them ideas that people need to respect each other regardless of gender … It's important that we don't take religion as a defensive tool, that we don't interpret religions the wrong way. Because a lot of the Afghans and like I said before, come from a Muslim background. And some of them use religion as a way to justify the oppression, to justify oppression in a way if it comes to clothing or if it comes to education, which is totally wrong … So it's important to teach young people as well as older people, the fact that their interpretation of the religion is not necessarily the correct one. (Men's focus group participant)

Clearly, views such as the last one above cannot be resolved in this report with regards to, for example, religious and faith-based interpretations of religious doctrine. However, this points to the broad support for educating young people. For many participants, it was, in particular, young men who require targeting. For example:

I have been doing some work in education program group work, and I've been tasked with doing two different groups that are targeting young women but there aren't an equivalent for targeting young men. … and obviously that's just insufficient. (Women's focus group participant)

So basically, not until we attain the equal rights of men and women, it's still going to happen. So, men should be educated … and equality should be educated as early

as when men you know [are] in school, and how … gender equality works. So, that's what I think that could help as early as we go to school, we should be educated that gender should be equal, or there should be gender equality. (Women's focus group participant)

Many participants who spoke about the need to target young people also articulated the importance of specificity around who speaks to young people, and the background and understanding they bring regarding family, relationships and conventional family relationships within a young person's context. This, it was expressed, would provide a more suitable alternative to generic programs aimed at all young people. As one participant said:

What would happen if you went and spoke to the 14 and 15 year olds? Prevention. [but] people would argue, 'Yeah, but … we do respectful relationships at school'. … [That] program … is great but doesn't have a lens at all of migrant experience. Zero … If we're serious about the human aspect of communities, why not going to VSL [Victorian School of Languages]? Why not approach the Greek schools, the private ones, the public, the Italian schools, the whatever schools? … They are everywhere, and say, 'How would you feel about us doing a joint collaboration?' (Women's focus group participant)

The above response echoes the early finding regarding the **importance of community-led prevention and education strategies, which are developed by people with deep knowledge of the population they are working with.**

System reform in primary prevention

The systems that migrant and refugee communities interact with were raised consistently among the participant group (see, section 2), including in the context of prevention. The criminal justice system was identified as key to limiting early intervention because of issues pertaining to misidentification and/or police not responding when women sought help (Nancarrow et al. 2020; Reeves 2020; Segrave 2017). Migration and settlement systems were most commonly identified as requiring system reform (see further, Segrave 2017, 2021). This sentiment is exemplified by the following statement:

> If we're going to do prevention work for … the newly arrived migrant communities, I think we also have to take into account the side-by-side settlement experience with that and everything, all the needs that come with settlement, that it's not just family violence, it's settlement, and we need to fix housing. And there's a whole bunch of things that go into family violence prevention work that sits outside of family violence, you know? And I think combining policy areas and things I think could be really important here. (Mixed focus group participant)

The notion of reforming the migration system was specifically raised as a priority to reduce the use of that system to leverage control and enact abuse:

> One of the factors if we are going for the prevention, one of the factors, especially here in Australia, if the Filipino's partner with somebody who has the visa control, that's very vulnerable situation for whoever, whoever is the tourist or spouse or especially the women. That's one factor if you want to correct that situation. (Men's focus group participant)

The recognition of system reform as a preventative measure highlights the importance of understanding how DFV and coercive control are enabled and sustained not just via interpersonal but also structural conditions that impact people's lives (see also, Our Watch 2021). This has been well-documented in recent national and international research (Abraham and Tastsoglou 2016; Segrave 2021; Vasil 2023), which draws attention to the need to address the ways in which state systems and policies – including migration and welfare policies – have gendered impacts and limit women's options in situations where a partner is violent and where women's rights, entitlements and pathways to safety are restricted.

Conclusion

This report reaffirms the importance of understanding the diversity of the population of people who identify as 'migrants and refugees' – the significance of this diversity for considering the state of knowledge and understanding of coercive control and domestic and family violence, and the ways in which people identify how to best address this issue across the spectrum of primary prevention, early intervention and response. The knowledge around primary prevention and coercive control is in its infancy. This is, in part, a reflection of the varied understandings around, more broadly, what coercive control is. In Australia, there is still much work being done to reach a national agreement on this phenomenon and how to address it within the context of DFV and men's violence against women more broadly. This research offers an important glimpse into the ways in which people living in Victoria consider these issues, and their views on how to best undertake work to prevent and disrupt gendered violence. There remains important work to be done, and this research offers a foundation for breadth, depth and diversity as core tenants of approaching collaboration and learning with those from the broader migrant and refugee community.

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