

Creating Communities of Equality and Respect

Women’s safety and empowerment action plan 2021-2024

# Acknowledgement of Traditional Custodians

The City of Melbourne respectfully acknowledges the Traditional Custodians of the land, the Bunurong Boon Wurrung and Wurundjeri Woi Wurrung peoples of the Eastern Kulin Nation and pays respect to their Elders past, present and emerging. We are committed to our reconciliation journey, because at its heart, reconciliation is about strengthening relationships between Aboriginal and non-Aboriginal peoples, for the benefit of all Victorians.

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# Foreword from the Lord Mayor of Melbourne and Councillor

Image of Lord Mayor Sally Capp and image of Cr Dr Olivia Ball

Cities are places for people, and the City of Melbourne strives to empower all people to live full, safe and prosperous lives.

The Creating Communities of Equality and Respect: Women’s Safety and Empowerment Action Plan establishes the foundation for this mandate by making a stand for safety and inclusion in everything we do. It is our commitment to ensure gender equality and respect are built into our services and city planning and promoted throughout the municipality.

It is not enough to sit back and wait for the epidemic of violence against women and children to resolve itself.

Our Social Indicators Survey shows that women continuously report lower levels of safety in the city and on public transport compared to men. We also know family violence has worsened during the COVID-19 pandemic.

We all benefit from gender equality and we must all take meaningful action to target and disrupt the underlying drivers of violence and create a healthier and safer future for everyone.

There is already much work to be proud of. This action plan outlines how we will continue to advance women’s leadership and participation in our city’s vibrant economic, social and civic life, and how we will support men and boys to shift unhealthy ideas of masculinity and eradicate violence.

The issue of violence against women is deeply entrenched and we cannot turn the tide alone. That is why this action plan is aligned with national, state and regional plans and frameworks. It is also mapped into our Council Plan 2021–25 as a major Safety and Wellbeing initiative.

Cities of possibility are built on respect and equality, where all people feel safe, welcome and included whether it be at home, at work or in the community. Thank you to everyone who has contributed their voice and their expertise to this plan. Together we are building a more promising and inclusive tomorrow.

**Lord Mayor**Sally Capp

Councillor Dr Olivia Ball
**Health, wellbeing and belonging portfolio lead**

# Acknowledgement of victim survivors of violence

The City of Melbourne acknowledges the strength and resilience of victim survivors of violence against women and family violence – adults, children and young people.

We pay our heartfelt respects to those who have been harmed or who did not survive.

“We also acknowledge the loss and impact on friends, families and communities who have lost loved ones through violence.”

Image of young child wearing a hat and backpack looking down Degraves Street

# Our Commitment

We know that family violence and violence against women can be prevented and eliminated.

We must address and act on the gendered drivers of violence against women - the unequal distribution of power, resources, value and opportunities.

We commit to ensuring everyone in the municipality, regardless of their gender identity has access to equal power, resources and opportunities and are treated with dignity, respect and fairness.

“Our ultimate aim is for all people to have a life free of violence.”

Image of three people wearing white silk kimono tops performing tai chi

# Our strategic context for action

The Creating Communities of Equality and Respect: Women’s Safety and Empowerment Action Plan (Action Plan) was developed in consultation with City of Melbourne leaders, practice leaders in the prevention sector, community leaders, business leaders and other stakeholders on opportunities for our external-facing work. We are especially interested in their ideas for partnership activities across the settings, places and spaces that characterise Melbourne as a capital city local government area.

Our discussions gave strong strategic consideration to the enabling policy environment for prevention that currently exists in Victoria – the direct result of the findings and recommendations arising from the historic Royal Commission into Family Violence (RCFV), which concluded in March 2016. (State of Victoria, 2016) Of particular guidance to our discussions were:

* [Safe and Strong: A Victorian gender equality strategy](https://www.vic.gov.au/safe-and-strong-victorian-gender-equality) [[1]](#footnote-1)
* [Free from Violence: Victoria’s strategy to prevent family violence and all forms of violence against women](https://www.vic.gov.au/free-violence-victorias-strategy-prevent-family-violence)[[2]](#footnote-2) - and its current three-year action plan.

The existence of these ‘twin’ pieces of policy in Victoria links directly to RCFV Recommendation 187 and the Commissioners’ recognition that parallel implementation of a stand-alone gender equality strategy and a stand-alone primary prevention strategy will help to accelerate both towards realising their respective visions. It is important to note that the two pieces while standalone do intersect each other to drive change.

Our consultations were guided by a third policy [Ending Family Violence: Victoria’s plan for change](https://www.vic.gov.au/ending-family-violence-victorias-10-year-plan-change)[[3]](#footnote-3). This is the Victorian Government’s overarching policy for implementing all 227 RCFV recommendations, and its current [Rolling Action Plan 2020–2023](https://www.vic.gov.au/family-violence-reform-rolling-action-plan-2020-2023)[[4]](#footnote-4) contains 12 priority areas, among them primary prevention.

Image of two people smiling and sitting on skateboards

# Alignment with City of Melbourne and other plans

At the municipal level, this action plan forms part of the developing Inclusive Melbourne Strategy and Statement of Commitment to Gender Equality and aligns with a number of priority areas and actions set out in Future Melbourne 2026, Council Plan 2021–2025, Municipal Public Health and Wellbeing Plan, COVID-19 Reactivation and Recovery Plan, and various other plans. It also contributes to City of Melbourne’s progress towards the United Nation’s Sustainable Development Goals in particular Goal 5 Gender Equality.

At the regional level, this action plan aligns with objectives of Preventing *Violence Together 2030*, which is the strategy for preventing violence against women in Melbourne’s west. (Women’s Health West, 2017b). City of Melbourne adheres to the principles for preventing violence against women outlined in *Preventing Violence Together 2030*:

* women’s rights to freedom from violence
* gender-transformative practice
* intersectional prevention practice
* evidence-based practice
* cultural safety for Aboriginal and Torres Strait Islander communities;
* collaboration and participation
* accountability to women’s lived experiences of violence and gender inequality.

In upholding the principle of accountability to women’s lived experiences, we further recognise the commitment and engagement of men as allies in the work of primary prevention.

Graphic image of the 17 Sustainable Development Goals:

1. No Poverty
2. Zero Hunger
3. Good Health & Wellbeing
4. Quality Education
5. Gender Equality
6. Clean Water & Sanitation
7. Affordable & Clean Energy
8. Decent Work & Economic Growth
9. Industry, Innovation & Infrastructure
10. Reduced Inequalities
11. Sustainable Cities & Communities
12. Responsible Consumption & Production
13. Climate Action
14. Life below Water
15. Life on Land
16. Peace, Justice & Strong Institutions
17. Partnerships for the Goals

# Background to this action plan

City of Melbourne has a strong history of work in the prevention of violence against women. This has included:

* Membership of the Western Region Prevention of Violence Against Women and Family Violence Network since 2006.
* Implementing the *We Need to Talk: Preventing violence against women strategy 2013–2016*. This identified workplaces and communities as settings for prevention work and transformed our organisation’s practices and culture and, commenced important conversations about violence against women in the community through our partnership activity.
* A Male Champions of Change program to achieve a significant and sustainable increase in the representation of women in leadership and non-traditional careers.
* A public commitment in 2018 to prioritise gender equality in all current and future Council planning, policy, service delivery and practice through a Statement of Commitment to Gender Equality.
* Each year the City of Melbourne provides a range of counselling and support services to those experiencing family violence and supports activities and events to raise awareness of violence including 16 Days of Activism Against Gender Based Violence and International Women’s Day.

This Action Plan is dedicated to our external-facing work with communities and sits alongside the newly enacted *Gender Equality Act 2020* requiring all local councils to take positive action towards achieving workplace gender equality, and to consider and promote gender equality in policies, programs and services that interface with communities.

Image of two older people sitting outside of National Gallery of Victoria

# Violence against women is prevalent and serious

Violence against women in Australia is prevalent and serious. The Australian Bureau of Statistics tell us that:

* One in two women (53%) has experienced sexual harassment in their lifetime;
* One in three women (31%) has experienced at least one incident of violence;
* Almost one in five women (18%) has experienced sexual violence such as the occurrence, attempt or threat of sexual assault;
* Over one in six women (17%) has experienced an episode of stalking.(ABS, 2017)

Women are more likely to experience violence by someone they know, such as a current or previous intimate partner, than by a stranger.

In the majority of cases, violence against women occurs while women are in their own homes. Large numbers of children are also impacted by seeing and hearing violence in the family home.

The rates of family violence against lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) people is as high as, if not higher than, family violence against heterosexual, cisgendered women and their children. (OurWatch, 2017)

The situation for men is different - they typically face violence from strangers in public places. (ANROWS, 2018)

# Impacts

The impact of violence against women is serious and profound.

Intimate partner violence contributes more to the burden of disease (or total amount of ill health) of women aged 18–44 years than any other known risk factor.

Frighteningly, on average one woman a week in Australia is killed by a current or former partner. (ANROWS, 2018)

At a local level there are lower perceptions of safety at night for women than men and an increase in assaults
and sexual offences. (Reported Crime Statistics and CoMSIS- refer addendum)

Image of the back of two parents and a child walking along a community market

# Violence against women is preventable

While prevalent and serious, violence against women is not inevitable and all of us can take action to prevent violence.

This Action Plan focusses on how to:

* Transform the deep underlying causes of violence against women so that violence against women doesn’t occur in the first place and
* Target and disrupt the drivers of violence against women. This approach is known as primary prevention.

The *Change the Story: A shared framework for the primary prevention of violence against women and their children in Australia* (Our Watch et al., 2015) identifies gender inequality in public and private life – or the unequal distribution of power, resources, opportunity and value afforded to men and women in society – as the most necessary condition of violence against women.

Gender inequality is expressed in four ways to cause violence against women:

* condoning of violence against women
* men’s control of decision-making and limits to women’s independence
* rigid gender roles and stereotyped constructions of masculinity and femininity, and
* male peer relations that emphasis aggression and disrespect.

As women and men are not valued equally and do not have equal access to power, resources and opportunity these inequalities have become embedded over a long period of time.

“We can change the story of violence against women by acting on the gendered drivers. The most important action we can take is to promote and normalise gender equality in public and private life.”

# Why Intersectional prevention practice is important

*Change the Story* signals to us that the gendered drivers never operate in isolation but intersect with other historically based forces that operate in society. The more compounding these unequal relations, the less equality that exists, and greater the exposures to violence. Some examples include the following:

* Over a 12-month period, Aboriginal and Torres Strait Islander women report experiencing violence at 3.1 times the rate of non-Indigenous women with injuries more severe and hospitalisation rates due to family violence-related assaults 32 times the rate for non-Indigenous women. Violence against Aboriginal and Torres Strait Islander women is perpetrated by non-Indigenous and Indigenous men. (Our Watch, 2018)
* Gender based and disability based discrimination doubles the risk of violence for women with disabilities compared to women without disabilities. Women living with disabilities experience all types of violence at higher rates, with increased severity and for longer than other women. Violence includes impairment related abuse such as withholding medication and disability aids. (Women with Disabilities Victoria, n.d.)
* Women’s experience of racially based violence perpetrated against them is a type of violence that immigrant and refugee women endure. This experience is not always perceived as violence against women, but must be included as part of prevention action. (Multicultural Centre for Women’s Health, 2017) Women on temporary visas face unique layers of disadvantage, including social isolation and ineligibility for universal health care or other services. Their migration status can also be weaponised as a distinct tool of coercion and control by those perpetrating violence against them. (InTouch, 2020)
* Trans and gender diverse intimate partner violence is reported to be at higher rates than cisgendered experiences, and there are indications that trans women report higher rates of violence than trans men. While the types of violence that occur are similar to those found in cisgender heterosexual relationships, there are unique dynamics. Perpetrators can exploit knowledge of identity within networks or community to control and harm their intimate partners. (Rainbow Health Victoria, 2020)
* Current data shows that older women are more likely than older men to be victims of both intergenerational and intimate partner violence. Perpetrators of intergenerational violence are more likely to be men. Such violence includes family violence perpetrated by a partner over a long period of time and financial abuse and control perpetrated by an adult child. (OurWatch, 2021)

This tells us that City of Melbourne’s prevention work must be for all women, it must ‘leave no woman behind.’ This also means attending to the intersecting systems of inequality- known as intersectional prevention practice.

Graphic image of person with three ribbons wrapped around them identifying intersecting systems of inequality associated with:

Discrimination and oppression including colonisation, sexism, homophobia, ageism, religious discrimination, racism, classism, and ableism.

Social systems and structures including welfare, economic, health, education, labour, legal / justice.

Social status and identity including Aboriginality, ethnicity, sex, gender identity, sexuality, parent/carer status, cultural background, socio economic status, age, migration and religious status.

Image 8. © Our Watch Limited 2017

The systems we target (and seek to transform) are sexism as well as heterosexism, cissexism, racism, colonialism (and its ongoing legacy), ethnocentrism and ableism – to name but a few. Women’s Health West, 2017a.

Intersectional prevention practice recognises the multiple structural and institutionalised systems of privilege and disadvantage that intersect with one another to influence the risks to, and the dynamics and severity of, violence against women.

Intersectional prevention practice will be applied to all actions developed as part of the annual action plans.

|  |
| --- |
| We prioritise and resource ongoing action to promote gender and disability equality. **Prevention of Violence Against Women with Disabilities** |
| Rigid gender norms, cisnormativity and heteronormativity are key factors in the abuse and violence experienced by LGBTIQ people within their families of origin, and in society more generally This connection reinforces the need for gender-transformative approaches that challenge rigid gender norms by simultaneously addressing cisnormativity and heteronormativity. **Pride in Prevention** |
| A truly intersectional approach to prevention requires us to work in partnership with others to ensure all systems of oppression are dismantled, to realise all women’s rights to safety, respect and equality. **Preventing Violence Together 2030** |

Image of women with head scarf speaking at a community event.

# The urgency for prevention action

There is emerging evidence that gender inequality in Australia is getting worse, and this means violence against women is likely to continue unabated well into the future unless we start to turn the tide now.

|  |
| --- |
| A young woman born in Australia at the turn of the millennium and who is set to celebrate her 21st birthday sometime in 2021, has actually spent her entire lifetime experiencing a diminishing of gender equality. |

Image of International student.

# COVID-19

There are indications that the COVID-19 global pandemic is further propelling this downward direction of gender inequality in Australia.

Emerging evidence is telling us that the impact of COVID-19 has not been gender equal, with public health lockdowns and economic slowdowns having more far-reaching negative consequences for women than men. In Victoria, which endured a succession of months of strict public health measures over 2020 and 2021 the effects have been:

* 55% of job losses due to COVID-19 were felt by women
* women have been depleting their superannuation at a higher rate than men when withdrawing emergency COVID-19 funds
* the majority of casual workers who were not able to access JobKeeper were women
* women were found to be performing far more of the unpaid labour and additional education support to children at home during lockdown.

Infograph on COVID-19 inequalities showing 55 per cent of job losses due to COVID-19 are women. Women (4.5 per cent) are depleting their superannuation at a higher rate than men (2.5 per cent) when withdrawing emergency COVID-19 funds. Majority of the casual workers are unable to access JobKeeper are women. The value of unpaid labour by Victoria women is estimated as $205million. Women are performing far more of the unpaid labour and additional education support in the home during lockdown. The payroll impact on women has been greater than men across many industries. Family violence statistics in lockdown indicate 200 plus calls a week to Victoria Police, 50 per cent increase to magistrates’ court and 94 per cent increase to men’s services. The majority of essential workers have been women and are in the lowest paid jobs including cleaners, teachers, early childcare and retail workers.

Figure 2: COVID-19 inequalities (GEN VIC, 2020)

# Our plan’s themes and high-level actions

The Action Plan contains four broad themes and 12 actions to be delivered in year one (2021-22).

The four broad themes contained in our plan are:

1. Advance women and gender diverse people’s leadership and participation in economic, social and civic life across the municipality
2. Promote the safety of women and gender diverse people in our communities and public spaces
3. Engage men and boys to shift unhealthy norms of masculinity and condoning of violence
4. Achieve sustainable primary prevention for our municipality.

With the ongoing social and economic impacts of COVID-19 and the uncertainty it presents to the City of Melbourne and our local communities and businesses we will be preparing annual action plans instead of a three year action plan. Activities outlined in the action plan below are activities we have resources and capacity to deliver over the next 12 months. Action plans for year two (2022-23) and year three (2023-24) will be presented to Council for endorsement at a later date.

Image of group of people exercising outdoors

# Evaluation for learning, improving and decision-making

The Action Plan has an evaluation framework to support a planned and coordinated approach to collecting data throughout the course of implementation.

Success measures will be determined; data will be collected against these and analysed; results will be used to learn from the work, and also to improve implementation in real time; and overall evaluation findings at the end of this year, will be considered to help with our decisions around future annual actions for the City of Melbourne.

Image of three people sitting in a meeting

# Women’s Safety and Empowerment Year One Action Plan 2021–2022

| Strategic themes and high-level actions | Potential partners | Key Outcomes | SDG and Council Plan links |
| --- | --- | --- | --- |
| 1. Advance women and gender diverse people’s leadership and participation in economic, social and civic life across the municipality.1.1 Pilot free period care product vending machines in council facilities to address period poverty.1.2 Continue to work with other local governments and Women’s Health West to implement the Women’s Participation in Sports and Active Recreation in Melbourne’s West: An Action Plan for Change 2020– 2025.1.3 Continue to tell the stories of women and gender diverse people’s achievements through street naming, monuments, plaques, arts, awards, and events so that influential women throughout Melbourne’s history and in the present time are acknowledged – with particular focus on Aboriginal women and immigrant and refugee women(e.g Put Her Name On It campaign, International Women’s Day, IDAHOBIT). | Women’s Health West and PVT PartnershipHistory Council of VictoriaVictorian Women’s TrustHer Place Women’s Museum | People who menstruatehave free access to period products.Increased opportunity and participation of women and gender diverse people in sports and recreation.Increased representation and recognition of women and gender diverse people in our public places and spaces.In the long term women and gender diverse people are safe and included in all aspects of civic, economic and social life in the municipality. | Sustainable Development Goals* SDG 5 Gender equality
* SDG 10 Reduced inequality

Council Plan 2021–2025* Melbourne’s unique identity and place
* Access and affordability

Municipal Public Health and Wellbeing Plan* Mental wellbeing and inclusion

COVID-19 Reactivation and Recovery Plan* Expand equitable opportunity / access
 |
| 2. Promote the safety of women and gender diverse people in our communities and public spaces.2.1 Raise community awareness of violence against women (prevalence, dynamics, impacts, underlying drivers) by participating in evidence-based campaigns and initiatives such as (but not limited to) 16-Days of Activism Against Gender-based Violence, Walk Against Family Violence.2.2 Promote and encourage community and businesses to get involved in the shEqual advertising equality campaign and take action against (hetero)sexist and gender stereotypical advertising.2.3 Partner with the Night Time Economy Advisory Committee and businesses on activities or projects such as Project Night Justice that prioritise the safety and participation of women and non-binary gender diverse people in the late night economy. | Safe StepsWomen’s Health West and PVT PartnershipWomen’s Health VictoriaRespect VictoriaCoM Night Time Economy Advisory CommitteeCoM’s Family and Children’s Services Advisory CommitteeCoM’s Disability Advisory CommitteeMelbourne Licensees ForumVictoria PoliceCrime Stoppers VictoriaRape and Domestic Violence Services AustraliaUniversity of MelbournePrecinct Associations | Increased capacity and capability of businesses and licenced premises to adopt/initiate gender equitable practices.Increased skills/confidence of night-time licenced premises contacts for prosocial bystander action.In the long term women and gender diverse people feel safer and more included when using council facilities, conducting their businesses, walking in our streets, or attending events & licenced premises. | Sustainable Development Goals* SDG 3 Good health and wellbeing
* SDG5 Gender equality

Council Plan 2021–2025 * Safety and wellbeing
* Access and affordability

Municipal Public Health and Wellbeing Plan* Public health and safety
* Mental wellbeing and inclusion

Child Safe Framework* Create a culturally safe environment for children and young people that is free from harassment, bullying, violence, discrimination, racism or sexism
 |
| 3. Engage men and boys to shift unhealthy norms of masculinity and condoning of violence.3.1 Provide opportunities for men and boys to engage in conversations about their role as prosocial bystanders and allies for creating a more gender equitable future.3.2 Work with men to support and promote neighbourhood based men’s groups and health promotion programs that discuss healthier forms of masculinities and the role of men in promoting gender equality e.g. Modelling Respect and Equality (MoRE) and Sons of the West. | Community organisations and Advocacy groupsWomen’s Health West and PVT PartnershipThe Men’s Project / Jesuit Social ServicesWestern Bulldogs Community Foundation | Increased skills / confidence of men and boys to understand and challenge harmful expressions of masculinity. | Sustainable Development Goals* SDG 3 Good health and wellbeing
* SDG 5 Gender equality

Council Plan 2021–2025 * Safety and wellbeing

Municipal Public Health and Wellbeing Plan* Public health and safety
* Mental wellbeing and inclusion

Child Safe Framework* Create a culturally safe environment for children and young people that is free from harassment, bullying, violence, discrimination, racism or sexism
 |
| 4. Achieve sustainable primary prevention for our municipality.4.1 Support community groups and businesses to develop and deliver localised responses to the underlying drivers of violence against women through our community grants and sponsorship programs.4.2 Continue contributing to the Preventing Violence Together 2030 strategy as a full member in the western metropolitan region’s partnership to prevent violence against women.4.3 Participate in and actively contribute to the Municipal Association of Victoria’s Gender Equality, Prevention of Violence Against Women and Gender Based Violence Network.4.4 Learn from and share knowledge with other international cities on global best practice in primary prevention. | Community organisations and Advocacy groupsMunicipal Association of VictoriaWomen’s Health West and PVT PartnershipRespect Victoria | Increased capacity and capability of community groups and businesses to adopt/initiate gender equitable practices.Increased visibility of councils advocacy, leadership and commitment to PVAW and gender equality.Sustained partnerships for PVAW and gender equality.Knowledge and best practice in primary prevention informs future Action Plans. | Sustainable Development Goals* SDG 3 Good health and wellbeing
* SDG 5 Gender equality
* SDG 17 Partnerships for the Goals

Council Plan 2021–2025 * Safety and wellbeing

Municipal Public Health and Wellbeing Plan* Public health and safety
* Mental wellbeing and inclusion
 |

# Addendum: Local data on violence against women and perceptions of safety

## Reported crime statistics

### Family violence

According to the latest reported crime statistics, the rate of family violence incidents in Melbourne increased by 18.5 per cent from 2019–20 to 2020–21. There were 176 more reports per 100,000 population from 947.5 to 1122.9.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Family incidents | 2016/17 | 2017/18 | 2018/19 | 2018/19 | 2020/21 |
| Number | 1481 | 1619 | 1567 | 1741 | 2052 |
| Rate per 100,000 population | 930.6 | 950.6 | 875.4 | 947.5 | 1122.9 |

The majority of affected family members are women (77 per cent) aged between 25-44 years (58 per cent).

### Assault and sexual offences

There has been a general increase in assaults and sexual offences against women across Victoria in the last four years to March 2020. Sexual offences against women have increased from 6413 reports in 2017, to 7403 reports in 2020 – an increase of almost 15 per cent. Similarly, assaults against women have risen by 6 per cent over the same period (21,010 reports in April 2017 compared with 22,271 in March 2020).

The City of Melbourne is experiencing similar trends to Victoria in sexual assault offences. In 2020, rates of sexual assault offences reached 521.6 per 100,000 residents, close to the 10-year high of 524.3 offences per 100,000 residents reported in 2018. The majority of sexual assault victims in Victoria are female (approximately 84 per cent in 2020). We also know that the LGBTIQ+ communities experience similar levels of sexual and other violence.

### Perceptions of crime and safety

City of Melbourne’s Social Indicator Survey (CoMSiS)\* consistently reports lower perceptions of safety at night for women than men. Just over sixty three per cent of men who participated in the 2021 CoMSiS reported feeling safe at night compared with thirty six per cent of women and twenty five per cent of people who identified as other. The table below provides trends over four years indicating these statistically significant findings based on gender.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Perceptions of Safety\* | Perceptions of Safety\* | 2018 | 2019 | 2020 | 2021 |
| Women | Feel safe during the day | 86.1% | 81.7% | 81.1% | 76.8% |
| Men | Feel safe during the day | 90.4% | 86.3% | 84.4% | 81.6% |
| Other\*\* | Feel safe during the day | 81.8% | 76.9% | 87.0% | 63.1% |
| Women | Feel safe at night | 48.3% | 32% | 43.8% | 36% |
| Men | Feel safe at night | 70.6% | 63.1% | 68.3% | 63.5% |
| Other\*\* | Feel safe at night | 40.9% | 11.5% | 43.5% | 25.4% |

\* CoMSiS, surveys City of Melbourne residents and is conducted every year at the same time during the months of April and May.

\*\*Please note small sample sizes for “Other” across all years (i.e. n<30). Results for this group should be treated with caution.

Between 2018 and 2019 there was a marked decline in perceptions of safety at night likely due to a number of high-profile sexual and violent crimes against women. The majority of these crimes occurred at night.

In addition, CoMSiS consistently reports lower perceptions of safety on public transport at night for women than men. Fifty eight per cent of men who participated in the 2021 CoMSiS reported feeling safe on public transport at night compared with thirty one per cent of women and twenty seven per cent of people who identified as other. The table below provides trends over four years indicating these statistically significant findings based on gender.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Perceptions of safety on public transport | Perceptions of safety on public transport | 2018 | 2019 | 2020 | 2021 |
| Women | Feel safe on public transport during the day | 84.5% | 78.4% | 77% | 75.4% |
| Men | Feel safe on public transport during the day | 86.6% | 85.7% | 80% | 84.2% |
| Other\* | Feel safe on public transport during the day | 90.5% | 37.5% | 78.3% | 71.3% |
| Women | Feel safe on public transport at night | 44.1% | 32.7% | 36.2% | 31% |
| Men | Feel safe on public transport at night | 65.2% | 62.6% | 60.1% | 58.2% |
| Other\* | Feel safe on public transport at night | 47.6% | 29.2% | 45.5% | 27.4% |

\* Please note small sample sizes for “Other” across all years (i.e. n<30). Results for this group should be treated with caution.

The recent Perceptions of Crime and Safety (PoCS) Research (2020) also indicated women’s feelings of safety at night are lower than men’s. The research posed questions regarding our community’s sense of safety at night prior to COVID-19. On the issue of women’s safety at night, women reported awareness of crimes committed against women due to media coverage. Both the crimes committed against women (between 2018 and in 2019) and the increased media coverage contributed to their concern about being alone in the city at night. The research indicated that our community feel least safe on Saturday (45 per cent) and Friday (50 per cent) after midnight (12am-3am).

According to the latest Perceptions of Crime and Safety Research conducted in 2020, perceptions of personal safety decreased from 87 per cent in 2013 to 81 per cent in 2020 and family safety decreased from 85 per cent in 2013 to 78 per cent in 2020.

Based on comparisons with the 2013 survey there has been significant decline in perceptions of safety in Melbourne’s car parks, laneways, public toilets and public spaces in and around Melbourne’s bars and nightclubs prior to the pandemic.

Figure 3: Perception of personal and family safety

Graph showing personal safety has decreased from 92 per cent in 2006 to 81 per cent in 2020.

Family safety has decreased from 84 per cent in 2009nto 78 per cent in 2020.

Figure 4: Perception of safety in public places

Line graph showing Perceptions of safety in public toilets has decreased from 79 per cent in 2013 to 59 per cent in 2020; Perceptions of safety in laneways decreased from 83 per cent in 2013 to 74 per cent in 2020; Perceptions of safety in bars and nightclubs decreased from 76 per cent in 2013 to 68% in 2020; Perceptions of safety in car parks decreased from 88 per cent in 2013 to 75 per cent in 2020.

Women (76 per cent), young people (14-25 years) (74 per cent) and middle aged people (36 – 55 years) (73 per cent) feel the least safe in the city due to public drunkenness, threatening/aggressive behaviour, people sleeping rough and evidence of drug use and drug dealing.

Figure 5: Perceptions of safety by user group, age, gender, student type and time of day

Bar graph showing percentage of people who “always feel safe” and “more safe than unsafe” in the city; All community 79 per cent, Residents 82 per cent, Workers 81 per cent, Students 79 per cent, Visitors 77 per cent, Male 82 per cent, Females 76 per cent; People aged 14-25 years 74 per cent; People aged 26 to 35 years 83 per cent, People aged 36 to 55 yeas 73 per cent, People aged 56 per cent 85 per cent, Culturally and Linguistically Diverse (CALD) 79 per cent, non-CALD 79 per cent 79 per cent, International students 83 per cent, local students 76 per cent, Lesbian Gay Bisexual transsexual Queers Intersex plus (LGBTIQ+) 79 per cent, non-LGBTIQ+ 79 per cent, Day use only78 per cent, Night city use 81 per cent, Late night city use 78 per cent.

\* Percentage who “always feel safe” and “more safe than unsafe” in the city.

Women report concerns regarding verbal harassment (36 per cent) and inadequate street lighting (45 per cent) as contributing to feeling unsafe in public spaces. King Street near the night clubs (40 per cent) and King Street generally (26 per cent), Flinders Street Station (37 per cent) and corner Elizabeth & Flinders Streets (36 per cent) are reported as the most unsafe areas.

# Appendix 1 - Glossary of Terms

Cissexism and cisnormativity: Systemic discrimination based on normative assumptions (cisnormativity) that everyone falls into one of two binary categories, woman or man; and that our **gender** aligns with binary sex characteristics used to define female or male assigned at birth. As a system of discrimination, cissexism encompasses the norms, stereotypes, attitudes, practices, structures and institutions that facilitate such discrimination.

Gender: The socially learned and acquired roles, behaviours, practices, attitudes and attributes that society considers appropriate for women and men. Gender is a social construction of binarised ‘femininity’ and ‘masculinity’ and how these are experienced and lived by us. Gender is distinct to – but not wholly disconnected from – our understandings of binary sex as the biological and physical characteristics used to define male or female.

Gender inequality: The unequal distribution of power, resources, opportunity and value afforded to men and women in society arising from the social construction of **gende**r.

Gender-transformative practice: We understand gender-transformative practice as practice that seeks to interrupt and disrupt the formation and perpetuation of rigid binary gender norms, practices and structures that exist across the entire **social ecology**.

Heterosexism and heteronormativity: Systemic discrimination based on normative assumptions (heteronormativity) of hetero-sexuality as the central or normal sexual orientation of human beings. Heterosexism is deeply organised by **cissexism**, and as a system of discrimination it encompasses the norms, stereotypes, attitudes, practices, structures and institutions that facilitate both forms of discrimination.

Intersectional prevention practice: Our prevention practice is intersectional, meaning it leaves no woman behind.

We are acutely aware that deep structural forces or institutionalised systems of privilege and disadvantage *intersect* with one another to influence the risks to, and dynamics and severity of, violence against women. The more compounding the relations of privilege and disadvantage, the less equality exists, and the greater the exposures to violence.

Our prevention practice targets intersecting systems so that we can achieve equality for *all* women and put an end to violence *once and for all*. The systems we target (and seek to transform) are **sexism** as well as **heterosexism, cissexism**, racism, colonialism (and its ongoing legacy), ethnocentrism and ableism – to name but a few.

Intersectionality actually helps us to be more effective in preventing violence against women because it helps us to disrupt all the intersecting forces that shape women’s lived experiences of inequality.

Sexism: Discrimination based on socially-constructed concepts of **gender** and the **gender inequality** arising from this. As a system of discrimination, sexism encompasses the norms, stereotypes, attitudes, practices, structures and institutions that facilitate such discrimination. Sexism is deeply interconnected with **heterosexism** and **cissexism**.

Social ecology: The social ecology helps us to understand that the drivers of violence against women are exerted and ‘lived’ across multiple, connected levels. These are the societal, community and organisational levels, all of which ‘nest’ the relational and individual level. The social ecology also helps us to see where we can direct our actions to transform the drivers of violence. For prevention to be effective, our actions must be addressed across all levels, not only the relational or individual.

Diagram representing the different levels of prevention action from individual or relationship, community or organisational, and societal.

Figure 6: Women’s Health West, 2017a

Violence against women: We understand violence against women as any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. (United Nations General Assembly, 1993)

Violence against women can be criminal or non-criminal in its forms. There are many manifestations of violence including (but not limited to) physical, sexual, emotional, psychological, economic, spiritual and social violence. No matter how it manifests, violence against women is always an intentional act to exert power and control (Women’s Health West, 2017a)

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