



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

A report outlining family violence and sexual violence service gaps in Aotearoa

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Te Puna Aonui agencies are committed to addressing family violence and sexual violence (FVSV) service gaps, particularly gaps that affect tangata whenua, children and young people, Pacific peoples, disabled people, LGBTQIA+ communities, ethnic communities, older people, male victims/survivors, gang whānau, and people who use violence. This plan refers to these cohorts as ‘tangata whenua and people from diverse communities.

The Gaps report suggests a potential two-phase approach to addressing five overarching FVSV service gaps. The first phase focuses on strengthening existing FVSV services and the second on expanding and developing tailored services for tangata whenua and people from diverse communities. Strengthening what we already have will deliver timely and wide-reaching support across the FVSV system. Increasing the accessibility, safety, and effectiveness of existing FVSV services will hone what needs to be addressed through expanding and developing tailored services.

Gaps Report overview

First phase:

Increasing the accessibility and effectiveness of existing FVSV services

FVSV services workforce capability

There is a need to support the ongoing development of the FVSV services workforce to better respond to the range of needs of the people accessing their services. Addressing this gap will enable FVSV specialists and practitioners to better understand the unique ways FVSV manifests in different communities and what is required to deliver safe, effective, and appropriate support to tangata whenua, people from diverse communities, and people with intersecting identities.

There is a lot of work happening to support the FVSV sector to increase workforce capability under Te Aorerekura Shift Three. This component of the Gaps Report is designed to build on existing work programmes by reflecting what we heard during engagement.

Gaps in holistic services (whānau-centred, wraparound support from early intervention to long-term healing)

While there are some existing FVSV services that offer holistic, whānau-centred, wraparound support (e.g., Kaupapa Māori services), the FVSV system is not able to consistently provide this type of support. Holistic support acknowledges people in their entirety, with their intersecting needs, understands their place within their whānau and community, and supports across the continuum of care, from early intervention to long-term healing.

Work to address this gap reflects the Tokotoru model within Te Aorerekura, as it recognises that there are gaps in early intervention and healing. It will be instrumental in extending the reach and responsiveness of existing FVSV services to encompass other challenges that people face because of, and alongside, FVSV.

Sexual violence service gaps

There are insufficient sexual violence services nationally, with particular gaps in crisis services and in support to victims/survivors after crisis before they can access long-term support.

Gaps in the accessibility of safe houses and availability of emergency accommodation

Safe houses are not accessible for all, and emergency accommodation is limited. This means victims/survivors must remain in, or return to, dangerous situations or there are no options for people who use violence to leave the home, forcing victims/survivors to leave.

Second phase:

Other FVSV services

Expanding and developing tailored services

Many service needs can be met by strengthening the knowledge, good practice, and accessibility of existing FVSV services. However, some people may still experience unique FVSV service gaps that will require the expansion of a service, or the development of a tailored service. This includes meeting the needs of tangata whenua and people from diverse communities.

For example, existing services can become more accessible, safe, and effective for LGBTQIA+ people, but there is still a need for services designed to support the unique needs and experience of the LGBTQIA+ community. This might involve expanding an existing service or developing a new tailored service to meet the needs of the LGBTQIA+ community.

Phase One focuses on improving the ability of existing FVSV services to support people accessing their services. This work will inform Phase Two, as we will have a better understanding of any remaining service gaps which will guide effective and targeted expansion, or development of tailored, services.

Context

Government needs to address gaps in family violence and sexual violence services

Aotearoa New Zealand has high rates of family violence and sexual violence (FVSV). We know there are big gaps in FVSV services and not everyone can access the support they need when they experience or use violence.

Te Aorerekura - The National Strategy to Eliminate Family Violence and Sexual Violence called on government to identify the FVSV service gaps across Aotearoa New Zealand and create a plan to address the gaps (the Gaps Report). This work sits under Actions 29 and 30 of Te Aorerekura Action Plan¹ and began in May 2022.

The Gaps Report² scopes and analyses FVSV service needs across Aotearoa New Zealand and outlines a potential approach to address them. While initially the Gaps Report was also intended to scope service design, as the work programme evolved it was determined that service design was out of scope and should not be included in the final product. In early 2023, the Interdepartmental Executive Board (IEB) agreed to this change in approach. The analysis in this document will be a key input into ongoing work to implement Te Aorerekura.

This work programme was led by the Ministry of Social Development (MSD) with support from a government working group made up of representatives from Accident Compensation Corporation (ACC), Ara Poutama Aotearoa – Department of Corrections, Ministry of Justice, MSD, NZ Police, Oranga Tamariki, Te Puna Aonui Business Unit and Whaikaha Ministry for Disabled People. These agencies participated because they are either listed under Action 29 or 30 in Te Aorerekura, or because they are funders of FVSV services.

The working group began meeting regularly from September 2022 to ensure cross-agency input and collective decision making in the development of the Gaps Report. The working group members were also responsible for sharing updates and seeking feedback from their individual agencies as appropriate.

Findings from this work programme are consistent with what was heard and learnt through the strategic review of the first Te Aorerekura Action Plan. As previously indicated, this service gaps work will be one of the key inputs that will feed into the development of the next Te Aorerekura Action Plan and the Investment Plan.

¹ Action 29: Develop a plan to fill the service gaps for family violence and Action 30: Develop a plan to fill the service gaps for sexual violence.

² The term Gaps Report has been used throughout this work to be consistent with the wording of Actions 29 and 30 in Te Aorerekura Action Plan (December 2021-December 2023). Note that there is a single Gaps Report because Actions 29 and 30 were progressed simultaneously, since both required similar deliverables.

Why do we need a Gaps Report?

Historically, government agencies have worked to address specific service gaps, usually by submitting individual initiatives through the Budget process. This approach can limit our ability to move beyond the mandate of our individual agencies to deliver wider impact for the FVSV sector.

The Gaps Report provides information that will enable a more systematic and focussed approach to addressing FVSV service gaps. We have identified and compiled a comprehensive list of the FVSV service gaps that people are experiencing. If we simply focus on specific or targeted gaps from this list, we miss the opportunity to work collectively to make a significant and sustainable change to FVSV service gaps. With that in mind, the Gaps Report recommends overarching FVSV service gaps with impacts across a range of communities.

FVSV service gaps were identified through public consultation

The FVSV gaps identified in the Gaps Report are based on information collated from FVSV reports and research papers, public feedback provided through the development of Te Aorerekura in 2021, and thorough consultation with tangata whenua, communities, advocacy groups, and the FVSV sector from March to May 2023.

The consultation approach was designed to fully understand the FVSV service gaps that people are experiencing, but also to minimise consultation fatigue for tangata whenua, communities, advocacy groups, and the FVSV sector.

Officials across agencies (led by the working group members) provided community groups, peak bodies, advocacy groups and FVSV providers with a list of known FVSV service gaps, and some criteria to help understand the relative urgency of addressing those gaps. This information was communicated primarily through pre-planned consultation within other work programmes. The information was also shared through newsletters, via face-to-face and online hui, and on the Te Puna Aonui website with a short feedback form. There was a thorough follow up (through in person and online hui, and via email) with submitters to ensure clarity, to answer questions, and to make sure people were heard.

We welcomed feedback in any form that worked for those providing it. We received approximately 150 detailed submissions on our work from a wide variety of community stakeholders and advocacy groups.

Each submission was thematically coded, analysed and incorporated into the FVSV gaps listed in the five overarching gaps on pages 10-31.

Despite thorough consultation and collaborative work, we know we won't have it perfectly right. The analysis in this Gaps Report reflects a point in time. As the findings of the Gaps Report are implemented, the approach can be refined as new information comes to light.

Some identified gaps are out of scope

We heard a wide range of feedback through consultation. After extensive analysis some of the feedback was deemed out of scope for the Gaps Report. The working group considered all feedback to be valuable and any information that was not included in the Gaps Report has been raised with relevant agencies to be incorporated into other, more appropriate work programmes.

Some examples of gaps that are out of scope include:

- Legislative issues
- System level gaps – e.g., reform of the family court is not in scope under the Gaps Report (however, gaps in justice services and workforce are included).
- Workforces that are not FVSV service workforces (e.g., education, health, and generalist workforces).
- Prevention initiatives.

We aren't starting from zero in addressing these service gaps

We know that we won't be starting from zero in addressing these FVSV service gaps. There is a lot of work already happening in communities, in the FVSV sector, and across government to address service gaps.

The Gaps Report does not require any existing work or agreed priorities to change. It does present an opportunity to combine what has been learnt about FVSV service gaps through an extensive consultation process with what is already available and underway to support the development of the next Te Aorerekura Action Plan and Implementation Plan. It enables us to build off what is already available, without re-doing work or duplicating effort.

The Gaps Report

The Gaps Report has three key functions. It:

1. lists and groups known FVSV service gaps
2. outlines a potential approach to addressing the gaps
3. supports government to consider how it might coordinate a cross-agency response to address these gaps.

The Gaps Report does not determine how the gaps will be addressed or what implementation will look like. Instead, its analysis and options to address FVSV service gaps will help inform the development of the second Te Aorerekura Action Plan, as well as the Investment Plan. These two plans will reflect the collective priorities of Te Puna Aonui and guide how we can collectively work to address FVSV service gaps.

A focus on addressing gaps that are experienced across communities (overarching gaps)

Gaps in FVSV services affect everyone. However, tangata whenua, children and young people, Pacific peoples, disabled people, LGBTQIA+ communities, ethnic communities, older people, male victims/survivors, gang whānau, and people who use violence are especially impacted by FVSV service gaps.³

The Gaps Report focusses on the gaps that have the biggest impact on the communities and cohorts identified above – they are referred to collectively as ‘tangata whenua and people from diverse communities’.

While there are some FVSV service gaps which are only experienced by a specific community (e.g., a lack of support for people with intellectual disabilities), many of these communities and cohorts have a shared experience of FVSV service gaps (e.g., a need for more long-term healing services).

The service gaps have therefore been grouped in themes. We refer to these groupings of FVSV service gaps as ‘overarching gaps’.

Five overarching gaps have been identified in:

1. **building FVSV services workforce capability (pages 10-17)**
2. **the delivery of holistic, whānau centred wraparound support (pages 18-23)**
3. **sexual violence services (page 24-25)**
4. **the accessibility of safe houses and the availability of emergency accommodation (page 26-27)**
5. **services tailored for tangata whenua and people from diverse communities (pages 28-31).**

³ This was reflected in feedback received during public consultation

The five overarching gaps are made up of many targeted FVSV service gaps. The breakdown of these targeted FVSV service gaps can be found pages 12-20.

This grouping enables us to collaborate and decide how to coordinate our joint efforts to address a broader set of gaps in a robust and sustainable way. This approach is intended to encourage system level coordination of resources, increase the quality of support and accessibility of existing FVSV services, and strengthen the FVSV system for everyone.

Each government agency will have its own responsibilities for addressing parts of the overarching gaps but should be guided by our collective focus to address gaps in the most efficient and effective way.

Gaps should be addressed over time to ensure an effective joint response

All five overarching gaps are large and multifaceted. Addressing them thoroughly will require concerted and coordinated effort from government, tangata whenua, communities, and the FVSV sector.

We know it isn't possible to address all the overarching gaps at the same time. This would stretch our collective resource and capacity, making it difficult to respond effectively and achieve sustainable change. Therefore, the Gaps Report proposes a potential phased approach to addressing the overarching FVSV service gaps to deliver the most wide-reaching and timely support across the FVSV system:

1. Phase One focusses on increasing the accessibility and effectiveness of existing FVSV services and responses; and
2. Phase Two focusses on developing new FVSV services tailored for tangata whenua and people from diverse communities

Again, The Gaps Report does not require any existing work or agreed priorities to change. It enables us to build off what is already available, without re-doing work or duplicating effort

Phase One: Increasing the accessibility and effectiveness of existing services

Building FVSV services workforce capability and increasing the holistic nature of FVSV services, the accessibility of sexual violence services, safe housing and emergency accommodation has strong potential to deliver long-term increases in safety and recovery from FVSV.

These overarching gaps will have a significant impact across the FVSV system and addressing these will provide wide-spread benefits for all FVSV service users. Strengthening what we already have has the potential to deliver timely, wide-reaching support. We can leverage existing work that is already underway in these areas.

By increasing the accessibility, safety, and effectiveness of existing FVSV services we will decrease what needs to be addressed through expanding and developing tailored services. This will build a solid understanding of what is still missing from the system and will guide effective and targeted expansion of existing tailored services and development of any new services.

Phase Two: Expanding and developing tailored services

The fifth overarching gap will see the expansion and development of **tailored services** for tangata whenua and people from diverse communities. While addressing this gap is important, the Gaps Report highlights the potential to focus on strengthening existing services before developing new FVSV services.

Intersectional support is essential in implementing the Gaps Report

The specific FVSV service gaps experienced by tangata whenua and people from diverse communities, are listed in each of the overarching gaps tables (pages 14-36). This reflects what we heard from these groups during consultation and helps to demonstrate broadly what FVSV gaps are experienced by each of these communities. However, it does not reflect the multiplicity of people's identity or the compounding negative impact of FVSV service gaps for people whose identity intersects tangata whenua and/or multiple diverse communities.

Understanding dynamics of intersecting and cumulative drivers experienced within communities is a gap in itself. We know that we need to be specific about the needs of each community, but as we work to address FVSV service gaps, we can ensure that any actions we take will support people across their intersecting identities.

Identifying geographic gaps to support implementation

Alongside the development of the Gaps Report, we have been creating an interactive map that shows the location of all government funded FVSV services. This map will help support a focussed approach to addressing regional service gaps, as it identifies the range of services available in each region, as well as providing relevant population level data.

The map is under development by MSD and will be made available to Te Puna Aonui agencies once it is completed.

Details of the overarching gaps

The following tables detail each of the five overarching gaps. Each table provides a high-level overview of the service gap; it then outlines the way in which the service gap affects all communities; and then provides information on how this gap is unique to each specific community.

Family violence and sexual violence (FVSV) services workforce capability (including organisational capability and knowledge/research gaps)

A significant driver of this service gap is the limited capability of the existing FVSV services workforce to respond appropriately to the range of needs of the people accessing their services. This means some people may avoid engaging with existing FVSV services or receive inadequate support if they do. FVSV services workforce capability building is required.

FVSV services workforce capability in this Gaps Report has a specific focus on the need for FVSV specialists and practitioners to better understand the unique ways FVSV manifests in different communities; and what is required to deliver safe, effective and appropriate support to tangata whenua, people from diverse communities, and people with intersecting identities. Through engagement it was heard that most existing FVSV training is not sufficient for the FVSV services workforce to adequately understand how FVSV manifests in different ways, for different people; therefore, additional capability building is needed. This table also notes the organisational capability that is required within FVSV services to support the workforce capability build. Finally, it highlights gaps in knowledge and research about FVSV in each community.

There is a lot of work happening to support the FVSV sector to increase workforce capability under Te Aorerekura Shift Three. This overarching theme of the Gaps Report is designed to build on existing work programmes by reflecting what gaps were heard from communities during engagement.

(All gaps noted in this table were identified by the FVSV sector, community groups, government agencies and/or existing published works. They are listed in no particular order).

Gaps in FVSV services workforce capability: (across all communities)

Through engagement we heard that most existing FVSV training is not sufficient for the FVSV services workforce to adequately understand how FVSV manifests in different ways, for different people. To adequately respond to the range of needs of people accessing their services, FVSV service workers need to better understand:

- what is required to deliver safe, effective, and appropriate support (for victims/survivors, people who use violence, and their families and whānau where safe and appropriate)
- the unique ways FVSV manifests in each of the identified communities
- the unique experiences and support needs of people with intersecting identities
- the impact of Aotearoa New Zealand's history on tangata whenua and Pacific peoples, including the intergenerational impacts of colonisation and institutional racism
- court processes and how the judicial system can retraumatise those who go through it
- dispelling harmful stereotypes and concepts
- what specialist supports and networks are available for their clients, (while also building their organisation's capability to support tangata whenua and people from diverse communities).

Justice Workforce

Gaps specific to the Justice workforce, including Judges and Police, and those working in the Court and pre-Court system (e.g., mediation).

- Need to increase the capability of workers in the Justice system to recognise and appropriately/safely respond to FVSV. This upskilling needs to ensure the justice workforce understands how tangata whenua and diverse communities experience FVSV and experience the justice system (beyond standard frontline FVSV training). This includes:
 - understanding the dynamics of FVSV, including coercive control and how the justice system can be used by people who use violence to abuse victims/survivors of FVSV, and how to respond,
 - understanding how to work with LGBTQIA+ communities, including knowledge of pronouns and rainbow terminology (especially Police during family harm callouts and in custodial settings),
 - understanding the nature and impact of FVSV on children, and how to include and give weight to the voice of the child in justice services and processes,
 - understanding the nature and impact of FVSV on disabled people, and how they should be supported in both justice processes and services. Disabled people are often not seen as credible and experience barriers in the justice system after experiencing FVSV.
 - specialist training as appropriate to reflect the need to understand and engage with forensic or other highly specialised content,
 - understanding when is appropriate and safe to offer restorative justice for FVSV cases, and when FVSV specialist involvement is required,
 - improved capability of Police to support LGBTQIA+ community after assault. This includes ensuring Police have a positive social response that upholds dignity and enhances mana.

Organisational capability – Policies and procedures in the justice system

- Need policies and processes that improve the safety for LGBTQIA+ people who use violence in custodial facilities, particularly trans and gender diverse people, both for the safety of people who use violence and because the knowledge of this mistreatment in victims/survivors and a desire to protect them can be a barrier to disclosing FVSV.
- FVSV services need safe/trusted processes for FVSV children’s specialists to collect and represent the views of C&YP within the courts.
- Supervised access providers need to be aware of specific safety concerns for C&YP, and to ensure that supervised access to C&YP by people who use violence focusses wider than physical violence and includes psychological and emotional abuse. There needs to be clear processes to routinely report on any concerning behaviours of visiting parents, so this information can be considered in any future court proceedings.

Children and Young People (C&YP)

- Need improved education and training for FVSV specialists supporting C&YP to recognise the signs of FVSV and provide early support and intervention, including:
 - increased understanding of child sexual exploitation, and online sexual harm,
 - understanding the specific needs for LGBTQIA+ C&YP around: conversion therapy practices; heightened risk of child FVSV; services for trans C&YP who may not have parental support; the need for confidential support to avoid ‘outing’ of C&YP to whānau; and displacement from whānau if outed/come out.
- Ensuring workers believe and safely respond to the disclosures of C&YP (remove communication and credibility barriers).
- Ensuring care given to C&YP removed from situations of FVSV is safe for diverse C&YP (e.g., LGBTQIA+ C&YP who are placed with faith-based carers may be at risk).
- Understanding the different dynamics of FVSV in C&YP (e.g., IPV in teen relationships, sibling to sibling violence).

Organisational capability to support C&YP

- All services need to be easily accessible to C&YP, including to ensure they:
 - do not require input/consent from parents/caregivers, and carefully manage privacy/consent where children do not want to involve parents/caregivers,
 - consider transport for C&YP to attend the service without relying on parental support (e.g., services could be located near schools and kura),
 - can be accessed anonymously by C&YP.

Knowledge and research gaps

- Lack of understanding of:
 - adolescent to parent/grandparent/caregiver FVSV, especially within NZ. Further research in this area will help to address the safety needs of those supporting C&YP,
 - FVSV by disabled C&YP, including those with foetal alcohol spectrum disorder,
 - sibling to sibling FVSV.
- Gaps in research on conversion therapy and connection to FV, towards LGBTQIA+ C&YP.
- Lack of research on C&YP sexual exploitation, survival sex, and domestic trafficking in Aotearoa.

Tangata Whenua

- Need to build capability to understand and respond to FVSV complexities for Māori, including the intergenerational impacts of colonisation and institutional racism.
 - Negative biases toward whānau Māori fosters cycles of intergenerational distrust of helping systems.
- Need to build cultural capability within mainstream services to ensure they are culturally accessible for Māori. This includes increasing understanding of Te Ao Māori and Te Reo Māori and exploring ways it can be incorporated into practice.
- Understanding of Māori frameworks on sexual violation.
- Recognition of specialist tikanga and tohunga knowledge held by indigenous practitioners within services.

Organisational capability to support tangata whenua

- Services need to understand and respond to Māori preferences for healing and hohou te rongō.

People who use violence

- FVSV workforce needs increased capability to support diverse people who use violence (including how to support trans and non-binary people).
- Consistent formalised training is needed to ensure FVSV practitioners aren't using inconsistent and inappropriate language or acting under misinformation.
- Need training for FV specialists to respond to people using SV, especially as a form of FV.
- Need better support for people using FVSV against older people (often overlooked).

Knowledge and research gaps

- Limited understanding of:
 - the most effective intervention points in the life of people who use violence,
 - the effectiveness/impact of services for people who use violence; and online treatment/therapy.

Disabled People

- Need to build capability to understand and support disabled people (including for family carers), e.g., understanding of violence used against or by disabled people, ableism and 'othering' that disabled people experience. This includes:
 - disability responsiveness training for mainstream workforce, and specialist FVSV training for disability support providers,
 - better understanding of Safeguarding Adults from Abuse (SAFA) and of who is an adult at risk,
 - understanding the high rates of disabled people who identify as LGBTQIA+ and the potential for FVSV for disabled people when coming out.
- Need recognition of FVSV arising from lack of disability support and the importance of delivering effective disability related support to prevent and respond to FVSV in this context.
- Ability to deliver support in ways that are accessible to those who are neurodivergent.
- Better processes and capability to identify disabled people; and for disabled people to self-identify. Many disabled people won't identify unprompted or feel that self-identifying will lead to discrimination.
- There needs to be better risk identification for disabled people within family and whānau environments.

Organisational capability to support disabled people

- Need fully accessible* FVSV services for disabled people, including accessible information on available FVSV supports and services, legal rights, and processes, and reporting and complaints processes.
 - Information and reporting/complaints processes need to be designed for specific disability groups e.g., learning/intellectually disabled, blind/low vision, deaf etc. It is not simply translating existing information and systems.

*Note that accessibility is not limited to physical accessibility. An accessible service is one that is respectful and does not put up any barriers to those who need to access that service (whether physical, attitudinal, technological, or cultural) that would prevent a disabled person from effective engagement with supports.

Knowledge and research gaps

Limited knowledge of:

- FVSV in the disability community and the impacts of FVSV (for carers and the disabled person),
- what interventions are effective for disabled people who have experienced FVSV (noting that there are very few interventions available to evaluate),
- the violence committed by people, including C&YP, with impairments like foetal alcohol spectrum disorder,
- the rates of FVSV in the disabled community. There is often undercounting because of a lack of appropriate data/information collection (making it difficult to quantify the scale of the issue).

LGBTQIA+ People

- Need to build the capability of mainstream FVSV services to safely and appropriately support LGBTQIA+ victims/survivors, including:
 - understanding the unique experiences of FVSV by LGBTQIA+, how to assess risk, and how to ask appropriate questions about sexuality and gender, and questions which can capture violence unique to LGBTQIA+ people,
 - providing ongoing training to keep up to date with LGBTQIA+ issues and language,
 - capability to prevent binary gendered responses and re-traumatisation of LGBTQIA+ victims,
 - improved understanding of the trauma caused by conversion practices, and alienation from whānau/community,
 - supporting the workforce of mainstream services to create a ‘community of practice’,
 - recognising that Rainbow people can experience abuse from ‘community leaders’.

Organisational capability to support LGBTQIA+

- Need public information on available resources and services, including those specific to trans and non-binary people. Includes information on LGBTQIA+ accessible safe houses, and gender segregated FVSV services.
- Mainstream FVSV services have policies and procedures to explicitly address bias and fully embed responses to LGBTQIA+ people instead of this being an add-on to business as usual (which imbues cisgender and heterosexual norms).
- Screening tools that are inclusive of LGBTQIA+ identities.

Knowledge gaps

- Limited knowledge of FVSV in LGBTQIA+ communities, especially research carried out by trans

people (research by non-trans researchers can be actively harmful to trans people). Need research into:

- bisexual+ peoples' consistently high rates of SV,
 - FVSV towards LGBTQIA+ men and gender minorities,
 - people living with HIV and FVSV,
 - chem-sex environments (sex between people under the influence of drugs) and coercion and consent,
 - abuse through conversion practices,
 - identity erasure within healthcare and residential settings.
- Specific underrepresentation for those with intersecting identities and needs, including:
 - trans people/irawhiti,
 - takatāpui,
 - migrants and former refugees,
 - refugees and asylum seekers,
 - older people,
 - MVPFAFF/Pacific peoples,
 - intersex people,
 - disabled people.

Older People

Need to build capability to better understanding of:

- elder abuse and neglect and how this differs from other forms of FVSV,
- how to recognise and respond to abuse by Power of Attorney, caregivers, and in residential care facilities,
- abuse against older people with intersecting, identities (e.g., older disabled people (acknowledging the high rates of disability in older people); and older people who use violence (often overlooked).

Gang Whānau

- Need education for FVSV workers who support gang affiliated whānau to understand the distinct dynamics of life within gangs for victims/survivors, and safety after gangs.
- Need to understand the impact of colonisation and intergenerational trauma for both victims/survivors and people who use violence.

Ethnic Communities

Need to build capability to understand:

- what FVSV looks like in different ethnic communities,
 - the ethnic/faith/cultural lens and what is the norm/tradition in different cultures,
 - how to address racism and biases within FVSV services,
 - visas and the use of immigration status and visa sponsorship as a form of abuse and entrapment,
 - the high rates of disabled people from ethnic communities,
 - FVSV against men from ethnic communities.
- Need to understand and appropriately respond to taboo around FVSV and address structural and cultural factors influencing FVSV in ethnic communities, including the factors that inhibit access to services.
 - How to support victims/survivors as they navigate visa and immigration processes to leave a violent situation, including support to change visa status, Work and Income eligibility, gaining financial support in the interim while a FV work visa is in progress, and housing implications, especially for non-residents.

Organisational capability to support ethnic communities

- Services need accurate data collection, including specific ethnicity information (rather than aggregation, e.g., “Asian”).
- Services need to work closely with migrant and former refugee support agencies to promote the services within communities.
- Need increased availability of resources to support ethnic communities.
- Services should engage with community and faith-based leaders as they are relied on heavily for guidance/intervention in some cases. However, this needs to be done with careful consideration about whether this approach is appropriate and safe.
- Language barriers discourage help-seeking. Providing interpreter services can increase the accessibility of FVSV service providers to people from ethnic communities seeking support. Language interpreters also need to be advertised in a way that is accessible to ethnic communities, so that they are aware of the available services. FVSV resources need to be translated for ethnic communities.
- Need improved collaboration between mainstream FVSV providers and ethnic, migrant and refugee communities.

Knowledge and research gaps

- How FVSV manifests in and affects different ethnic communities. Specific knowledge gaps include:
 - ‘honour based’ violence,
 - dowry related abuse,
 - female genital mutilation,
 - control of visa/immigration status/finances,
 - intergenerational harm caused by harsh punishments and cycles of violence,
 - intersectional groups within ethnic communities.

Pacific Peoples

- Need increased workforce capability to understand the dynamics of FVSV in Pacific

communities, how to appropriately and safely respond/support and how to notice and respond to racism.

- Understand drivers impacting violence within Pacific communities e.g., Pacific peoples have the lowest median income of all people in Aotearoa, immigration status and the pressure of deportation.
- Better understanding of Pacific values and cultural practices, and how these may inform views on FVSV.

Organisational capability to support Pacific peoples

- Need flexible response and availability outside of typical 9 – 5 business hours to accommodate Pacific peoples.
- Information translated into different Pacific languages, with translators physically present when needed.
- Need increased availability of resources to support Pacific communities.
- Services should engage with community and faith-based leaders as they are relied on heavily for guidance/intervention in some cases. However, this needs to be done with careful consideration about whether this approach is appropriate and safe.

Knowledge and research gaps

- Lack of data and information on Pacific peoples' experience of FVSV.
- How to increase accessibility of mainstream services for Pacific peoples.
- Reasons for Pacific peoples' low levels of SV reporting.
- Recognition for existing and emerging practices tailored by and for Pacific communities that work especially unique cohort experiences with an intersectional lens.

Male Victims/survivors

- Lack of workforce capability to support male victims/survivors. Capability build should ensure there is no victim-blaming, minimising, or homophobia towards male victims/survivors.

Organisational capability to support male victims/survivors

- Services need greater visibility and inclusivity for male victims/survivors and to ensure they have a voice. This includes for all people who identify with the experience of “men” (e.g., trans men, intersex, and gender diverse people).
- Public information on available resources and services for male victims/survivors.

Knowledge and research gaps

- Lack of knowledge of incidence and perpetration of FVSV against boys and men, and the effectiveness of recovery services (this includes data on rates of FVSV)
 - Specific knowledge gap around trans men and gender minorities, and men with intersecting identities (e.g., takatāpui, irawhiti, intersex people, Tāngata whaikaha Māori).
 - The experience of FVSV victims/survivors living with HIV.

Gaps in holistic services (whānau-centred, wraparound support from early intervention to healing)

The FVSV system is not able to consistently provide holistic support to victims/survivors or people using violence, meaning there is:

- limited availability of Kaupapa Māori services providing a range of holistic support to people impacted by violence,
- insufficient consideration of the whānau context including how to involve whānau (where safe and appropriate) and support whānau need,
- insufficient wraparound support for wider need of victims/survivors and people who use violence beyond the FVSV sector (e.g., support for mental health and Alcohol and Other Drug (AOD) issues, and support through justice system processes),
- unequal access to support across the continuum of care (from early intervention through to long-term healing), including limited FVSV crisis and long-term healing support services; difficult and administratively burdensome processes for moving between services at different points in the continuum; and difficulty accessing follow-up support after exiting a service.

Work to address this gap reflects the Tokotoru model of Te Aorerekura. Expanding the reach and responsiveness of existing FVSV services to deliver holistic, whānau-centred, wraparound support that considers the whānau and other challenges that are faced alongside FVSV will support long-term restoration of mana, stability, and access to life opportunities free from the enduring and wide-reaching impacts of FVSV.

Addressing these gaps require changes to the way government contracts and funds FVSV services, as well as changes to the way services are delivered. This work will require collective focus and resource to build on work already underway to embed a holistic approach to FVSV support.

(All gaps noted in this table were identified by the FVSV sector, community groups, government agencies and/or existing published works. They are listed in no particular order).

Gaps in holistic services: (across all communities)

Holistic FVSV services means:

Whānau-centred support, including:

- considering the needs, available supports and risks for victims/survivors and people who use violence in the context of their whānau and wider community,
- support for the whānau to participate in the FVSV response,
- providing childcare for parents when needed to access FVSV services.

Wraparound support for victims/survivors, people who use violence, and their whānau or chosen family that meets wider needs beyond the FVSV itself. This includes:

- all services need to recognise the distinct forms of violence towards, the specific needs of, and deliver appropriate and effective support for, tangata whenua, people from diverse communities and people with intersecting needs,
- support for mental health and AOD issues. Currently those with mental health and AOD issues have more barriers to receiving FVSV support - those presenting with these issues may be turned away from FVSV services (despite increased vulnerability for these people) or only receive support relating to the FVSV (often because contracts are narrow in focus). This ignores the close relationship between mental health and AOD issues and FVSV, where one can drive or worsen the other (e.g., AOD usage to manage trauma from FVSV, or FVSV driven/worsened by mental health or AOD issues etc). Access to mental health, AOD and physical health services are more limited in rural/remote communities.
 - Wraparound support may be delivered via in-house support, bringing in specialists to FVSV services when required, established referral pathways, co-location of services, etc,
- enabling services to provide home visits where necessary (e.g., fear or anxiety prevents the victims/survivor leaving the home; transport issues; limited financial resources; fear of encountering the person; shame accessing the service). This can also enable whānau engagement.
- considering the impacts of insecure housing, poverty, and homelessness on FVSV and vice versa. Including easy/transparent support connecting to other government-funded services and processes.

Support across the continuum of care, from early intervention through to long-term healing.

- Need to enable services to provide support as early as possible and for this support to follow with people through to long term healing (either within the one service or through seamless referral pathways between services).
 - Early intervention and healing services are a particular gap. Safe and inclusive early intervention is necessary to effectively stop FVSV; longevity of service is necessary because the use of violence and the impacts of violence are long-lasting (particularly important for supporting C&YP across the lifespan).
 - There are barriers to easy referral/collaboration between services to ensure seamless support across the continuum (e.g., contract driven competition; time constraints preventing referrals where time taken to make referrals is unfunded; limited supports to enable networking between services to understand useful referral pathways or potential partnerships).
 - There are barriers to a single service delivering across the continuum of care.
 - Need easy access to follow up (top-up) support (visits/sessions/calls) if needed after someone has completed a programme or exited a service.

Clinical sexual assault services (providing forensic and non-forensic exams) are currently not funded to provide social work support or wraparound service support making it a clinical risk for both staff and survivors if other agencies don't have capacity or are not involved.

Disabled People

- Support for disability assessment when people (particularly C&YP) present to FVSV services with potential FASD, ADHD, autism, and other disabilities (to provide pathways for assessment and support)
- Better identification of risks within the family/whānau environment for disabled people experiencing FVSV.

Ethnic Communities

- Services should include long-term, wraparound support, including for families.
- Services need to facilitate intergenerational communication within the family to help implement culturally responsive and impactful interventions that will work.
- Services could connect with safe cultural advisors/supports in communities. This supports victims/survivors to connect with their community, or outside their own cultural group (where safe and appropriate).

Older People

- Need a 'one stop shop' with wraparound support for older people, including better access to services and navigation support.
- Need whānau-centred approaches (currently elder abuse considered an 'older person's issue'), including recognising FVSV from C&YP people towards older people.
- Needs to be able to offer (or refer to) support with issues wider than the FVSV, including:
 - Social connection
 - Cross generational whānau work
 - Common health and mental health concerns in older people.

Tangata Whenua

- Limited availability of Kaupapa Māori services that provide a range of holistic supports, from early intervention to long-term healing.
- Whānau should be supported to participate in FVSV support and healing.
- Use of iwi korero in FVSV response.

Male Victims/survivors

- Services need holistic support for the experiences of people who are both victims/survivors, and people who use violence.

Justice system related services

- There is a need for improved wraparound supports for people engaging with justice processes to increase their understanding of court processes and their agency through the system. This includes the need for:
 - more FV and SV court support,
 - strengthened advocacy services for victims/survivors (particularly C&YP),
 - wraparound support for dependent children when charging and prosecuting sole parents through the court system,
 - effective referrals to safety and healing FVSV services,
 - identifying and meeting the needs of people and their whānau when they are subject to statutory decisions,
 - services that can support Māori and whānau who are engaging with justice system processes.
 - awyer for Child (or child advocate) should be interacting with the whole whānau and strengthening the voice of the child through court processes (and through Family Dispute Resolution).
- Information and support regarding protection orders, both:
 - helping people to access them and what they mean for the person who has been issued one to prevent them being breached,
 - and more options for restorative justice processes for people who use violence and victims/survivors (where safe, appropriate, and healing for victims/survivors), especially Kaupapa Māori, holistic healing approaches.
- Kaupapa Māori support for tamariki/rangatahi and to ensure evidential and diagnostic interviews can be conducted in te reo Māori (primarily required in SV cases).

Children and Young People (C&YP)

- Lack of holistic services from early intervention through to long-term healing, including:
 - in early intervention (services mostly provide support after violence occurs). Need to include ‘C&YP at risk of FVSV’ so services can work with people as early as possible.
 - in long-term healing services that ensure aftercare for children who have experienced FVSV.
- All services need to take a holistic approach by considering the child within the context of their family or whānau; what parental support is required (including for mātua taiohi/young parents); supporting intergenerational communication to understand FVSV; highlighting the unique needs of the whānau; understanding the impact FVSV experienced by parents has on their parenting of C&YP.
- All services need to offer wrap around support, including for education and mental health needs or alcohol and drug (AOD) issues (for the C&YP but also within their whānau).
- All child survivors of a fatal FV homicide and their family/whānau should continue to receive support from the appropriate service until a clear pathway for their ongoing care can be established and the children have been shown to be making good progress in their physical and mental health and in their educational progress in their new care situation.
 - Supports and services need to continue even if C&YP relocate.

People who use violence

- Existing mandated services are short-term and time-limited (people often can’t access a programme prior to a mandate or repeat a programme if needed). Need access to ongoing, long-term support from crisis to healing.
- Lack of early intervention and prevention services, expanding to include ‘people at risk of using violence’ so services can work with people as early as possible.
- Need more wrap around, holistic support that includes:
 - the wider whānau (existing services focus on people who use violence),
 - services grounded in whānau and community connections and include indigenous methods/Kaupapa Māori approaches,
 - trauma-informed support services for mental health and AOD issues,
 - for people who use violence straight out of Court and prisons, including working with whānau,
 - parenting programmes, mentoring and peer support,
 - improved accessibility for couples counselling, where appropriate.
- Services for people who use violence need holistic support for the experiences of people who are both victims/survivors, and users of violence (both SV and FV), including understanding when the primary victim-survivor of FV retaliates and is subsequently identified as the aggressor.

LGBTQIA+ People

- Services should include whānau/chosen family of LGBTQIA+ to prevent FV (where safe and appropriate), including views around inclusion in Te Ao Māori.
- Services should engage faith-based leaders (where safe and appropriate) if communities use these for guidance/intervention.

Pacific Peoples

- Mainstream services need to put the family at the centre of support for Pacific victims/survivors and people who use violence.
- Services need holistic policies and practices and provide wrap around support, that puts the family at the centre, and responds to the diversity of Pacific cultures and across generations.
- FVSV services need to recognise faith as an important part of wellbeing for some Pacific communities, but also create safe support and services for Pacific peoples who aren't linked to a church.

Gaps in sexual violence services

There are insufficient sexual violence (SV) services available nationally. Gaps exist in crisis support, support to navigate the criminal justice system, support beyond crisis and in long-term care and recovery through, or outside of, Integrated Services for Sensitive Claims (ISSC). There is also limited availability of support for people with concerning sexual ideation or services to address harmful sexual behaviour.

(All gaps noted in this table were identified by the FVSV sector, community groups, government agencies and/or existing published works. They are listed in no particular order).

Gaps in sexual violence services: (across all communities)

- In crisis, there is a shortage of Sexual Assault Assessment and Treatment Services (SAATS) compared to the need.
- A lack of funded SV support for children and young people (C&YP), tangata whenua and diverse communities (including LGBTQIA+, Pacific peoples, and ethnic communities).
- Limited support for people participating in SV criminal justice processes, including:
 - Need better geographical coverage of court support services.
 - No court support services currently available for children.
 - Legal advocacy and support for victims/survivors is not currently funded, meaning they are not fully supported to use legal tools which might support their participation in the criminal justice system.
- There is limited support for services who may take SV disclosures as part of other services, such as FV programmes.
- There is a gap between crisis and long-term support delivered through the Accident Compensation Corporation's (ACC) ISSC. The ISSC isn't the right approach for all victims/survivors. Some don't want to undergo the assessment requirements and don't want a mental health diagnosis. There are no medium-term SV services to support these victims/survivors.
- There are also long waitlists for ACC counsellors and for SV crisis services providers (some are currently not taking referrals). There is also a gap in interim services available for victims/survivors during this wait time.
- There is untapped demand for more services that support people seeking help for concerning sexual ideation or to address harmful sexual behaviour.
- Services need to understand the impact of online sexual harm, as well as how pornographic material can affect sexual behaviours (especially among C&YP).

Male Victims/survivors

- Lack of services for those outside of older men who have experienced childhood sexual abuse (service gaps need scoping for other cohorts e.g., LGBTQIA+, younger men, disabled boys, and men, etc).
- Need for professional referral services across the country to support male children (under the age of 18) who are victims/survivors of SV.
- Need services that will provide support for males who are both victims/survivors and users of SV (i.e., will address both experiences in a trauma-informed way).

Tangata Whenua

- Limited availability of Kaupapa Māori services that provide a range of holistic supports, from early intervention to long-term healing.
- Need SV services that understand Māori frameworks and violation of whakapapa.

People who use violence

- Need more services for harmful sexual behaviour and concerning sexual ideation. There are geographical gaps in the delivery of these services.
- Services that recognise the impact that pornographic material can have on sexual behaviours, especially among C&YP.

Children and Young People (C&YP)

- Need holistic SV services from crisis to medium-term to long-term healing for C&YP and their whānau.
 - Significant shortage of government funded SV crisis support services for C&YP aged 17 and under.
 - Early SV assessment and support needed to enable healing to begin as early as possible.
 - Lack of medium term/long term healing SV services for C&YP (especially in rural communities). ACC ISSC system currently has long waitlists and requires a mental health diagnosis. Additionally, ACC's ISSC may not be the best approach for all C&YP but there are very few other types of SV support. Where SV services are unavailable there is a reliance on the overstretched ACC ISSC service.
- Providers of adult services sometimes support 16 – 18-year-olds who can consent to service, but this support is done without funding and only where individual services have the competence and capacity to provide it.
- Lack of medical (forensic and non-forensic) sexual assault services for C&YP and those that exist are poorly supported within the paediatric community, and do not include wraparound social work supports.
- SV court support for C&YP is limited and is currently delivered without specific funding.
- Large geographical gaps in SV services for C&YP.
- Need online support for SV for C&YP.
- Threatening to publish sexual information, photos, or videos of C&YP ('Sextortion') and online/image-based SV is a growing problem, especially for youth. ACC is currently unable to fund support for these victims/survivors as legislation does not cover this.

Ethnic Communities

- People cannot access ACC support if they've experienced SV overseas and are not residents of New Zealand.

Pacific Peoples

- Need for Pacific dedicated SV services that provide tailored responses drawing on Pacific cultural frameworks.

Disabled People

- Limited SV support for disabled people, particularly people with intellectual disabilities.
- Build the capability of SAATS so that they can better understand and support the needs of disabled people.

Gaps in the accessibility of safe houses and availability of emergency accommodation

There are a lack of safe houses and emergency accommodation available for people experiencing family violence and sexual violence (FVSV). This is especially the case for victims/survivors who are disabled, gang-affiliated, dealing with complex issues, or part of diverse communities. This means victims/survivors often must remain in, or return to, dangerous situations.

There is also limited emergency housing for people who use violence with a Police Safety Order (PSO) or Protection Order (PO) in place, or no options for people who use violence to leave the home. This drives:

- victims/survivors to leave the home instead,
- people who use violence into rough sleeping,
- people who use violence to return to the house and breach the PSO/PO, which may mean they are taken into custody.

(All gaps noted in this table were identified by the FVSV sector, community groups, government agencies and/or existing published works. They are listed in no particular order).

Gaps in safe houses and emergency accommodation: (across all communities)

- There is often no access to emergency accommodation/safe housing for victims/survivors with:
 - mental health challenges,
 - alcohol and other drug dependencies,
 - disabilities*,
 - sons over the age of 14, or
 - pets.
- Limited dedicated support for children and young people in safe houses/emergency accommodation.
- Often no access to emergency accommodation for non-residents.
- Often no access to safe and responsive emergency accommodation/safe housing for transgender, non-binary, and LGBTQIA+ people.
- Lack of accessible safe housing for male victims/survivors (including trans men).
- Lack of appropriate safe housing for people who experience elder abuse.
- Lack of emergency accommodation/safe housing for victims/survivors and people who use violence released from prison.

- Need more emergency housing for people who use violence to increase their ability to leave the home instead of the victims/survivor and to give opportunities for delivery of wrap-around support (particularly when PSOs are issued).
- Victims/survivors with gang connections struggle to access safe houses and emergency accommodation. People with gang affiliations experiencing FVSV have specific housing needs because of the high level of danger they experience, including relocation of themselves and their whānau, possibly overseas.
- Lack of emergency accommodation in rural communities, sometimes requiring victims/survivors to move out of their communities to escape FVSV.

*Note that accessibility for disabled people is not limited to physical accessibility. An accessible service is one that is respectful and does not put up any barriers to those who need to access that service (whether physical, attitudinal, technological, or cultural) that would prevent a disabled person from effective engagement with supports.

New services tailored for tangata whenua and people from diverse communities

The Gaps Report considers gaps in mainstream family violence and sexual violence (FVSV) services as well as gaps that require new services tailored for tangata whenua and diverse communities.

Phase One of the Gaps Report focusses on improving the ability of existing FVSV services to support tangata whenua and people from diverse communities, while Phase Two focusses on developing new services tailored to the unique needs and experiences of these specific communities. Work on Phase One will inform Phase Two, as our understanding of any remaining service gaps experienced by these groups will guide effective and targeted development of tailored services. For example, existing services can become more accessible, safe, and effective for LGBTQIA+ people, but there will still be a need for services which are designed with the sole focus of supporting the unique needs and experiences of the LGBTQIA+ community.

It will be important that any new services provide holistic, whānau-centred, wraparound support, which is a focus of Phase One of the Gaps Report.

(All gaps noted in this table were identified by the FVSV sector, community groups, government agencies and/or existing published works. They are listed in no particular order).

Gaps in tailored services: (across all communities)

- Lack of FVSV services tailored specifically to support tangata whenua and diverse communities, especially in rural communities.
- Tailored services need to provide holistic, wrap around support that meets the full needs of victims/survivors, people who use violence and their whānau or chosen family, including trauma-informed support services for mental health and alcohol and drug issues (continuing the shift in existing services towards delivering holistic support driven in phase one of the Gaps Report).
- All services need to recognise distinct forms of violence towards, specific needs of, and deliver appropriate and effective support for, diverse people and communities with intersecting needs. Resources and information developed in the workforce capability programme will support an intersectional approach in any new tailored services.

Children and Young People (C&YP)

- Lack of FVSV services and supports for C&YP, especially in rural communities. Adult services may extend support to 16–18-year-olds where they can consent to service, but do not receive additional funding for this work. Services need support around:
 - FVSV in teenage relationships,
 - sibling to sibling FVSV,
 - C&YP using FVSV.
- Lack of services that allow for youth peer support, and services by C&YP for C&YP.

- All services need to be easily accessible to C&YP, including to ensure they:
 - do not require input/consent from parents/caregivers, and carefully manage privacy/consent where children do not want to involve parents/caregivers,
 - consider transport for C&YP to attend the service without relying on parental support (Services could be located near schools and kura),
 - can be accessed anonymously by C&YP.
- All child survivors of a fatal FV homicide should have access to assessment and support services as outlined in the Children’s Action Plan. These vulnerable children and their family/whānau should continue to receive support from the appropriate service until a clear pathway for their ongoing care can be established and the children have been shown to be making good progress in their physical and mental health and in their educational progress in their new care situation. Supports and services need to continue even if C&YP relocate.
- Lack of services for parents (to drive support for C&YP), including:
 - parenting support specifically for parents who use violence and parents experiencing FVSV,
 - respite care for parents/grandparents/caregivers facing FVSV from C&YP,
 - de-escalation processes beyond those based on management of (actual or potential) aggression.

Disabled People

- Need fully accessible* FVSV services for disabled people, including accessible information on available FVSV supports and services, legal rights, and processes, and reporting and complaints processes.
 - Information and reporting/complaints processes need to be designed for specific disability groups (e.g., learning/intellectually disabled, blind/low vision, Deaf etc. It is not simply translating existing information and systems).
- Tailored services need to ensure they’re designed with a Te Ao Māori lens to support Tāngata whaikaha Māori.
- Lack of systems and protection for disabled people who experience FVSV from family carers or employed carers.
- There is a need for FVSV support for people with severe learning disabilities (talk therapy is less effective).

*Note that accessibility is not limited to physical accessibility. An accessible service is one that is respectful and does not put up any barriers to those who need to access that service (whether physical, attitudinal, technological, or cultural) that would prevent a disabled person from effective engagement with supports.

Ethnic Communities

- Need culturally and linguistically appropriate services (beyond reshaping mainstream services).
- Tailored services need:
 - accurate data collection, including specific ethnicity information (rather than aggregation, e.g., “Asian”),
 - to work closely with migrant and former refugee support agencies to promote the services within communities.

- Need to deliver support to victims/survivors where they must navigate visa and immigration processes to leave a violent situation, including support to change visa status, Work and Income eligibility, gaining financial support in the interim while a FV work visa is in progress, and housing implications etc, especially for non-residents.
- Services should engage with community and faith-based leaders (with careful consideration of whether this is appropriate and safe) as they are relied on heavily for guidance/intervention in some cases.
- Lack of ethnic providers who work with ethnic, migrant and refugee C&YP
 - Many C&YP migrant and refugee backgrounds don't report violence (e.g., because of an acceptance of violence as a cultural norm/tradition, dependence on violent caregivers, lack of trusted adults/geographically separated from trusted adults).

People who use violence

- Need more non-mandated services to reduce waitlists.
- Lack of services for people perpetrating elder abuse.
- Lack of specialised services for gang affiliated people who use violence.
- Existing services for people who use violence are one size fits all, tailored services must acknowledge their intersecting identities.

Gang Whānau

- The levels of trauma and danger, the long-term and chronic nature of the abuse issues, and the multiple intersections of disadvantage experienced by those with gang affiliations, make it unlikely that mainstream programmes are accessible or effective.
- Need programmes that support gang whānau to live free from violence (including by gang whānau, for gang whānau). These programmes need to be specific to the needs and experiences of those who have been abused by partners who are gang members or where there has been gang violence.
- Alternative pathways and processes are needed for those with gang affiliations to be able to access supports that sit outside of the current mainstream system; there needs to be an ability to work swiftly and in ways which take gang affiliations into account.
- Support is needed for people with gang connections who use, or are victims of, FVSV, including men and C&YP.

LGBTQIA+ People

- Significant need for tailored LGBTQIA+ FVSV services so that Rainbow people can access services focussed beyond cisgender heterosexual norms. This is required in both urban and rural regions.
- Tailored services for people who use violence, including non- LGBTQIA+ people using violence against LGBTQIA+ people.
- Existing LGBTQIA+ organisations are poorly resourced but are still working to support LGBTQIA+ people who experience violence.
- Need advocates/navigators for LGBTQIA+ victims/survivors.

Male Victims/survivors

- Men need to know what services are available and those services need to be accessible and inclusive.
- Need face-to-face FV services specifically for male victims/survivors, as only digital/phone support is currently available. This includes for all people who identify with the experience of “men” (e.g., trans men, intersex people, and gender diverse people).

Tangata Whenua

- Shortage of Kaupapa Māori supports and services that provide effective Māori practice models (including from early intervention to long-term healing). Those that exist have stretched capacity to work with their communities.
- Need services that give resource and decision-making power for iwi to support their own communities.
- All services should build cultural capital alongside therapeutic and healing services/programmes for whānau Māori.
- Māori legal services to support whānau going through legal system.
- Services which use Te Reo Māori for interviewing tamariki/rangatahi.
- Need Te Ao Māori-centred responses to tangata whenua survivors of state and faith-based institutionalised abuse.

Older People

- Lack of elder abuse supports available, including services that understand legal protections (e.g., Enduring Power of Attorney). Information needs to be available in accessible formats and locations, and to reflect cultural/linguistic diversity.
- Residential care facilities (rest homes) can be places of FVSV. There is a need for more services/advocates to support and remove victims/survivors from these situations.
- Lack of services that have cultural/linguistic diversity and may not be safe or appropriate for diverse older communities (e.g., tangata whenua, Pacific, LGBTQIA+, disabled and culturally and linguistically diverse communities).

Pacific Peoples

- Lack of culturally responsive resources and services for Pacific families and communities. Can include service development but also recognising and resourcing community-led initiatives to upscale.
- Tailored services need a flexible response and availability outside of typical 9 – 5 business hours to accommodate Pacific people.
- Information translated into different Pacific languages, with translators physically present when needed.
- Talanoa groups for fathers and mothers, mobilised through church (where safe and appropriate) and communities.
- Recognition that Pacific services may not be accessed due to confidentiality concerns, especially among smaller Pacific nations.



**MINISTRY OF SOCIAL
DEVELOPMENT**

TE MANATŪ WHAKAHIATO ORA