

Domestic and Family Violence Protection and Other Legislation Amendment Bill 2025

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Domestic and Family Violence Protection and Other Legislation Amendment Bill 2025

**PeakCare's Submission to the Education,
Arts and Communities Committee**

30 May 2025

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INTRODUCTION

PeakCare Queensland welcomes the opportunity to provide a submission to the Education, Arts and Communities Committee on the Domestic and Family Violence Protection and Other Legislation Amendment Bill 2025 (the Bill).

As the state's peak body for the child and family sector, PeakCare advocates for systemic reforms that uphold the safety, wellbeing, and rights of children and young people. While the primary intent of the Bill is to enhance the responsiveness and efficiency of police in domestic and family violence (DFV) matters, it also introduces legislative and operational changes with implications for children and young people.

This submission approaches the Bill through a child protection lens, with a particular focus on how Police Protection Directions (PPDs) will interact with existing legal and information sharing frameworks, namely family law and child protection proceedings. PeakCare supports initiatives that enable police to play an active role in the protection of children and young people, particularly where timely intervention is needed to prevent harm. Police are often the first responders in crisis situations involving DFV, and their ability to identify and act on child safety concerns is an essential component of Queensland's broader child protection system. Reforms that strengthen police capacity to recognise risk, respond in trauma-informed ways, and collaborate with child protection and family support services are welcomed.

Children and families frequently navigate multiple systems, such as police, courts, child protection services, and family law, and it is at the intersection of these systems that confusion, risk, and missed opportunities for protection often occur. This submission aims to highlight the need for legislative reform to strengthen these intersections, rather than further complicating them, and that children's safety is not treated as incidental to DFV policy but recognised as central to it.

ABOUT PEAKCARE

PeakCare is a not-for-profit peak body for child and family services in Queensland, providing an independent voice representing and promoting matters of interest to the non-government sector. Across Queensland, PeakCare represents small, medium, and large local, state-wide and national non-government organisations which provide prevention and early intervention, generic, targeted, and intensive family support to children, young people, families, and communities. Member organisations also provide child protection services, foster care, kinship care and residential care for children and young people who are at risk of entry to, or who are in the statutory child protection system and youth justice systems.

A large network of associate members and supporters also subscribe to PeakCare. This includes individuals with an interest in child protection, youth justice and related services, and who are supportive of PeakCare's policy platform around the rights and entitlements of children, young people and their families to safety, wellbeing, and equitable access to life opportunities.

PEAKCARE'S SUBMISSION

Recognising children as victims of DFV in their own right, not just witnesses

The Australian Child Maltreatment Study (ACMS)¹ identified exposure to domestic violence (39.6%) as the most common form of maltreatment experienced by Australian children. These

¹ [The prevalence and impact of child maltreatment in Australia: Findings from the Australian Child Maltreatment Study: 2023 Brief Report - The Australian Child Maltreatment Study \(ACMS\)](#)

findings reinforce what has long been understood by the child protection sector: that witnessing or being exposed to DFV constitutes a serious risk to a child's psychological, emotional, and physical wellbeing.²

PeakCare affirms the Queensland Government's recent policy shift to recognise DFV as a formal risk factor within the child protection framework, a national first. This recognition brings Queensland closer to a unified understanding that children exposed to violence in the home are not simply observers, but victims in their own right. It also highlights the importance of ensuring that DFV related interventions are designed with children's developmental needs and safety in mind.

"I had a school friend come over and she asked, 'why is your dad bashing your mum?' I told her 'they're just fighting'. It was normal for me but she hadn't seen that before."

– Young Queensland victim-survivor of domestic and family violence

PeakCare welcomes the provision within the Bill which allows police to name children in a PPD for the purpose of protecting them from associated or exposed DFV. This approach aligns with established child protection practice that recognises exposure to violence as a form of harm. It also reflects a growing shift toward ensuring children's needs are visible within DFV intervention systems, even when they are not direct parties to an incident.

While this safeguard is appropriate in principle, children who are not present at the time of the DFV incident may not be named in the PPD, even if they are part of the affected household or likely to be impacted. Without protocols to proactively consider the broader family context, there is a risk that children fall through the cracks, remaining invisible to police and unrecognised by child protection systems unless a formal report is made. A child who witnesses violence, even if not physically harmed or present at the time of police intervention, may experience significant emotional, psychological, and developmental harm. Yet without being named on a PPD or explicitly referred to Child Safety, that child may remain invisible to protective systems. This risk is mitigated by current practice under Police Protection Notices (PPNs), which are subject to court oversight. In those instances, magistrates may choose to name children on a domestic violence order, even if they were not initially identified by police or by the aggrieved, providing an additional safeguard that the PPD model does not currently replicate.³

Overlapping systems and fragmented responses

Families experiencing DFV frequently engage with multiple service systems, including police, child protection, family law courts, and community-based supports. Each of these systems operates under its own legislation, professional lens, and risk assessment frameworks. While this reflects the complexity of DFV, it also creates significant risks when coordination is poor or when legislative instruments are misunderstood or misapplied.

The introduction of PPDs adds a new layer of complexity to an already fragmented environment. While the Bill attempts to account for potential conflicts by excluding PPDs where active family law or child protection orders exist, the mechanism for identifying these conflicts relies entirely on

² [Research summary: The impacts of domestic and family violence on children \(2nd ed.\) - ANROWS - Australia's National Research Organisation for Women's Safety](#)

³ [Applying for a domestic violence order | Queensland Courts](#)

disclosure by the parties at the time of the incident. In moments of crisis, when trauma responses are active and information is often partial or withheld, this approach is unreliable. This differs from current practice, where following police issuing of a PPN, courts will consider the overlay of existing orders prior to issuing a Domestic Violence Order (DVO). The practical result is that families, police, and even professionals can be unsure whose authority governs decision-making, creating confusion, delayed responses, or actions that unintentionally breach existing court orders. The following fictional case study illustrates how the intersection of police-issued orders, family law arrangements, and child protection responsibilities can result in critical gaps in protection for children and young people.

Scenario: Aidan's Experience

Aidan is a nine-year-old boy who lives with his mother under a Child Protection Directive Order. His father is permitted supervised contact under a Family Law Court parenting order, following previous concerns about Aidan's exposure to DFV.

When Aidan's mother arrives to collect him from a scheduled contact visit at the father's home, an argument escalates between Aidan's father and mother. Aidan is present and becomes visibly distressed, retreating to another room. A neighbour calls the police, concerned about yelling and a child in distress.

When police arrive, they separate the parties and assess the situation. Aidan, though unharmed, has clearly witnessed the incident and shows signs of fear. His father attempts to downplay the situation. The mother also minimises the conflict and does not disclose the existing child protection directive order.

The responding officers determine that a PPD is warranted. They issue the direction against the father with standard conditions. They also name Aidan on the PPD as a protected person, given his presence and observed distress during the incident.

Before the officer leaves, Aidan's father asks, "So as long as I don't start any arguments or act aggressively, I can see Aidan, right?" The attending officer, unaware of the existing Family Law Court parenting order, confirms this general summary. The father interprets the PPD as overriding the court-ordered contact schedule, including his supervised visitation rights.

The next week, assuming the PPD allows contact with Aidan to resume once things "cool down," the father contacts the mother to arrange a visit. The mother, equally unclear about the implications of the PPD versus the Family Law Order, agrees. The visit proceeds without proper oversight and outside of the existing court-ordered contact schedule.

Key takeaways:

- Police discretion can be undermined by limited system visibility: Without access to family law or child protection records, officers may unintentionally provide advice that conflicts with existing legal orders.
- Lack of disclosure at the scene limits protective action: Parents may withhold or minimise information due to fear, confusion, or trauma responses, further hindering accurate assessment and risk identification.
- Legal hierarchies are unclear to families and frontline responders: Both the father and mother misinterpreted the authority of the PPD in relation to the Family Law Court order, leading to a breach of supervised contact conditions.
- System gaps result in uncoordinated responses: No agency was alerted to review the parenting or safety arrangements, despite the presence of a named child and observed distress—demonstrating how children can fall through procedural cracks.

- PPDs lack built-in mechanisms for oversight and cross-agency notification: Unlike Police Protection Notices that proceed to court, PPDs do not guarantee judicial review or trigger multi-agency responses.

Police discretion and misidentification

The Commission of Inquiry into Queensland Police Service Responses to Domestic and Family Violence (the Commission) found issues with police misidentification, highlighting entrenched biases, inconsistent risk assessments, and inadequate cultural competency.⁴ These findings are particularly relevant to the proposed PPD model, which places significant reliance on police discretion at the point of crisis.

PeakCare affirms the concerns raised in the Bill's explanatory notes regarding the severe and lasting consequences of misidentification, including criminalisation, trauma, and reputational damage. However, the proposed safeguard, preventing a PPD from being issued when both parties appear in need of protection, and when a primary person cannot be clearly identified, relies heavily on the discretionary judgment of officers. These decisions are often made in high-pressure environments, with limited information and without the benefit of trauma-informed and cultural expertise.

PPDs are designed to save police time and do not prioritise the safety and wellbeing of victim-survivors. Continued misidentification of the person who is most in need of protection at DFV incidents means victim-survivors will be left without protection.

Embedding cross-system collaboration in practice

As highlighted by Hetty Johnston, Founder and Chair of Bravehearts and other child safety advocates, the absence of coordinated, cross-system responses to DFV can result in children falling through the gaps between police, family law courts, and child protection agencies.⁵ These blind spots, often caused by poor information-sharing, unclear legislative hierarchies, and inconsistent understanding of legal obligations, leave children exposed to risk without any single system assuming responsibility for their protection. When no agency holds the full picture, decisions that appear procedurally correct can still produce harmful or even catastrophic outcomes for children and their families. The introduction of PPDs adds another layer of complexity that, without robust safeguards and integrated practice protocols, risks replicating and widening these long-standing systemic failures.

The need for collaborative, system-wide responses to protect children is not a new issue and has been repeatedly highlighted in major reviews of Queensland's child protection system. Both the Queensland Child Protection Commission of Inquiry (Taking Responsibility: A Road Map for Queensland Child Protection) and the Royal Commission into Institutional Responses to Child Sexual Abuse identified persistent barriers to effective information sharing, including legislative constraints, policy silos, practice inconsistencies, and organisational cultures.^{6,7} These inquiries reaffirmed that timely and appropriate information sharing is essential to ensuring children and families receive coordinated, responsive support. In the context of PPDs, these findings reinforce the need for embedded interagency protocols to prevent children from falling through the gaps between policing, child protection, and family law systems.

⁴ [Independent Commission of Inquiry into Queensland Police Service responses to domestic and family violence](#)

⁵ [Abbeys-Project_Family-Law-discussion-paper-CURRENT.pdf](#)

⁶ [qcpci-final-report-web-version.pdf](#)

⁷ [Final report | Royal Commission into Institutional Responses to Child Sexual Abuse](#)

The effectiveness of the PPD framework depends not just on the actions of individual officers, but on the systems that support them. Gaps in information sharing, unclear hierarchies between legal orders, and failure to notify child protection or legal representatives, are recurring risks in DFV responses particularly when children are involved. PeakCare holds the position that key systemic safeguards must be embedded at a practice level to ensure that children do not fall through the cracks.

CONCLUSION AND RECOMMENDATIONS

PeakCare supports legislative measures that strengthen the protection of children and families experiencing DFV. The introduction of PPDs has the potential to provide police with an important tool for immediate safety, particularly in crisis situations where swift intervention may prevent further harm. Supporting frontline decision-making is vital. However, for the reasons outlined in this submission, PeakCare maintains that the oversight and review of the court must be preserved in decisions that impact the safety, rights and care arrangements of children and young people. Court oversight provides essential scrutiny, consistency, and accountability that cannot be replicated through discretion alone.

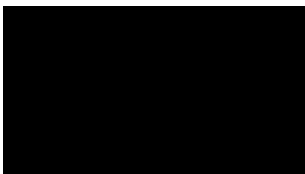
It is essential that these reforms are understood by officers and by the families and communities they affect. PeakCare recommends the introduction of PPDs be supported by targeted education campaigns, both within the Queensland Police Service and across the community, to build a shared understanding of how PPDs operate, and how they interact with existing child protection and family law frameworks.

If PPDs are implemented, at a minimum PeakCare further recommends the development of a standardised police disclosure statement, provided at the time a PPD is issued regardless of whether parties have disclosed any family law or child protection orders or proceedings. This statement should make clear that PPDs do not override court orders under the Family Law Act or Child Protection Act, and that all parties must continue to comply with existing legal obligations. Such a measure would reduce confusion, prevent legal conflicts at the point of crisis, reduce the risk of unintentional breaches, misinterpretation, and harm.

Finally, PeakCare acknowledges the leadership of our sector partners, Queensland Council of Social Services (QCOSS) as the peak body for DFV, Aboriginal and Torres Strait Islander Legal Service (ATSILS) and Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP). This submission is intended to complement their expertise by focusing specifically on the child protection dimensions of the Bill and advocating for reforms that uphold the safety, dignity, and rights of all children and young people. Legislative responses to DFV must be trauma-informed, culturally safe, and firmly grounded in the lived realities of the families they are designed to protect.

Thank you for the opportunity to make this submission. We trust that the information and perspectives provided will be of assistance in your deliberations.

Yours sincerely,



Mr Tom Allsop
Chief Executive Officer