



## Episode 17: Kelsey Hegarty

### Transcript

**00:00:00,800 --> 00:00:06,480 [Kelsey Hegarty]**

I would like to see domestic violence being seen as a health issue, not only a justice issue.

**00:00:06,480 --> 00:00:07,010 [Micaela Cronin]**

Mm-hmm.

**00:00:07,010 --> 00:00:21,919 [Kelsey Hegarty]**

So in that time, the strong health systems, they're enacting early intervention both in public and private sectors, where all practitioners have stepped up.

**00:00:21,980 --> 00:00:54,300 [Female Voiceover]**

Welcome to Voices Towards 2050: Ending Gender-Based Violence, the official podcast series of the Domestic, Family and Sexual Violence Commission. Please be aware that this podcast discusses topics related to domestic, family and sexual violence, which may be distressing for some listeners. Support is available. If you need assistance, please contact 1800RESPECT or reach out to your local support services. Thank you for joining us.

**00:00:54,380 --> 00:01:01,000 [Micaela Cronin]**

I'm so pleased to welcome today's guest to the podcast. Kelsey, thanks for joining me for this conversation about the future.

**00:01:01,000 --> 00:01:02,480 [Kelsey Hegarty]**

Oh, a pleasure to be here.

**00:01:02,480 --> 00:02:12,080 [Micaela Cronin]**

First, I want to start by acknowledging that today I'm having this conversation on the lands of the Ngunnawal people and pay my deep respects to their elders past and present, their care of these lands and for their gen- ongoing generosity and sharing of their wisdom. My commitment in this work and life is to be an ally in this role in all ways. So joining us today for the podcast is Dr. Kelsey Hegarty, who is a professor and chair in Family Violence Prevention at the University of Melbourne and the Royal Women's Hospital, and a national leader in domestic, family and sexual violence prevention and response. Kelsey heads the Safer Family Centre and is a member of the Melbourne Research Alliance to End Violence Against Women. Across her career, Kelsey has developed tools such as the Composite Abuse Scale, contributed to national clinical guidelines, and worked closely with health services to improve how family violence is both recognised and responded to at the first point of contact which we know is often with a health professional. Kelsey, I'm so pleased to have a chance to talk to you about your vision for the future. We've had so many conversations about this over time during the 16 Days of Activism. Welcome.

**00:02:12,080 --> 00:02:15,840 [Kelsey Hegarty]**

Yes, it's been great to listen to the other podcasts as well.

**00:02:15,840 --> 00:02:25,000 [Micaela Cronin]**

Thanks, Kelsey. So, let me start with, tell me a little bit about what motivates you to do this work to strive for a better future.

**00:02:25,000 --> 00:02:37,280 [Kelsey Hegarty]**

Oh, it's a great question, isn't it? And if I reflect back, I think 30 years ago, I came to it with a social justice perspective. I grew up in a working class family and did medical school [laughs] with a lot of-



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**00:02:37,280 --> 00:02:37,290 [Micaela Cronin]**

Mm-hmm

**00:02:37,290 --> 00:02:50,960 [Kelsey Hegarty]**

... privileged people. So that moved me towards this. But then when I graduated and I was a GP, I did all this mental health work and I was reading the headlines, you know, 30 years ago about one in four women.

**00:02:50,960 --> 00:02:51,100 [Micaela Cronin]**

Mm-hmm.

**00:02:51,100 --> 00:02:59,060 [Kelsey Hegarty]**

And I just wasn't seeing it in my practice. But I also wasn't asking directly which, you know, we now know does work.

**00:02:59,060 --> 00:02:59,579 [Micaela Cronin]**

Mm-hmm.

**00:02:59,580 --> 00:03:17,460 [Kelsey Hegarty]**

You know, around the same time, this sociologist who was into alcohol research, she actually had taught me in medical school. She said, "Do you want to do a PhD on alcohol and domestic violence?" And at the time, I almost said no because I thought researchers were very odd people who didn't understand the real world.

**00:03:17,460 --> 00:03:17,820 [Micaela Cronin]**

[laughs] Yeah.

**00:03:17,820 --> 00:03:20,150 [Kelsey Hegarty]**

Obviously don't think that now. [laughs]

**00:03:20,150 --> 00:03:20,160 [Micaela Cronin]**

No.

**00:03:20,160 --> 00:04:27,680 [Kelsey Hegarty]**

But anyway, that led to my PhD about definition, nature and prevalence of domestic violence, um, developing a measure. And grappling with, back then, what was coercive control, what's situational violence and looking at those patterns. And at the time, I also began to put words to injustices I'd experienced as a woman, activating my feminist stance. So all these things mixed together but finally I was able to label my own experience as a child growing up in a family where there was financial control behaviours by my father, alcohol related, uh, verbal and emotional abuse towards my mother, and hearing stories about my grandmother's experiences. So this combination of personal experience, feminist and social justice values motivated me. And we know from research by the Safer Family Centre that this also motivates health professionals, experiences and values, along with human rights and child rights. And I think sometimes we forget to focus on these aspects, so it's a great question about motivations.

**00:04:27,680 --> 00:04:51,360 [Micaela Cronin]**

And look, Kelsey, that's such an interesting journey to share. Thank you for sharing, because I think all of what each of us as individuals bring to our roles and the perspectives and experiences that shape the way we approach our work, we're very lucky to have researchers like you. And I think that perception that researchers are boring and don't understand the real world, you are a very good example-

**00:04:51,360 --> 00:04:51,370 [Kelsey Hegarty]**

[laughs]

**00:04:51,370 --> 00:04:52,840 [Micaela Cronin]**



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... of why that is not true.

**00:04:52,840 --> 00:04:53,780 [Kelsey Hegarty]**

I hope so. [laughs]

**00:04:53,780 --> 00:05:24,680 [Micaela Cronin]**

Yeah. Yeah. Well, that's definitely my experience in my engagement and observation of your work. So Kelsey, the question that we're really, I'm really trying to kind of get people to focus on in this podcast series is to think about the future and imagine it, to really kind of imagine it in a very concrete way. And so my next question is about if all of our efforts, if the national commitment to end gender-based violence in one generation is successful, what would it look like? What would your vision of 2050 be?

**00:05:24,680 --> 00:05:26,539 [Kelsey Hegarty]**

Ooh, that's a big question.

**00:05:26,540 --> 00:05:26,740 [Micaela Cronin]**

Mm-hmm.

**00:05:26,740 --> 00:05:37,859 [Kelsey Hegarty]**

And obviously, I will answer it from my perspective that, you know, I would like to see domestic violence being seen as a health issue, not only a justice issue.

**00:05:37,860 --> 00:05:37,870 [Micaela Cronin]**

Mm-hmm.

**00:05:37,870 --> 00:06:57,604 [Kelsey Hegarty]**

So in that time, these strong health systems, they're enacting early intervention both in public and private sectors, where all practitioners have stepped up. And this is a large work- workforce as you've pointed out in your report. You know, let's think of pregnancy as an example where every person who's having a baby has universal education about healthy relationships. They'll be sensitively asked about safety and fear, and if they indicate a need for support, there's this complete holistic wraparound service for the whole family during pregnancy and afterwards. And people in my team such as Minerva Chai and Namako have worked on this currently, so I- I think we can get this health system response where there's leadership and financing and staff support and protocols, and a- all the environments are okay. And everybody can produce a World Health Organization lives responsive listening and inquiring about needs and enhancing safety and offering support in the way of doing it with care, a response developed by Laura Tarcia, which is choice and control, action and advocacy, and recognition, understanding, and emotional connection. And look, this should be standard-

**00:06:57,604 --> 00:06:57,614 [Micaela Cronin]**

Mm-hmm

**00:06:57,614 --> 00:07:25,604 [Kelsey Hegarty]**

... you know, so that family and friends who are the first ones told can do this. Whoever, you know, the- the same no wrong door. And look, I think it's- it's a big ask, but I think it could happen for sure. And the way that I think it can happen by 2050 is if we keep doing the expertise, knowledge, you know, really listening to them. And you, obviously, you're doing that in your commissioner work, but we've been doing it with the Weavers-

**00:07:25,604 --> 00:07:25,824 [Micaela Cronin]**

Mm-hmm

**00:07:25,824 --> 00:07:45,244 [Kelsey Hegarty]**



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... um, and developing frameworks led by Katie Lamb. And, and I really think all of that is just normal practice, you know, normal practice. That health systems are doing that, that we're basing it on lived expertise, voices, and we're not replicating research [laughs] that's been done.

**00:07:45,244 --> 00:07:45,384 [Micaela Cronin]**

Mm-hmm.

**00:07:45,384 --> 00:08:20,604 [Kelsey Hegarty]**

The World Health Organization has frameworks for respect to prevent violence against women and the INSPIRE framework for violence against children. So this is outside the health sector. There are other areas that we know now work, so we should have implemented poverty and economic stress interventions. We also should be doing heaps more on alcohol reduction interventions because both these things would, I think, definitely reduce violence and abuse. So we're seeing a whole group of systems working together to make it safer for families.

**00:08:20,604 --> 00:08:27,524 [Micaela Cronin]**

And Kelsey, I think there's such truth in what you're saying about we actually know most of those, it should be common practice-

**00:08:27,524 --> 00:08:27,534 [Kelsey Hegarty]**

Yeah

**00:08:27,534 --> 00:08:43,644 [Micaela Cronin]**

... and they're things that we do have very good existing frameworks about if they are implemented and resourced well. And it will be good to get to 2050, and that's part of the purpose of this conversation too, right, is to really envisage it so we can drive to get there. So if-

**00:08:43,644 --> 00:08:45,284 [Kelsey Hegarty]**

Absolutely. Yeah.

**00:08:45,284 --> 00:09:04,844 [Micaela Cronin]**

So if you could... What, what would you be really curious about? If you could travel through time to this vision of yours where this is all happening and is common practice in 2050, you, you get to spend a few days there, as a researcher, what would you want to know? What would your questions be? Where would you go looking for evidence?

**00:09:04,844 --> 00:09:16,804 [Kelsey Hegarty]**

Look, I'd obviously want to try and talk to all members of a family and see that they are feeling a greater well-being and safety. And-

**00:09:16,804 --> 00:09:16,964 [Micaela Cronin]**

Mm-hmm

**00:09:16,964 --> 00:09:26,964 [Kelsey Hegarty]**

... I think that I'd want to know that there's sort of a life course approach, so that we're looking across, [laughs] as I said, from pregnancy before-

**00:09:26,964 --> 00:09:26,973 [Micaela Cronin]**

Mm-hmm

**00:09:26,973 --> 00:09:40,184 [Kelsey Hegarty]**

... right all the way through to older people. And because I think if children are growing up in families where it's happening, I want to know that there's strong healing models in place-

**00:09:40,184 --> 00:09:40,504 [Micaela Cronin]**



Mm-hmm

**00:09:40,504 --> 00:10:03,024 [Kelsey Hegarty]**

... you know, for all forms and for all people across that life course. And we can learn so much from the healing models in- in First Nations people. So what I'd want to know is do we have that in place? And in particular, obviously, in- in our area, we've also got The Restore Centre, which is looking at healing in the context of sexual violence. So-

**00:10:03,024 --> 00:10:03,324 [Micaela Cronin]**

Mm-hmm

**00:10:03,324 --> 00:10:23,383 [Kelsey Hegarty]**

... I'd want to know have we, have we influenced that particular area, which is obviously being led by Laura Tarcia. So that's sort of the first knowing is, "I- is the culture around healing strong and for everybody?" But the second one is that, "The trust in the system," 'cause-

**00:10:23,384 --> 00:10:23,473 [Micaela Cronin]**

Mm-hmm

**00:10:23,473 --> 00:10:34,804 [Kelsey Hegarty]**

... I actually find a lot of fighting between different sectors. I find there's a lot of distrust in the system. So I would want to be measuring something about trust.

**00:10:34,804 --> 00:10:35,443 [Micaela Cronin]**

Mm-hmm.

**00:10:35,444 --> 00:11:05,674 [Kelsey Hegarty]**

You know, and relationships. Are relationships strong? Are, you know, relationships strong with practitioners and their patients or clients, between different workers, between the workers and the organizations, and there's no unsafe environment? So I'd wanna be doing [laughs], you know, audits that look at the whole system somehow with trust and relationships as the factor. And then I think there's a lot of work on worker well-being. I know in our group, Elizabeth McLendon is doing it.

**00:11:05,674 --> 00:11:05,804 [Micaela Cronin]**

Mm-hmm.

**00:11:05,804 --> 00:11:14,204 [Kelsey Hegarty]**

I want to know that the people doing the work, and I know people on some of the other podcasts have talked about this, aren't burn out- burnt out and jaded in 2050.

**00:11:14,204 --> 00:11:14,324 [Micaela Cronin]**

Mm-hmm.

**00:11:14,324 --> 00:11:57,424 [Kelsey Hegarty]**

Because if we don't put in place now well-being strategies and plans and programs, I think they are going to be. And so I want that group to be feeling strong and safe to do the work, and, and that's across the sector. And that there's a feeling of hope for the next 25 years. [laughs] By 2075, they're people who've taken over the work from oldies like me and are... you know, it- it's sustainable. So I- I suppose it's just looking at the families, at trust in the system, and also the workers. Yeah, I- I just feel I'd want to have that all, know that that was had moved forward in 2050.

**00:11:57,671 --> 00:12:19,531 [Micaela Cronin]**

Those are such important factors, and you're right. Some of those themes have come up in these conversations about being the bedrock. I think it, the, the issue around trust is a really interesting one,



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Kelsey, because again, it's come up in a number of different ways about people's lack of trust in, and confidence in, the systems that should be there to support and protect them, but also between the systems.

**00:12:19,531 --> 00:12:19,852 [Kelsey Hegarty]**

Yes.

**00:12:19,852 --> 00:12:25,930 [Micaela Cronin]**

Um, and what we need to do about that. So that's a, that's an interesting one for a longer conversation, I think. Um-

**00:12:25,992 --> 00:12:26,202 [Kelsey Hegarty]**

[laughs]

**00:12:26,202 --> 00:12:56,372 [Micaela Cronin]**

... let's, let's pick that up. I'm gonna peg that one. So, to round this conversation out, uh, if you had the ability to make any necessary change, and I know it's completely unreasonable to, to [laughs] say to people, "What's the one thing?" But from, and you've managed to weave through quite a few of the things that you wanna see happen, but from your perspective particularly, what's the one thing that you think we need to do right now to get us on the right track to move towards achieving a Violence Free 2050?

**00:12:56,372 --> 00:13:22,651 [Kelsey Hegarty]**

Oh, big question. I really think that we have to undertake early intervention with people who use domestic, family and sexual violence. We know this is tricky work, particularly to engage men who use domestic, family and sexual violence. However, I think we have to do this. But while we're doing it, we have to acknowledge that, obviously, domestic violence is different to family violence is different to-

**00:13:22,651 --> 00:13:22,661 [Micaela Cronin]**

Mm

**00:13:22,661 --> 00:13:50,012 [Kelsey Hegarty]**

... sexual violence, say, by a stranger, and child abuse is different to elder abuse. So we need to think about each of these types and think about the patterns within them, that they have different risk factors, trajectories and the need for different types of interventions. In my own family, my father mellowed and was very supportive and loving to my mother in later life. He, uh, drank less, gambled less. People can change.

**00:13:50,012 --> 00:13:50,391 [Micaela Cronin]**

Mm.

**00:13:50,391 --> 00:14:09,852 [Kelsey Hegarty]**

And so, I think at, you know, the Safer Family Centre and the Restor Centre, we're undertaking this type of research about tailoring responses to individuals and families, rather than having a generic approach. And we certainly hope at the University of Melbourne, we can contribute to the momentum for change.

**00:14:09,852 --> 00:14:38,651 [Micaela Cronin]**

Kelsey, I think you're making a huge contribution, and I think that is a really lovely contribution to this conversation about the hope that, and recognizing that people can change, but that we really need to be thoughtful and evidence-based in how we do that work. And, and I absolutely agree that it's one of the critical, critical factors in how we are going to work towards a Violence Free 2050. Thanks so much for y- all of your work, Kelsey, and thank you for this conversation today.

**00:14:38,651 --> 00:14:45,132 [Kelsey Hegarty]**

My pleasure.

**00:14:45,192 --> 00:15:38,391 [Female Voiceover]**



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