RMIT UNIVERSITY | Centre for Innovative Justice

Strategic Review of the **Mabels Program**

Summary Report — September 2026

Mabels | eastern community legal centre | mfc malleefamilycare | community legal centre

SUMMARY REPORT · SEPTEMBER 2026

Acknowledgement of Country

The Centre for Innovative Justice acknowledges the people of the Woiwurrung, Boonwurrung, and Wadawurrung language groups of the Eastern Kulin Nation, and the Traditional Owners of the Mallee region, including the Ngintait, Latji Latji, and Nyeri Nyeri peoples, and Wotjobaluk Nations Peoples, on whose unceded lands this project has been undertaken.

We pay our deepest respects to their Elders, knowledge holders and leaders – past and present. In undertaking this work, we acknowledge the ongoing leadership of Aboriginal people, communities and organisations striving to build social and legal systems that are genuinely just and to keep Aboriginal families and communities strong.

Content warning

This report contains detailed discussions and analysis of family and domestic violence. Some readers may find the content distressing or triggering. Reader discretion is advised.

Support resources

Support resources are available for those affected by or at risk of using family violence. These are listed below. If you or someone you know needs help, please contact one of these services:

- National Sexual Assault and Domestic Violence hotline

  1800 RESPECT (1800 737 732) (24 hours a day, 7 days a week)
- Safe Steps 24/7 family violence response line

  1800 015 188 (24 hours a day, 7 days a week)
- Victims of Crime helpline for men experiencing family violence

  1800 819 817 (8am-7pm weekdays, 8am-5pm weekends and public holidays)
- Rainbow Door specialist LGBTIQA+ support, advice and referral line

  1800 729 367 (10am-5pm, 7 days a week).

If you are concerned about your behaviour and its impact on your family, contact the Men's Referral Service on 1300 766 491 (24/7 service).

A note on terminology

The Mabels sites have practitioners with varying roles and role titles. This report uses the following names:

'Family Violence Advocates' engage in integrated practice to provide advocacy, safety planning and support using a trauma-informed and strengths-based approach. Family Violence Advocates support a client's engagement with her legal options and the legal system in seeking safety for herself and her children. Family Violence Advocates may be called 'social workers', depending on the titles used in different organisations and contexts.

'Legal practitioners' engage in integrated practice to provide legal advice, support and advocacy to assist clients in navigating their legal options and the legal system, and support clients to be empowered to make decisions that will help keep themselves and their children safe. Legal practitioners may also be called 'solicitors' or 'lawyers', depending on the titles used in different organisations and contexts.

1. Mabels Strategic Review

Mabels is a Health Justice Partnership (HJP) which provides early intervention, integrated support to women experiencing family violence who seek support via Victoria's universal Maternal and Child Health (MCH) service. Through collaboration of legal, specialist family violence, and Aboriginal community-led services, Mabels aims to provide women with legal advice, safety planning, and culturally safe support, information and referrals.

Established in Melbourne's eastern metropolitan area in 2015, Mabels has expanded through government and philanthropic funding to additional metropolitan, regional and rural locations. Independent evaluations have documented its success, and after ten years there is an opportunity to extend the model to more sites across Victoria.

The Centre for Innovative Justice (CIJ) at RMIT University conducted a strategic review ('the Review') to identify the essential features of the Mabels model, guide expansion while preserving its integrity, and demonstrate the value of early legal support within the broader family violence system. The Review drew on a review of client case files, interviews with Mabels clients, consultations with practitioners and stakeholders, program data, and a desktop literature review. The Review examined the model's core components, achievements and requirements for successful expansion. The Review report focuses on the needs Mabels addresses, how it achieves outcomes, its impacts on clients and the family violence system, and ways to strengthen and expand its impact.

2. What need does Mabels respond to?

Women who are pregnant or within the early postpartum period with a child up to 12 months of age are at increased risk of family violence, with family violence often intensifying before and after the arrival of a new child. Women who have experienced family violence during postpartum report worse health across a number of domains, including increased risk of depression, anxiety, posttraumatic stress disorder, and suicide. Infants who experience family violence have increased risk of trauma, depressive and anxiety symptoms, aggression and conduct problems.

Risk can be increased by factors such as maternal isolation, financial difficulties, low levels of maternal education, younger parental age, poverty-related impacts, pregnancy intention, a history of maternal childhood maltreatment and marital status. Women born overseas for whom English is not their first language may face additional barriers, including limited support networks, visa-related concerns and lack of awareness of available services.

The Review confirmed that Mabels clients and their children often experienced escalating, complex and high-risk violence. In five of the 12 Mabels cases reviewed, family violence was observed to have escalated during pregnancy or after the birth of a child. In all cases reviewed, clients experienced multiple types of family violence, with eight of the 12 clients experiencing four or more types of family violence. The types of family violence recorded in case files included physical, emotional, financial, sexual and technology-facilitated abuse, as well as coercive control.

The Review identified that Mabels clients required a broad range of supports, including emergency accommodation, technology safety checks (or 'tech sweeps'), financial and housing assistance, material aid, mental health and alcohol and other drug support, as well as family violence risk assessment, psychoeducation and safety planning.

Support was also needed for children, who were at times directly targeted by the person using violence. Examples of violence being directed specifically towards children included threats to kill, threats to abduct children and take them overseas, physical assaults, psychological abuse (including racial abuse), and using violence in front of and/or against another child.

In the case of older children, where there had been little or no service engagement until Mabels became involved, a referral to Mabels could mean that the safety needs of older children were recognised and responded to for the first time. Accordingly, the support and safety needs of both infants and older children were a central consideration of Mabels and informed the support and referrals offered to Mabels clients through the program.

Mabels clients' legal needs covered family violence intervention orders, parenting and family law, child support, criminal law, Child Protection, birth registration and identity documents, victims of crime assistance, fines and debt, housing and tenancy matters, paternity tests and mediation support. Rather than being discrete legal needs, these needs often stemmed from or intersected with women's experiences of family violence.

3. How does Mabels address need and achieve outcomes?

The Mabels model is straightforward. MCH services, provided by local government, routinely screen for family violence during their regular postpartum consultations. When family violence or indicators of family violence risk are identified by the MCH nurses, they refer clients into Mabels.

Following intake and assessment, the woman receives integrated, trauma-informed family violence and legal advice, safety planning, information and referrals in the same appointment, at the MCH service or other locations (including phone or video appointments). This multidisciplinary support is provided by legal practitioners, Family Violence Advocates, and, where relevant, Aboriginal cultural support, all working in collaboration.

The MCH setting provides privacy for women and acts as a low-profile access point to a family violence response, with women typically attending these appointments with their baby alone and, crucially, without the presence of the person using violence against them. The Mabels model, therefore, offers integrated and expert assistance under one roof, at a service the victim-survivor is already attending on a routine basis. Mabels can also connect women with additional services if required.

While Mabels generally does not offer ongoing legal representation, the program allows clients to re-engage and have further appointments as needed, with no limits in relation to the length of overall engagement, the number of appointments or the number of episodes of service.

Mabels practitioners also offer secondary consultation and advice to MCH nurses, enhancing nurses' capacity to respond to women and children experiencing family violence.

Core features which maintain the integrity of the Mabels model

Using the Victoria Law Foundation's People-Centred Justice Model as a foundation, the Review identified 27 core features which maintain the integrity and uniqueness of the Mabels model.

Foundational supports for initiating and maintaining initiatives:

1. Shared purpose and collective ownership through Health Justice Partnership
2. Values-driven and values-aligned
3. Careful, strategic growth with an eye to integrity
4. Leadership championing and modelling
5. Trusting rather than contractual relationships
6. Meaningful Aboriginal partnership from the outset
7. Careful recruitment of practitioners with unique skills and knowledge
8. Pragmatic use of technology to enable safe engagement
9. Resourcing for the entire Mabels model
10. Low to no cost for local government
11. No cost for clients to access

Design elements that address specific community and/or legal needs:

12. Focus on the specific needs of women following the birth of a child
13. Focus on outcomes for infants and children
14. Genuine collaboration with Maternal and Child Health services which provides real benefit and fills a gap
15. Multidisciplinary, integrated practice and practice leadership
16. Safe, low profile, accessible entry point through a universal service
17. Timely and swift intake and engagement
18. Supporting new ways of undertaking roles and capability uplift
19. Mutual learning between disciplines
20. Continuous learning and reflection

Tailoring to improve the overall experience for individual help-seekers:

21. Flexibility to respond to a broad range of needs
22. Ability to work at the pace of the client
23. Variety of formats and locations of appointments
24. Choice of 'integrated' or 'lawyer only' appointment
25. Aboriginal self-determination
26. Leveraging trust in Maternal and Child Health services
27. Enabling women to re-engage if their circumstances or safety needs change

4. What does Mabels achieve?

Provision of safe, accessible, timely and tailored support

The Review found that Mabels provides support to a cohort which can be at heightened risk of family violence, including risk of lethality, at a time in their lives when support is otherwise inaccessible or ill-suited to meet such needs. Mabels also intervenes as early as possible to reduce the likelihood that young children will remain at risk and to reduce (or prevent) experiences of family violence among infants and other children. Mabels tailors its response to reflect the readiness of each client, equipping women with information and options so that they can make informed choices, plan and take action when they are ready.

Education and validation regarding family violence and help-seeking

Given many Mabels clients may have had limited service engagement or may not recognise what they are experiencing as family violence, the Review found that the program provides important psychoeducation and validation of women's experiences. At the same time, the program increases clients' knowledge about their legal rights and options and gently challenges shame around help-seeking.

Addressing safety and support goals

The Review found that Mabels improves safety and reduces risk for both women and children. Mabels' flexible, trauma-informed and person-centred approach responds to dynamic risk, needs and readiness, and helps clients to identify and address individual safety and support goals as well as the safety and support needs of their children. The program actively increases confidence to navigate legal and support systems, set boundaries, self-advocate and make informed decisions about longer-term safety.

Critical role within the broader family violence system response

The Review found that Mabels plays a critical role in the broader family violence response by helping MCH nurses to meet their Multi-Agency Risk Assessment and Management (MARAM) obligations and providing an early intervention option between routine services screening and crisis support. Mabels also complements duty and private legal services by connecting legal and family violence systems, preparing both clients and practitioners for court so that clients can understand what is happening, participate meaningfully, and experience reduced stress around court events.

5. How can the impact of Mabels be strengthened?

Lessons for current implementation

The Review consistently heard positive feedback from clients and stakeholders about Mabels' current implementation and delivery. The program is valued for its accessible, supportive and readiness-responsive model, and clients generally felt that little needed to change.

Potential enhancements identified through the Review include the following:

- Financial counselling to help women manage financial barriers and reduce financial dependence on a person using violence.
- Childcare during appointments, allowing women to discuss sensitive matters more freely without their comments being heard by their children.
- Expanded legal areas on which advice is offered, including property settlement advice.
- Offering ongoing legal representation, particularly in family violence intervention order and family law matters.

Stakeholders also identified opportunities to apply the Mabels model in other early intervention contexts. This would require careful consideration and protection of the program's confidential and discreet nature, strong referral pathways, appropriate resourcing, and staff trained to identify family violence risk.

Lessons for the expansion of Mabels

The most consistent suggestion for how to increase the impact of Mabels was to expand it to more sites. The Review recommends a fidelity-with-adaptation approach, protecting the core components, principles and values that make Mabels effective, while adapting elements to local circumstances to increase the likelihood of success in new contexts.

Expansion sites should retain:

- The integrated Health Justice Partnership model.
- Strong collaborative governance involving health, legal, family violence and Aboriginal parties.
- Ongoing investment in relationships, communication, shared learning and partnership maintenance.
- Aboriginal inclusivity and culturally safe pathways.
- Trust, mutual respect, transparency and recognition of different professional expertise.
- Low-profile, 'invisible' access.
- Simple, swift referral and intake processes.
- Integrated multidisciplinary practice involving legal practitioners and Family Violence Advocates.

- Strong multidisciplinary practice leadership to support complex decisions, risk escalation and coordinated responses.
- Robust recruitment, induction, supervision, reflective practice and professional development.
- CLC employer arrangements for legal practitioners and Family Violence Advocates to facilitate true, integrated practice and protect client confidentiality.
- Careful, strategic engagement and communication with wider system and local stakeholders.

Expansion sites may adapt:

- The frequency, location and format of co-location and outreach.
- Use of tele-practice, hybrid appointments and other technology, provided privacy, safety, legal professional privilege and accessibility are protected.
- The level and nature of formal documentation required to support partnership arrangements, such as memoranda of understanding and referral agreements.

Overall, expansion should be locally designed, relationship-based and flexible, while protecting Mabels' core principles of integrated practice, accessibility, cultural safety, trust and early intervention.

The need for a consistent understanding of early intervention

The Review highlights that early intervention is a central intersecting layer or doorway to prevention, response and recovery. Mabels demonstrates that 'early' interventions are responding to violence that may have been occurring for years and are, in fact, filling a gap that the specialist family violence response system is not able to fill due to both resourcing challenges and accessibility. Mabels intervenes as early as possible without excluding people because of where they are in their journey, and, as such, could as easily be categorised as a response and healing intervention, as it could an early intervention.

Accordingly, the Mabels program suggests that understandings of early intervention should not be limited to simply 'early in the experience of violence.' Expanded definitions, stronger evidence, better coordination and increased government investment in early intervention are needed, rather than treating these stages as separate or isolated services.

6. Recommendations

Based on the findings of the Review, the following recommendations are proposed to strengthen the current implementation of Mabels, support expansion and inform broader family violence system reform.

1. Maintain existing Mabels sites with secure, sustainable funding for the whole model

Ten years of implementation and learning have demonstrated the value of Mabels, and Mabels is now an integral part of the local service system response to family violence in the East and in the Mallee. Existing Mabels sites should be maintained and securely funded on an ongoing basis, particularly considering the growing evidence that early and effective intervention can reduce risk and harm for individual families, costs associated with crisis family violence services, and pressure and demand on housing, homelessness, Child Protection, health, and justice services. Sustainable government funding should be sought across justice, family violence, local government and MCH portfolios, rather than relying solely on short-term or philanthropic funding.

2. Expand Mabels carefully and strategically

Mabels should be supported to continue expansion to additional metropolitan, regional and rural locations where the following conditions are present:

- Potential CLC, local government and Aboriginal partners with values aligned with the Mabels model and integrated ways of working.
- A CLC provider with the ability to provide legal advice in the areas of law relevant to Mabels, and with openness to develop structures and employ professionals to provide a multidisciplinary service.
- Aboriginal organisations with capacity and interest in engaging in the development and implementation of a local Mabels service which can provide culturally safe pathways to support.
- Funding available for the complete partnership and integrated model, including resources to enable the founding partnership to provide oversight and support expansion sites.

Expansion should proceed in stages, allowing sufficient time for relationship-building, local consultation, workforce preparation and partnership development before service delivery begins.

3. Protect the core Mabels model in any expansion

Any expansion of Mabels should be assessed against the ability of the proposed site to maintain core features, particularly the following:

- The Health Justice Partnership model.
- Local collaborative governance structures.
- Embedded Aboriginal leadership and self-determination.
- Integrated multidisciplinary practice.
- A low-profile and safe access point.

Where these features cannot be maintained, the suitability of implementing Mabels in that setting should be reconsidered.

4. Establish statewide collaborative governance to maintain quality as Mabels expands

To support expansion, a statewide steering committee or body with a statewide perspective should be established to monitor fidelity, quality assurance, consistency, and implementation of the Mabels model across new sites.

Membership should include ECLC, alongside relevant state and local government, legal and Aboriginal partners to support workforce and practice development across the Mabels network.

Inclusion of state government stakeholders from justice, health and family violence portfolios may also strengthen statewide coordination and systematic links between Mabels, the MCH service, The Orange Door, justice services and other relevant systems.

5. Implement a continuous monitoring, evaluation and learning framework

Mabels should maintain its culture of learning, reflection and evaluation. Future monitoring, including of Mabels' operation and fidelity in any future expansions, should combine quantitative and qualitative information, including the following:

- Client referral and re-engagement volumes and sources.
- Time from client referral to contact and appointment.
- Client-reported outcomes, including outcomes for children.
- Early intervention indicators, including age of children, and whether this is a client's first disclosure of family violence.
- Legal, safety and support goals achieved.
- Access and outcomes for Aboriginal women and other priority cohorts.
- Practitioner feedback, including that of partner organisations such as MCH staff and Aboriginal organisations involved in referrals to Mabels.

Data collection should be trauma-informed and designed to support learning rather than create additional burdens on staff.

6. Explore additional early intervention settings cautiously

Mabels partners should investigate whether the model could operate through other trusted universal or routine services, including antenatal and maternity settings. Any expansion beyond MCH should occur only where the setting can provide a safe and discreet access point; a trusted practitioner able to identify and refer family violence; appropriate privacy from the person using violence; and clear consent and information-sharing arrangements. Settings where the person using violence is likely to be present should be approached with particular caution.

7. Embed and resource integrated legal assistance within the broader family violence response

Mabels clearly demonstrates the benefits of integrated legal assistance for victim-survivors of family violence. Government and sector partners should further explore ways to make legal assistance more accessible within family violence services, identified as a priority in the Family Violence Reform Rolling Action Plan 2020-2023. This should include the following:

- Strengthening legal referral pathways from The Orange Door and other specialist family violence services.
- Supporting legal practitioners to work alongside family violence practitioners.
- Funding legal services to enable increased capacity to respond to associated increases in referrals.

8. Promote a consistent understanding of early intervention

Government and sector partners should develop a clearer and more consistent understanding of early intervention in family violence. Policy and funding frameworks should avoid treating early intervention as relevant only to the earliest stage of violence, or as a precursor to specialist family violence service engagement.