Queensland Family and Child Commission
Submission

Date: 3/06/2015

To: National Children’s Commissioner, Australian Human Rights Commission

Topic: Examination of children affected by family and domestic violence

Submission summary:

This submission aims to provide the National Children’s Commissioner with research, information and advice to inform the development of national strategies to promote the psychological and physical safety of children and young people affected by domestic and family violence (DFV).

Note: The majority of domestic violence is experienced by women and the data and research literature referenced within this submission reflects this fact. However, the QFCC acknowledges that men can also experience DFV at the hands of an intimate partner.

Submission recommendations:

• Definitions used to underpin research, develop strategies or policy responses for children should reflect a broader range of behaviours and experiences when defining what ‘domestic and family violence’ is.

• Consideration and discussion be given to the development of mechanisms to capture national or state based quantitative data on the prevalence of domestic and family violence affecting children.

• The National Children’s Commissioner maintain a leadership role (at a national level) to ensure the inclusion of outcomes for children in the national agenda for addressing domestic violence.

• Promotion of the right of the child to have a voice and in particular to have their opinions considered in legal decisions relating to separation when domestic violence is present in the parental relationship.

• Training for legal representatives and those working with families involved with the Family Law Court include identifying and recognising domestic violence experience, including specific training for professionals to engage with children to assess violence in the home.

• A social marketing campaign which promotes the physical and psychological safety of children who are living with domestic violence. Additionally this campaign should include information on

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the services available for children to access when they are experiencing violence in the home. This campaign should be aimed at reaching children and young people.

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The Queensland Family and Child Commission (QFCC) is pleased to provide a submission to the National Children’s Commissioner, Australian Human Rights Commission to inform the ‘examination of children affected by family and domestic violence’ to be included in the Children’s Rights Report 2015.

The QFCC is committed to promoting the safety, wellbeing and best interests of children and young people and advocating the responsibility of parents and the broader community to protect and care for their children. This submission aims to provide the National Children’s Commissioner with research, information and advice to inform the development of national strategies to promote the psychological and physical safety of children and young people affected by domestic and family violence (DFV).

Note: The majority of domestic violence is experienced by women\(^2\) and the data and research literature referenced within this submission reflects this fact. However, the QFCC acknowledges that men can also experience DFV at the hands of an intimate partner.

**Contextualising domestic violence in Queensland**

Domestic violence awareness is increasingly carving a path of national public attention through federal and state government inquiry and budget inclusions, advocacy work by people like Rosie Battie, public awareness events such as White Ribbon day and the rise in media coverage of DFV related incidents and homicides.

DFV is also at the forefront of the Queensland discourse following the recent release of the *Not now, not ever – Putting an end to Domestic and Family Violence in Queensland Report* 2015. This report is the culmination of a significant process of inquiry to define the DFV landscape\(^3\) in Queensland. The inquiry was undertaken by the Special Taskforce on Domestic and Family Violence in Queensland (Queensland Special Taskforce) and chaired by the Honourable Quentin Bryce AD CVO.

The stories and experiences of men and women from across the state captured by the Queensland Special Taskforce have shaped a picture of the impact of domestic violence from both a gender and vulnerability perspective. The stories have highlighted the traumatising effects of DFV on individuals and family functioning, the impacts of the legal system on domestic violence survivors and the deficiencies in support service access and the barriers to accessing these vital services.

The domestic violence statistics for Queensland further paint an alarming picture:

- in Queensland alone in 2013-14, 66,016 occurrences (or 180 incidents a day) of domestic and family violence were reported to Queensland Police\(^4\)
- 17 homicides relating to domestic and family violence occurred in Queensland in 2012-13\(^5\)
- annually DVConnect Crisis Support Queensland (DVConnect) receives approximately 55,000 incoming calls related to domestic and family violence and sexual assault\(^6\)
- 4000 calls every month to DVConnect are from women who are in fear or immediate threat of domestic violence\(^7\)


\(^3\)Special Taskforce on Domestic and Family Violence (2015). *Not now, not ever – Putting an end to Domestic and Family Violence in Queensland*, p006

\(^4\)Special Taskforce on Domestic and Family Violence (2015). *Not now, not ever – Putting an end to Domestic and Family Violence in Queensland*, p006

\(^5\)Special Taskforce on Domestic and Family Violence (2015). *Not now, not ever – Putting an end to Domestic and Family Violence in Queensland*, p006


• on average DVConnect assists over 350 women and often more than 400 children each month to be moved to safety\(^6\)
• QFCC Annual Report: Deaths of children and young people 2013-14, identified:
  ▪ of the four fatal assault and neglect deaths that occurred during the same reporting period, 2 families were known to have a history of domestic violence\(^9\)
  ▪ of the 23 suicides within the 2013-14 reporting period, there were 4 occasions where domestic violence was identified as one of the life stressors for a young person who had suicided\(^10\)
  ▪ further to note, given the information regarding life stressors and vulnerability characteristics is not provided to the QFCC consistently, the reported numbers may be an undercount of the true prevalence of the issue being addressed e.g. domestic violence.

Systemically, the effect of domestic violence on children is often an area which does not garner the level of national attention it requires and often fails to be included in broader discussions regarding responding to and addressing domestic violence matters. This can, in part, be attributed to the lack of substantial data and issues of underreporting which have hindered efforts for a clear picture of family violence.\(^11\)

**Question 1 – What are the definitional issues in relation to family and domestic violence affecting children?**

**Recommendation**

Definitions used to underpin research, develop strategies or policy responses for children should reflect a broader range of behaviours and experiences when defining what ‘domestic and family violence’ is.

Domestic violence is a complex subject and as evidence to this is not easily defined. Domestic violence is often referred to by a range of terms both generally and in policy, practice and research documents, and at neither a state nor national legislative level is there a standard definition of domestic violence.\(^12\) The terms which are used can include but are not limited to family violence and intimate partner violence.\(^13\)

Traditionally domestic violence has been narrowly defined as the presence of physical harm to one person by another person with whom they are in a domestic relationship. Over time there has been an important shift toward recognising and defining broader domestic violence abusive behaviours and contemporary definitions acknowledge a variety of situations. For example: Domestic violence is an abuse of power perpetrated mainly (but not only) by men against women both in relationships and after separation. It occurs when one partner attempts physically or psychologically to dominate

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and control the other. Domestic violence takes a number of forms. The most commonly acknowledged forms are physical and sexual violence, threats and intimidation, emotional and social abuse and economic deprivation. For many Indigenous people the term family violence is preferred as it encompasses all forms of violence in intimate, family and other relationships of mutual obligation and support.14

Similar complexities exist when seeking a standard terminology to succinctly define a child’s experience of domestic violence. A broad range of literature refers to a child’s DFV experience through such terms as, “witnessing, exposure to, or seeing domestic violence”15 however all these suggest the child is watching and being traumatised by a “fight between the mother and a male adult where there is both verbal and physical abuse”.16 Contemporary research questions the use of the narrow term “witnessing domestic violence” as not being a true description of the extent to which children are affected by domestic violence. Humphreys (2007), shows that the effects of domestic violence can involve:

- hearing the violence
- being used as a physical weapon
- being forced to watch or participate in assaults
- being forced to spy on a parent
- being told they are to blame for the violence because of their behaviour
- being used as a hostage
- defending a parent against violence; and/or
- intervening to stop the violence.17

The implications of not acknowledging a broader definition of ‘a child witnessing domestic violence’ dilutes the significance of the impact on a child’s physical, emotional, social, behavioral, developmental and cognitive wellbeing.18 Formally recognising a true ‘definitional’ understanding will also assist in the establishment of robust, comprehensive and appropriate policy responses. However, this recommendation would be secondary to those strategies to establish programs and services for children who have experienced domestic violence particularly programs which are distinct to those offered to women.

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Question 2 – What do we know about the prevalence and incidence of family and domestic violence affecting children, including who is involved in family and domestic violence events?

Recommendation

Consideration and discussion be given to the development of mechanisms to capture national or state based quantitative data on the prevalence of domestic and family violence affecting children.

As reflected in the response to the previous question, domestic violence affects a large portion of the Queensland community. There are a number of factors which make determining the extent to which children have been involved or exposed to domestic violence a complex process. These factors include, but are not limited to the following:

- most incidents of domestic, family and sexual violence go unreported\(^{19}\)
- a dominant focus is given to the main victim,\(^{20}\) generally the female partner/mother
- parental underestimation of their child’s exposure to domestic violence.\(^{21}\)

Information on domestic violence prevalence is collected from surveys, with most recent prevalence data collected from February to December 2012 via the national Personal Safety Survey (PSS) conducted by the Australian Bureau of Statistics (ABS). The PSS collects information about the nature and extent of violence experienced by men and women since the age of 15 (and consideration to some earlier experiences).\(^{22}\) In both 2005 and again in 2012 an estimated 1.5% of all women aged 18 years and over reported experiencing violence by a partner in the 12 months prior to the survey.\(^{23}\)

The PSS and similar surveys are an important part of establishing the prevalence of domestic violence in Australian homes and establishes an understanding of the level of intergenerational impacts on young people who have a history of abuse and exposure to DFV in the home. However, establishing the same level of similar quantitative prevalence data on children’s exposure to and experience of domestic violence from infancy to entering adulthood is not captured. To have access to this type of data, when applied with research findings into wellbeing and functioning behaviours, would help us to better understand the breadth of childhood exposure, develop policy responses, services and programs which address safety concerns, developmental impacts and investigate childhood resiliency.

While the QFCC acknowledges difficulties associated with large scale data capture exercises with children and young people, we propose consideration and discussion on the development of


\(^{22}\) Australian Bureau of Statistics, Personal Safety Survey, Australia, 2012,

\(^{23}\) Australian Bureau of Statistics, Changes in prevalence of partner violence over time,
mechanisms to capture national or state based quantitative data on the prevalence of domestic and family violence affecting children.

**Question 3 – What are the impacts on children of family and domestic violence?**

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**Ensuring consideration of child outcomes in the DFV agenda**

The Queensland Special Taskforce recorded the perspectives of survivors of domestic violence over the course of their investigations and included some of these in a release, *Our Journal – A Collection of Personal Thoughts about Domestic Violence*. It is these personal accounts which provide us, the policy makers and government agencies with a more personalised understanding of the impact of DFV on families. Some of the stories shared with the Special Taskforce include:

“**My oldest son suffers [from post-traumatic stress disorder]. He can’t sleep at night, disturbed by the constant replaying of the violence he heard when he was little. He is safe now, but his father’s legacy continues to torment him. He is receiving support through a mental health service.....it has been 10 years since I left his father**”. 24

“**My earliest memory is of my father gripping my mum’s hands and feet together.....and smashing her constantly against the wall whilst yelling at her.....I’ve had the fear of him being violent drilled into me from a very young age....The past [number] months, however, have resulted in [my brother] taking on the same violent purges that my father had a tendency for...now I can see why he was so angry at my father, and I can also see them as being mirrored reflections of each other. Both so angry, both with such big egos, both an absolute threat, amazingly, to each other**”. 25

“The children had become fearful of the phone ringing...They unfortunately overheard many abusive messages being left by him on the phone. In message left, he threatened to harm us all, mocked us, spoke of sickening and sexual acts, swore, screamed....and would continue until the phone message bank was full”. 26

While these stories only demonstrate a small part of the personal impact of DFV on children and young people, they highlight the long lasting affect that violence in the home can have on a child through into their adult lives.

Pregnancy is recognised as high-risk period for DFV.27 The exposure of an expectant mother to domestic violence has been associated with not only the increased risk of miscarriage and stillbirth but also poor foetal growth and impaired foetal brain development.28 Despite being recognised as a high risk period, there is little intervention evidence available to develop effective programs for this target group.

Sustained exposure of a child to DFV can negatively impact the development of interpersonal relationships and the child’s developing brain which then in turn impacts positive developmental outcomes in later life where those outcomes are reliant on secure attachments as children.29

As briefly touched on earlier in this submission, there is an extensive research base which indicates that children affected by domestic violence experience negative impacts to their physical, psychological, emotional, social, behavioral, developmental and cognitive wellbeing and functioning.30 These impacts can be manifested in a range of psychological and behavioural impacts including but not limited to:

- aggression
- antisocial behaviour
- social incompetence
- inabilities to form secure attachments
- anxiety
- depression
- high levels of general distress
- trauma symptoms including, traumatic avoidance, remembering traumatic events, traumatic arousal and possible diagnosis of post-traumatic stress disorder.
- problems with temperament31
- low self-esteem
- the presence of pervasive fear
- loneliness
- school difficulty
- peer conflict
- impaired cognitive function

28 Special Taskforce on Domestic and Family Violence (2015), Not now, not ever – Putting an end to Domestic and Family Violence in Queensland, p143.
29 Special Taskforce on Domestic and Family Violence (2015), Not now, not ever – Putting an end to Domestic and Family Violence in Queensland, p143.
• increased likelihood of substance abuse.32

These findings however are hard to attribute directly, and solely, to the impact of domestic violence in the home due to the interrelated nature of domestic violence’ co-existence with child abuse, sexual abuse, maltreatment and other types of victimisation.33

Researchers also caution the need to not overly pathologise children who are affected by domestic violence.34 In a report by the Australian Domestic and Family Violence Clearinghouse (2011), cited research by Kitzman et al, (2003) noted ‘that while a large number of children who had witnessed physical interparental violence fared worse, a third of these children fared as well as or better than children who had not witnessed violence, implying that children can and do cope’.

Based on the potential significant impact of DFV on children the QFCC recommends the National Children’s Commissioner maintain a leadership role (at a national level) to ensure the inclusion of outcomes for children in the national agenda for addressing domestic violence.

Separation and high parental conflict – including the child’s voice and training for professionals to identify DFV

A child’s right to voice their concerns in any circumstance should be upheld and strongly advocated for, and as such is included in the United Nations Convention on the Rights of the Child. All children should be able to identify and have access to a person or service which allows them to ask questions, share concerns and seek support without fear of repercussion. From a DFV consideration, the right of a child to express their opinions to the court in a family law matter seeking parenting agreements following separation is vital. Even more apparent, is the research of Bagshaw et al. (2010) which found there is no standardised screening process to establish the presence of violence, and some legal and social sector staff lack the training and skills to identify and recognise DFV.35

In a submission to the Family Law Council on the intersection of the child protection and family law court systems, the QFCC advocated for “the continued promotion and sustained advocacy of a child or young person’s right to voice their concerns in family law matters while avoiding exposure to parental conflict”. This right for a child to share their opinions, should not be used however as a mechanism for mediators and parental parties to make the child feel responsible for decisions on parenting arrangement or to solve access issues.

Additionally, research has shown that while mothers and children can cope with and recover from violence, their wellbeing and the mother’s ability to parent the child can be significantly impacted by the continuation of DFV during and after the separation process.36 This experience of violence is often lengthy as families who have a history of domestic violence often take longer to establish parenting arrangements.

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32 Australian Institute of Criminology, Richards, K (2001), Children’s exposure to domestic violence in Australia, Trends and issues in crime and criminal justice, No. 419, p3, Australian Government
Public education and attitudes to domestic violence
As mentioned earlier in this submission, surveys have been effective tools in establishing the communities’ understanding of and exposure to domestic violence. The 2009 National Survey on Community Attitudes to Violence against Women was commissioned by the Australian Government and tasked to the Victorian Health Promotion Foundation (VHPF). While the survey was to establish a benchmark against which changes in attitudes to violence against women could be monitored, it was also established to better understand community attitudes to influence future prevention initiatives, targeted interventions and to create a culture of non-violence and equal, respectful relationships between men and women.37 The survey findings on attitudes included:

- Most people in the community have a broad understanding of domestic and sexual violence and its impacts, and do not condone it.38
- In terms of identifying factors to predict attitudes to violence against women, the strongest predictors for pro-violence attitudes were being male and having low levels of support for gender equity or equality. Age was also identified as a predictor and in particular, ‘younger respondents were significantly less likely to rate some physical forms of violence as ‘very serious’.39 Also noted in a research report, Young Australians and Domestic Violence, was the finding that pro-violence attitudes were greatest between the ages of 12 to 14 years.40
- The survey identified that the youngest groups (and oldest groups) were the least likely to know where to go for support.41
- While young people had a strong understanding of domestic violence from a criminal violence perspective, they were less likely than older respondents to understand the complex aspects of violence in relationships, including the range of behaviours (and level of seriousness) which constitute domestic violence.

Addressing the impacts of domestic violence on children is inherently complex as the response may also involve addressing the intricacies of family dynamics, other relatable negative impacts (as discussed earlier in Question 2), role of the care giver and the re-establishment of the mother child connection. Children and young people need to be provided with the opportunity to learn to recognise violent behaviours in the hope that they can divert from the path of modelling the learned behaviours of domestic violence in the home.

Conclusion
The QFCC commends the work of the National Children’s Commissioner in drawing attention to the important matter of the effect of domestic violence on children and trust that the information provided in this submission will be of assistance with shaping the agenda on this topic.

We look forward to working with the National Children’s Commissioner to ensure the inclusion of the child’s voice in the greater national domestic violence discourse and strategic development.

37 Victorian Health Promotion Foundation (2009), National Community Attitudes towards Violence against Women Survey 2009 Fact Sheet.
38 Victorian Health Promotion Foundation (2009), National Community Attitudes towards Violence against Women Survey 2009 Fact Sheet.
39 Victorian Health Promotion report, p9
41 Victorian health promotion report