

Family Violence Position Paper

Understanding the causes and consequences of family violence, and appropriate responses—to create a safer future for all Australians.

Authors

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About Relationships Australia Victoria

Relationships Australia Victoria is a community-based, not-for-profit organisation that has been providing family and relationship support services since 1948. Our services are for all members of the community, regardless of their religion, age, gender, sexual orientation, lifestyle choice, cultural background or economic circumstances. For more information, visit www.rav.org.au

Acknowledgements



We're committed to providing safe, inclusive and accessible services for all people.



We acknowledge First Nations peoples as the Traditional Owners and Custodians of the lands and waterways of Australia and support their right to self-determination and culturally safe services.

We recognise the lifelong impacts of childhood trauma. We recognise those who had children taken away from them.

Images for illustrative purposes only.

Acronyms and initialisms

| | |
|-------------|----------------------------------|
| IPV | intimate partner violence |
| MBCP | men's behaviour change program |
| RAV | Relationships Australia Victoria |

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Executive summary

- **Family violence is a significant problem in Australian society.** Family violence services are experiencing high demand.
- **There has been an alarming recent spike in serious family violence incidents**, including intimate partner homicides. While there is stability or improvement on some measures of prevalence, family and intimate partner violence (IPV) remain far too common in Australia.
- **Family violence most commonly comprises IPV perpetrated by men against women**, who are greatly overrepresented as victims of family violence. However, men and boys also suffer family violence, and women may also be perpetrators. All victims of family violence deserve compassion and access to services. This acknowledgement must exist alongside an understanding of the important differences in the ways that men and women typically use violence within families.
- **People who identify as lesbian, gay, bisexual, transgender, intersex or queer experience IPV at similar rates to those who identify as heterosexual**, Australian and international surveys suggest.
- **The consequences of family violence are wide-ranging and severe.** They include injury, disability, poverty, homelessness, physical and mental ill-health, and death.
- **Aboriginal and Torres Strait Islander peoples are disproportionately affected** by family violence, reflecting factors including intergenerational trauma, poor practices from frontline services, mistrust in these services, and challenges in accessing services for those living in regional or remote locations.
- **A significant number of Australian children experience family violence.** Family violence affects children's health and wellbeing, development and schooling, and is the leading cause of homelessness among children. There is considerable overlap between the issues of parental partner violence, child maltreatment and filicide.
- **Family violence is associated with structural, social and ideological factors**, including institutionalised power differences between men and women. Male violence is often minimised in our society.
- **The perpetration of IPV is associated with a wide range of individual variables**, regardless of their contribution relative to sociopolitical factors. These include psychological, pathological and socio-economic variables. This understanding points to the need for family violence prevention efforts to address a broader range of determinants.
- **Coercive control is a common factor**, particularly for violence perpetrated by males against female intimate partners. In this context, violence can occur when expectations of control are challenged. There is a heightened level of risk leading up to, during and immediately after separation.
- **Prevention efforts must tackle the problem of family violence before it begins (primary prevention), as well as after perpetration and victimisation (early intervention, recovery and response)**, and must occur across the spectrum of micro to macro levels.
- **Promoting gender equality remains an important part of primary prevention**, and strategies aimed at young people are particularly important.
- **Men's behaviour change programs are key perpetrator interventions**, with reported positive changes among participating men. **More rigorous and nuanced evaluations of these programs are needed** to demonstrate improved safety for women. **Men's behaviour change programs are just one tool among the many required** to address family violence.
- **We believe all Australians should be safe within their intimate and family relationships, and that there is much more work to be done in order to meet this goal.**

Introduction

In 2024, Victorians witnessed an alarming number of high-profile incidents of family violence. Relationships Australia Victoria (RAV) holds considerable expertise in the area of family violence, particularly related to services supporting victim-survivors, and behaviour change work with perpetrators.

In October 2024, RAV prepared an internal Background Paper to support its workforce and leadership, including those working in non-family violence specific programs, in their understanding of family violence and its consequences, as well as causal factors and corresponding approaches to the prevention of violence.

The Background Paper summarised the latest data on prevalence, including injuries and deaths, and covered key issues and flashpoints in academic and public discussion of family violence issues.

This Position Paper provides an organisational response to the data and issues canvassed in the Background Paper.

This Paper reflects RAV's position on family violence, its causes and consequences, and appropriate responses to this complex problem.

2 Defining the problem

There are numerous definitions of family violence and terminology differs according to jurisdiction.¹ We use the term ‘family violence’ in keeping with the Victorian Government’s preferred terminology,² and have adopted a definition from Victorian statute law. Statistics used in this Paper are national, except where indicated otherwise.

Family violence is behaviour towards a family member that is: physically, sexually, emotionally, psychologically or economically abusive; that is threatening or coercive; or that in any other way controls or dominates the family member, and causes them to fear for their own safety or wellbeing or that of another person.³

Intimate partner violence (IPV) occurs in the context of current or former intimate relationships. An intimate partner includes current partner, former partner, boyfriend/girlfriend/date, and ex-boyfriend or ex-girlfriend, regardless of whether the relationship was ever cohabiting.⁴

In keeping with usage in the sector and community more broadly, we use ‘family violence’ to cover both forms of violence, even though IPV can include violence from a former partner who is no longer, or never was, considered ‘family’.

2.1 Prevalence

Family violence occurs across all strata of society.

Existing data sources do not capture the full extent of family violence in all its forms, especially for some subgroups of the population. Nevertheless, population surveys, recorded crime data and measures of service demand all indicate that family violence is common and is a significant problem in Australian society.

Approximately 20% of adult Australians have experienced physical and/or sexual violence by an intimate partner or family member since the age of 15. Women (27%) are more than twice as likely as men (12%) to have experienced family or intimate partner violence of this kind. Similar proportions of Australians have experienced violence, emotional abuse or economic abuse by a cohabiting partner.⁵

Australian and international surveys suggest that people who identify as lesbian, gay, bisexual, transgender, intersex or queer experience intimate partner violence at similar rates to those who identify as heterosexual.⁶

In Australia, Aboriginal and Torres Strait Islander peoples experience disproportionate incidence and severity of family violence.⁷

Family violence services are experiencing high demand, which exceeds capacity.

Many services are operating waiting lists. Recent data indicates ‘a sector struggling to keep up under current funding models’.⁸ Services report high staff vacancies, contributing to workforce fatigue, burnout and attrition. The need to manage demand places pressure on services to reduce support periods, creating a point of stress for practitioners with constrained ability to meet the needs of victim-survivors.⁹

2.2 Change over time

Measuring the prevalence of family violence, let alone change in prevalence over time, is not straightforward.

Trends may differ depending on which indicators are used, and interpretation of trends then adds another layer of complexity. Increase in some indicators may indicate success in tackling family violence, because victim-survivors feel better able to report it. This makes it difficult to judge whether efforts to reduce family violence are ‘working’.

Data from the most recent Personal Safety Survey suggests improvement on several measures, with decreases in the 12-month prevalence rates of IPV and cohabiting partner violence experienced by adult women, and in emotional abuse experienced by both men and women, between 2016 and 2021–22.¹⁰

However, caution must be exercised in the use of statistics from 2021–22, given the context of the COVID-19 pandemic and associated restrictions at this time.¹¹ The pandemic resulted in first-time or escalating violence for many women, and stay-at-home orders made it more difficult to disclose experiences of violence in the home.¹²

Further, the most recent Personal Safety Survey predates an increase in intimate partner homicide between 2021–22 and 2022–23,¹³ which may reflect a spike in family violence more broadly. Counting family violence incidents or people with experience of family violence is not the same as measuring severity, which may be better assessed using family violence deaths (see ‘4.2 Deaths resulting from family violence’).

Of further concern is a statistically significant increase in experience of sexual violence by women (family or other), over a longer (10-year) period.¹⁴

2.3 International context

Family violence, and in particular violence against women, is a world-wide problem. There is international concern about an apparent increase in sexual and intimate partner violence, particularly among younger people.¹⁵

The World Health Organization’s 2018 estimates demonstrate regional variation in the lifetime exposure of ever-partnered women aged 15–49 years to physical and sexual IPV. Exposure is lower in Australia than in the ‘Least Developed Countries’ but above the average for high-income countries and areas.¹⁶

Australia can and must do better in its efforts to reduce family violence.

3 Why focus on women?

Family violence most often, though not exclusively, comprises intimate partner violence perpetrated by men against women.

Attention to violence against women specifically stems from the disproportionate impact of family violence on women. IPV is the most common form of violence experienced by women,¹⁷ and women are greatly overrepresented as victims of intimate partner homicide (see '4.2.1 Intimate partner violence homicides').

'Family violence may manifest in a range of different familial or kinship relationships... However, in the overwhelming majority of cases domestic and family violence is perpetrated by a man against his current or former female intimate partner.'¹⁸

The disproportionate number of women who are victims of family and intimate partner violence by men also demands specific attention to patterns of behaviour that commonly lead to violence perpetrated by men against women, such as coercive control (see '6.1.3 Coercive control'). However, boys and men also suffer these forms of violence. Survey data shows that 1 in 8 Australian men over the age of 15 have experienced family or intimate partner violence.¹⁹

Discussion of male violence against women can be alienating to some who may feel that all men are maligned by this focus. Recent contributions to public debate challenge a universal focus in the prevention of violence against women, and seek a more targeted approach, recognising that most boys and men are not at risk of hurting anyone.²⁰

We firmly believe, however, that men, as well as women, benefit from efforts to reduce men's violence against women.

At the most immediate level, these efforts can reduce retaliatory and defensive violence by women against men (see '3.2 Family violence perpetrated by women').²¹ More broadly, men gain freedom from cultural expectations of dominance, including those which associate masculinity with violence.²²

3.1 Family violence perpetrated by men

Some commentators argue that the problem of male violence in general is a more appropriate focus than 'violence against women', since men are most often perpetrators of violence in society, family and other, regardless of the victim's gender.²³ Of Australian family violence offenders in 2022–23, almost 4 in 5 (79%) were male;²⁴ further, 86% of all male homicide victims and 87% of all female homicide victims were killed by a male primary offender.²⁵ Men living with male partners experience IPV at about twice the rate of men living with female partners.²⁶ However, shifting the focus to predominantly male violence, rather than predominantly female victimisation, still requires gendered explanations and strategies to address the 'association of masculinity and violence, the legitimacy of violence to men, and men's sense of entitlement to use violence'.²⁷

3.2 Family violence perpetrated by women

Studies measuring a broad range of behaviours used in the context of couple conflict tend to show that similar proportions of men and women use violence in the home. While there is no acceptable level of physical violence, the 'situational' or 'expressive' kind of violence that shows 'gender symmetry' tends to occur at the lower end of the scale in terms of severity, and differs from control-motivated 'instrumental' violence that is a feature of much male violence against female intimate partners.²⁸ The injury rate for assaults by men is many times greater than the injury rate for assaults by women, and women's injuries are more serious.²⁹

The lesser severity of violence by women against men does not mean it is inconsequential.³⁰ Regardless of the differences from men's use of violence, women's capacity for IPV must be acknowledged, including the experiences of women living in same-gender couples.³¹

All victims of family violence deserve compassion and access to services. This acknowledgement must exist alongside an understanding of the important differences in the ways that men and women typically use family violence.

4 Consequences of family violence

There are wide-ranging and severe consequences of family violence.

Consequences of family violence include injury, disability, poverty, homelessness, physical and mental ill-health, and death.³² Aside from injury and increased mortality, there are physical health consequences (e.g. alcohol and drug addiction,³³ increased reproductive disorders and poorer pregnancy outcomes for women),³⁴ psychological consequences (e.g. increased depression and post-traumatic stress disorder)³⁵ and economic consequences (e.g. decreased income and employment).³⁶ We know that only some of these consequences are captured in Australian data.

4.1 Hospitalisations resulting from family violence

In 2021–22, a third of assault hospitalisations (32% or 6,500) were due to family violence.³⁷ In 63% of hospitalisations, the perpetrator recorded was a spouse or domestic partner; in 37% the perpetrator recorded was a parent or other family member. The hospitalisations counted relate to more severe (and mostly physical) experiences of family violence.³⁸

Nearly three quarters (73%) of family violence hospitalisations were for women. The family violence hospitalisation rate was 36.7 per 100,000 women, compared to 13.6 per 100,000 males. This rate has increased over the 12 years for which data is available, though is below its peak in 2019–20.³⁹ A total of 4,620 Australian women aged 15 years and over were hospitalised because of a family violence assault, more than three quarters of whom had been assaulted by an intimate partner. By comparison, IPV accounted for about a third of male family violence hospitalisations.⁴⁰

4.2 Deaths resulting from family violence

Family violence is fatal. In 2022–23, approximately a third (34%) of all homicides were ‘domestic’, making domestic homicide more common than acquaintance homicide (28%) or stranger homicide (15%). Intimate partner homicides were the most common form of domestic homicides, accounting for 48% of domestic homicides, and 16% of all homicides.⁴¹

4.2.1 Intimate partner violence homicides

A significant proportion of IPV homicides occurs in the context of family violence; i.e. there is an identifiable history of abuse—not always physical—between the parties. There were 311 homicides between intimate partners that were preceded by an identifiable history of family violence between 2010 and 2018,⁴² or 1.5 per 100,000 people over the age of 15 years. This is likely to be an undercount of the true incidence of IPV homicides, given the high proportion of violence that is not disclosed or reported.⁴³ Victoria recorded 1.0 IPV homicides per 100,000 population aged over 15 years.⁴⁴ Incidents of IPV homicide increased between 2021–22 and 2022–23. We note that this reverses medium-term trends: the female IPV homicide rate decreased by two thirds in the 34-year period to 2022–23, while the male IPV homicide rate was at its lowest rate since National Homicide Monitoring began (see Figure 1).⁴⁵

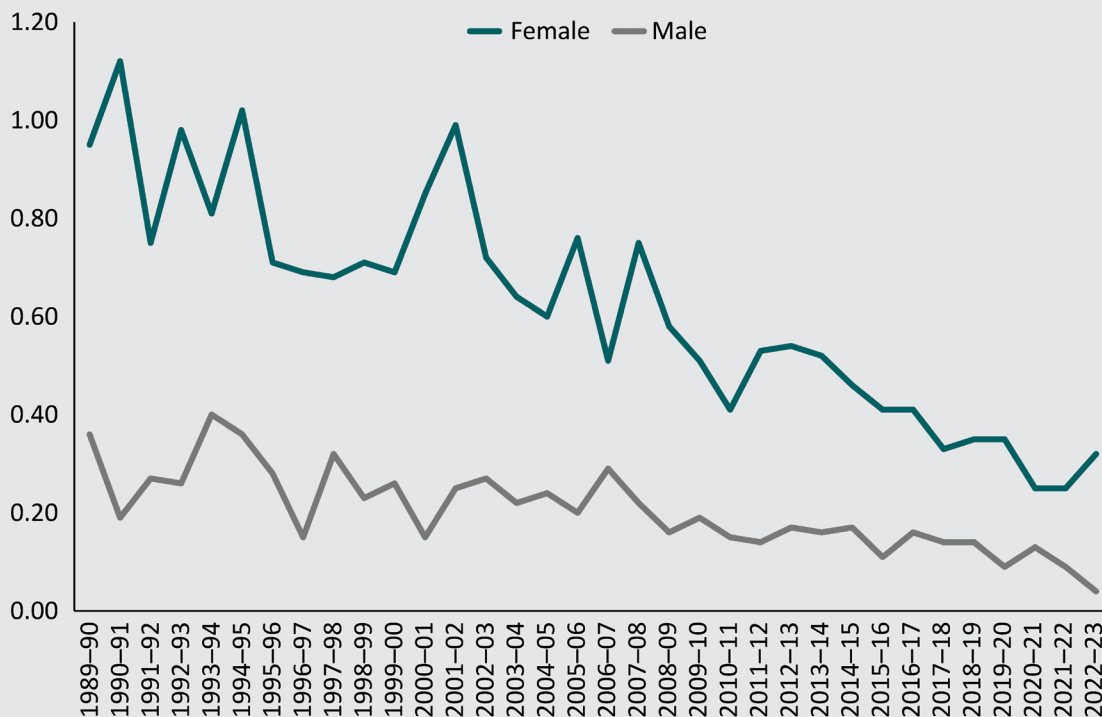


Figure 1: Incidents of IPV homicide by victim sex, 1989–90 to 2022–23 (rate per 100,000 population aged 18 years and over)
Source: Miles and Bricknell, 2024, p.11.¹⁶⁰

4.2.1.1 Patterns by victim sex

While males are consistently more likely than females to be both victims and offenders when it comes to homicide more broadly, females are greatly over-represented as victims of intimate partner homicide.⁴⁶ In 2022–23, nearly 9 in 10 IPV homicide victims were female.⁴⁷ The killing of female intimate partners is termed ‘femicide’, acknowledging the gendered nature of lethal family violence.⁴⁸ On average, in Australia, one woman a week is killed by her intimate partner; however, an apparent increase in the rate of femicide, which at some points in 2024 equated to 1 death every 4 days, is cause for alarm.⁴⁹

The rate of female victimisation as a proportion of all victimisation has increased over time,⁵⁰ while the rate of women killing male partners has declined as ‘escape routes’ for women experiencing IPV improve, increasing the likelihood that a woman will leave a violent relationship before resorting to violence herself.⁵¹ About a fifth of IPV homicide cases in a family violence context between 2010 and 2018 involved a female offender killing a current or former male partner. In 71% of these cases, the female partner was also the primary IPV victim.⁵²

4.2.1.2 Aboriginal and Torres Strait Islander peoples in IPV homicides

Aboriginal and Torres Strait Islander peoples are overrepresented as both victims and offenders in IPV homicides, reflecting factors including intergenerational trauma, poor practices from frontline services, mistrust in these services, and challenges in accessing services for women living in regional or remote locations.

Aboriginal and Torres Strait Islander women comprised a quarter of femicide victims between 2010 and 2018.⁵³

5 Children as victims of family violence

Significant numbers of Australian children experience family violence.⁵⁴

Around 2.6 million adult Australians (13%) report having witnessed partner violence towards a parent before the age of 15.⁵⁵ In Victoria, children are present at about a third of family violence incidents.⁵⁶ Across family violence incidents attended by Victoria Police in 2021–22, children represented 10% of ‘affected family members’ (i.e. victims or those harmed the most), while pregnancy or new birth were recorded in 5% of incidents.⁵⁷

Children are not only ‘witnesses’ to family violence, as they have been imagined in the past, but are victims too.⁵⁸

In situations involving family violence, children may be forced to watch or participate in assaults, or may intervene in an effort to stop violence, and may become the intended or unintended victims of assault or murder themselves. Family violence affects children’s physical and mental health and wellbeing, development and schooling, and is the leading cause of children’s homelessness in Australia. Family violence often occurs alongside disadvantage and multiple other risk factors.⁵⁹

Most women killed by intimate partners are mothers.⁶⁰ Parental intimate partner homicide has particularly severe psychological, social, physical, and academic consequences for surviving children (e.g. post-traumatic stress, attachment difficulties, weight and appetite changes, drops in school grades). Most surviving children have also been exposed to prior violence at home.⁶¹

It is well-established across international studies that family violence often co-occurs with other forms of child maltreatment, including physical, emotional and sexual abuse.⁶² In some jurisdictions and frameworks, including Victoria, family violence is recognised as a form of child abuse in itself.⁶³

Since separation increases the risk of family violence, children are also particularly at risk of experiencing family violence during and after parental separation.⁶⁴ A majority of separating parents who report emotional or physical abuse in their relationship also report that their children have seen or heard the abuse.⁶⁵

5.1 Filicide

Among the most shocking family violence incidents are those in which children are killed. Filicide is the killing of a child or children by a parent and comprises the second largest proportion of domestic homicides after intimate partner homicide.⁶⁶ Despite the overall rate of domestic homicide trending downwards, the rate of filicide has remained steady.⁶⁷

There is considerable overlap between the issues of filicide and that of IPV; and, further, between filicide in a family violence context, and child abuse.

Of the family violence filicides that occurred in Australia between 2010 and 2018, there was a history of IPV in 9 out of 10 cases, and a history of child abuse in 8 out of 10 cases.⁶⁸

5.1.1 The role of gender in filicide

Gender plays no role in filicide victimisation; filicide is perpetrated against boys and girls equally. Both genders perpetrate filicide too.

Filicide offending in a family violence context is, however, gendered. Across 2010–2018 cases, the proportion of male perpetrators was 60% considering all filicides, rising to 68% when focus was restricted to family violence contexts. In family violence contexts, men were 97% of primary IPV perpetrators.⁶⁹

There are recognised differences in filicide perpetration based on gender of offender. Most female offenders have experienced family violence, most often IPV. The high rate of IPV preceding filicides indicates that efforts to reduce IPV should consider risks for children of either or both partners too.⁷⁰

6 Causes, predictors and trajectories

6.1 Gender inequality

Family violence is associated not only with individual characteristics of offenders and victims, but with broader structural, social and ideological factors.⁷¹

Feminist theories hold that violence in intimate heterosexual partnerships is distinct from other forms of violence because it occurs in the context of gender-based, institutionalised power asymmetry.⁷²

While IPV is most often investigated at the individual level, cross-national comparisons suggest that women's economic equality and independence at the macrosocial level reduces family violence.⁷³ At the country level, traditional beliefs about gender roles are predictive of sexual IPV victimisation and economic gender inequality is associated with higher frequency of physical IPV victimisation, while attitudes more favourable toward gender equality are related to lower rates of psychological IPV.⁷⁴

6.1.1 Masculinity

The concept of 'hegemonic masculinity' refers to a cultural ideal which shapes attitudes and practices of men and promotes the dominance of men and the subordination of women.⁷⁵ In many societies, this ideal has served to legitimise violence and to associate masculinity with control. While hegemonic masculinity does not necessarily involve violence, many of the traits associated with it are also risk factors for family violence perpetration.⁷⁶ Male violence is often minimised in our society.⁷⁷

6.1.2 Sexism

At an attitudinal level, sexism supports beliefs that justify violence, and at the behavioural level, it links to aggression and violent behaviour towards women.⁷⁸ Individuals with sexist attitudes are more likely to blame female victims for IPV, and male IPV offenders show a greater propensity to blame victims than other men. Victim-blaming attitudes are strongly related to the acceptability and perceived severity of IPV against women.⁷⁹

6.1.3 Coercive control

There is now increased attention to the role in abusive intimate relationships of coercive control; '[a] pattern of intentional systematic behaviour designed to assert and maintain control and dominance over another person'.⁸⁰ This is not a discrete type of violence but rather provides context for abusive behaviours. An Australian study found that more than half of women with recent experience of coercive control (e.g. jealousy and suspicion of friends, constant insults, monitoring of movements and financial abuse) had also experienced physical abuse, while 30% had experienced sexual violence.⁸¹

The dynamics of coercive control are illustrated by the range of abusive behaviours used by men who ultimately kill an intimate partner. A majority have used emotional/psychological abuse, physical abuse and social abuse, with large minorities also using stalking, financial abuse and sexual violence.⁸²

'... most domestic abuse is not just a series of consequential incidents, but an unrelenting system of entrapment of the victim by the perpetrator who uses everything at their disposal to enforce their will over the victim and their children.'

'[Coercive control] often continues long after the relationship is over and is a consistent dynamic preceding almost all domestic homicides.'⁸³

The gendered nature of controlling behaviour is attributed to the way in which men have internalised patriarchal expectations of dominance. Violence may follow when these expectations are challenged.⁸⁴

6.2 Separation

The period leading up to, during and immediately following separation involves a heightened level of risk of family violence.

This is particularly for women, and particularly when women seek to leave relationships.⁸⁵ Rates of IPV towards separated women are high, and violence by former partners tends to be more serious.⁸⁶ This is consistent with the understanding that abusive men are most likely to perpetrate violence when their sense of control over an intimate partner is breaking down.

We know that the risk of IPV homicide increases when women leave abusive partners, which is important to understanding why some women remain in abusive relationships.⁸⁷ Among Australian IPV homicides between 2010 and 2018, actual or intended separation was a feature in 58% of cases where a male killed a female intimate partner.⁸⁸

6.3 Characteristics of perpetrators

Attention to the individual characteristics of family violence perpetrators can be seen as underplaying sociopolitical factors that support violence, or 'explaining away' problematic behaviours that are endemic.

Nevertheless, the perpetration of IPV, in particular, is associated with a wide range of individual variables, regardless of their contribution relative to sociopolitical factors.

Some of these variables are physiological or pathological in nature. There are genetic factors associated with aggressive behaviour which are more common in men with histories of violence; specifically, variations in the gene related to the metabolism of certain neurotransmitters, and in the serotonin transporter gene.⁸⁹ While genes may play a part in explaining family violence, it is likely to be a small part; a twin study found that heritability accounted for 16% of variance in physical IPV.⁹⁰

Hormonal factors may also play a part. Studies suggest that perpetrators of IPV have higher testosterone/cortisol ratios, and also experience greater increases in cortisol following exposure to a stressful event.⁹¹ It is thought that the testosterone/cortisol ratio moderates the relationship of antisocial and personality traits and anger expression, and may explain why certain personality traits are associated with a high risk of becoming violent.⁹²

Research points to a link between mental illness and intimate partner homicide, at the extreme of family violence offences.⁹³ Among 235 Australian perpetrators of femicide sentenced between 2007 and 2016, nearly half (46%) had a history of mental illness.⁹⁴

Men who perpetrate severe, chronic partner abuse often exhibit longstanding antisocial behaviour and emotional dysregulation.⁹⁵ The proportion of perpetrators with a diagnosable psychiatric disorder has been found to increase with type and severity of violence.⁹⁶

Finding that male IPV perpetrators differ from other men in terms of anger, hostility and attribution (tendency to attribute partner behaviour to negative intent), Hamberger et al. argue the following.

'[The] study of psychopathology and psychological processes does not excuse the batterer for bad behavior. Rather, it may increase professionals' understanding of abuse and ways to prevent and end it.'⁹⁷

Studies have also demonstrated linear relationships between individual psychosocial variables and severity of IPV. These include victimisation during childhood, personal distress, low income and substance use.⁹⁸

6.3.1 Trauma

Early exposure to sexual abuse and IPV can increase the risks of both victimisation and perpetration of family violence in adulthood.⁹⁹ Trauma can induce hyper-arousal, fostering a constant sense of threat.¹⁰⁰ In working with perpetrators, RAV believes it is important to address trauma, and the connection between men's experience of victimisation and their violent behaviour, without reinforcing or validating perpetrators' victim-identification, and while still promoting personal responsibility and agency.¹⁰¹

6.3.2 Alcohol and drug use

While alcohol use is neither necessary nor sufficient for violence to occur, alcohol use is a globally consistent risk factor for IPV. Alcohol reduces the capacity to self-regulate or to de-escalate conflict, lowers inhibitions and impairs judgement, increases risk-taking and potentially increases victims' dependence on a violent partner.¹⁰²

The relationship between alcohol use and IPV is significant, and the effect size for the relationship between male IPV offending and both alcohol and drug use is strong.¹⁰³ The odds of an abusive man perpetrating partner violence increase substantially on days when alcohol is consumed.¹⁰⁴ Over 60% of Australian male IPV homicide offenders between 2010 and 2018 engaged in 'problematic' drug and/or alcohol use in the lead-up to or at the time of the homicide; with a quarter using both.¹⁰⁵

6.3.3 Patterns of offending and interactions with the justice system

Family violence offending often forms part of a broader pattern of offending, and often starts young.¹⁰⁶ Relative to other adolescent perpetrators of other forms of offending, adolescent family violence offenders are much more likely to become adult family offenders, and to reoffend more frequently.¹⁰⁷

Among Australian men who killed their female intimate partners over a 10-year period to 2016, more than 70% had at least 2 previous interactions with police, the legal system or child protection.¹⁰⁸ Over 20% had engagement with at least one support service, most commonly a counselling or mental health service, underlining the importance of screening for risk of perpetration as well as victimisation.¹⁰⁹ Many perpetrators of IPV homicide already have convictions for family violence against the victim or a former partner, and/or other crimes.¹¹⁰

7 What can be done?

There are divided opinions on how to stop family violence, reflecting different theories and perspectives on the roots of the problem.

7.1 Prevention

Prevention efforts must tackle the problem of family violence before it begins, as well as after perpetration and victimisation.

Primary prevention works across the whole population in aiming to change the social conditions (i.e. attitudes, norms, structures) that enable family violence. Secondary intervention, or early intervention, involves targeted efforts to prevent recurrence or escalation where there are early signs of violence, or to educate people to recognise and respond to these signs, and includes efforts to reduce the likelihood of violence in high-risk groups. Finally, tertiary intervention, or response and recovery, includes support for victim-survivors and children during or after they have experienced violence, and interventions to stop further violence, including work with perpetrators.¹¹¹

Prevention must occur across the spectrum of micro to macro levels, from strengthening individual knowledge and skills, to engaging and educating communities, and influencing policies and legislation.¹¹²

RAV works at both the individual level, for example, through our men's behaviour change programs (MBCPs) for perpetrators, and at the community level, for example our Respect and Connect relationships education program in schools. We believe this work is vitally important; at the same time, we know that no single program is sufficient.

Recent review findings confirm that 'multi-component prevention work is more impactful than single component interventions' in reducing violence against women. It is suggested that a 'saturation model,' involving coordinated, multi-component, place-based approaches, implemented with adequate intensity, can achieve population-level change.¹¹³

7.1.1 A gender equality approach to prevention

Since gender inequality is a factor underlying much family violence, promoting gender equality is an important part of primary prevention.

Initiatives include educational programs and media campaigns aiming to increase awareness of family violence, encourage reflection on gender attitudes, and interrupt connections between masculinity and gendered violence.¹¹⁴

Because early exposure to sexual violence and IPV can increase the risk of both victimisation and perpetration in adulthood, strategies aimed at young people are particularly important.¹¹⁵

Programs training young people to recognise different forms of violence and their underpinnings in myths, power structures and traditional gender roles can improve egalitarian attitudes and reduce gender-based violence.¹¹⁶ Gender equality is a core foundational principle of RAV's primary prevention work in schools, and of all our relationship and parenting education programs. Strengthening positive and respectful relationships by teaching respect, empathy and emotional regulation is, in itself, an important prevention objective.¹¹⁷

We acknowledge that the framing of prevention strategies in terms of gender equality often meets with resistance, and in some cases aggressive backlash.¹¹⁸ Men do not conform to a single model of masculinity, nor 'perform' masculinity in the same way across different contexts;¹¹⁹ therefore, prevention work must capture these complexities and avoid essentialist, gender binary approaches.¹²⁰

7.1.2 Is primary prevention 'working'?

The impact of primary prevention is difficult to capture, partly due to a lack of comprehensive evaluation. It is impossible to know what the contemporary prevalence of family violence might be without primary prevention efforts.¹²¹

We acknowledge recent arguments that the current approach to primary prevention is too narrow in focus, and that family violence remains too common.¹²² Addressing gender inequality at the societal level, or even sexist attitudes at the individual level, is necessary but insufficient; 'alone, the effects of such work will be slow'.¹²³ In keeping with the idea that prevention must span primary, secondary and tertiary stages, as well as micro to macro levels, individual characteristics associated with perpetration point to the need for targeted and multi-pronged efforts to tackle family violence by all possible means.

In primary prevention as in perpetrator interventions (see '7.2 Behaviour change interventions'), effective, evidence-based strategies which address the full range of long- and short-term determinants of violence are required.¹²⁴ The prevention of and recovery from trauma and abuse are particular areas of focus for RAV, and our child and parenting programs promote social and emotional competencies which are important protective factors.¹²⁵

We support calls to address multiple pathways to family violence.

These pathways include systems abuse (e.g. the manipulation of child support, social security and family court systems) and commercial determinants originating with pornography, alcohol and gambling industries, along with strategies using gun control, alcohol pricing, age verification for online pornography and strategic policing.¹²⁶

7.2 Behaviour change interventions

MBCPs are group interventions which aim to achieve change in the behaviour of men who use violence by holding them accountable and responsible for their violence.¹²⁷ Psychoeducational and psychodynamic approaches, as well as approaches based on cognitive behavioural therapy, are common elements often used in conjunction with one another.¹²⁸

Many Australian MBCPs, including those offered by RAV, are partly underpinned by narrative therapy, through which men are invited to identify the beliefs and ideas from which violent and controlling behaviours stem.¹²⁹ An openness to men's stories, whilst still emphasising women's safety and men's accountability, can reduce resistance and help men find the internal motivation for change.¹³⁰

While many MBCP evaluations report positive changes for participating men on measures including improved attitudes and accountability, the link between accountability and the safety of women and children, has proved difficult to demonstrate.¹³¹ Multi-site evaluation methods suggest that programs situated within a wider community response can improve the safety of most women.¹³²

RAV offers MBCPs involving group work addressing gendered norms, as well as case management and individual post-MBCP support sessions.

We support the view that more rigorous and nuanced evaluation of MBCPs is needed. We further accept that MBCPs are just one tool among the many required to address family violence.

7.2.1 Tailoring of perpetrator interventions

There are strong arguments for perpetrator programs to be matched to the characteristics of attendees and tailored to more specific perpetrator issues, demographic cohorts and cultural groups.¹³³ The 2015 Victorian Royal Commission into Family Violence found that perpetrator interventions in Victoria were not sufficiently broad, diverse and/or tailored, leading to trials of perpetrator case management and community-based interventions targeting specific groups. The positive evaluation of these trials suggests that good practice combines individual and group work; addresses accountability using a trauma-informed approach; provides a holistic, wrap-around service; and allows flexibility for perpetrators with different needs and/or at varying stages of change.¹³⁴

7.2.1.1 Cultural specificity

The content of interventions in culturally- and linguistically-diverse communities should address the social and economic conditions of diverse groups of men; should be culturally relevant, acknowledging racism and men's experiences of changing gender dynamics; and should address culturally-specific supports for violence and gender inequality, drawing on local resources including male community and religious leaders.¹³⁵ Similarly, it has been argued that the effective engagement of men from refugee backgrounds must not only account for the intersection of gender inequality, structural disadvantage and culture, but also experiences of trauma, living through armed conflict, loss and forced displacement.¹³⁶

Although minimum standards and practice guidelines for perpetrator programs address the importance of responding to cultural diversity among program participants, there are few culturally-specific MBCPs in Australia.¹³⁷ RAV developed and has for many years delivered a Vietnamese MBCP, provided in language, and acknowledges the need for more such culturally-specific interventions.

7.2.1.2 Multi-issue treatments

There are also strong arguments for interventions to address co-occurring issues, including mental health and substance use, that may contribute to the frequency or severity of family violence.¹³⁸ In particular, we acknowledge the push for greater attention to the role of alcohol in family violence, and the recommendation that alcohol reduction strategies be integrated into existing behaviour change curricula.¹³⁹ Currently, few group-based IPV prevention curricula address alcohol. Strategies to address alcohol-related violence must operate at the policy and community levels, as well as at the individual level.¹⁴⁰ Examples include stronger alcohol regulation, and linking violence prevention work with drug and alcohol support groups.

7.3 Legal and policing interventions

The contact that most IPV homicide offenders have had with ‘the system’ is interpreted to mean that their offences, and the deaths of their partners or former partners, were preventable.¹⁴¹ However, legal and policing interventions, like behavioural interventions, report mixed results in terms of their impact in reducing family violence.

The recent review of the Family Relationships Services Program suggests that only a minority of separated adults are satisfied with family law service responses to safety concerns and family violence.¹⁴² Separated adults are most likely to feel safe using dispute resolution options and least likely to feel safe using a court. This data supports RAV’s goal of ensuring access to family dispute resolution, with appropriate safety measures, for as many clients as possible.

7.3.1 Reporting and policing

In 2022–23, there were 88,377 offenders proceeded against by police for family violence-related offences, most commonly assault and breach of violence and non-violence orders. Family violence offenders represented a quarter (25%) of all offenders nationally.¹⁴³

Family violence is, nevertheless, ‘chronically underreported’, including in Victoria.¹⁴⁴

Official reporting is low regardless of gender.¹⁴⁵ Although reporting in Australia has increased substantially in recent years,¹⁴⁶ many family violence incidents are never known to police.¹⁴⁷ Victim reporting to police is associated with reduced offending and does not appear to increase perpetrator retaliation.¹⁴⁸ However, victims may not report incidents for several reasons, including ‘because they perceive the events to be private or trivial, feel embarrassed, or fear reprisal from the perpetrator’.¹⁴⁹

7.3.2 Protection orders

Protection orders appear to improve victim-survivors' perceptions of safety and are associated with a small but significant reduction in severe re-victimisation, suggesting that they can reduce the severity of violence, including de-escalation to non-physical forms, rather than reducing prevalence.¹⁵⁰

There are no protection orders in place in many relationships with a history of violence, however, including in a majority of cases where a male offender kills a female partner.¹⁵¹ There are complex reasons for this.

Firstly, a criminal justice response is only triggered where family violence incidents are reported, and reporting is low. Secondly, there are known challenges in identifying the person most in need of protection through family violence orders.¹⁵² Thirdly, police investigations and court proceedings, whether family, civil or criminal, including intervention order applications, can trigger escalation of violent behaviour and increase risks to partners and children.¹⁵³ There is evidence that victim-survivors consider such proceedings, including intervention orders, a strong indicator of risk.¹⁵⁴

7.3.3 Charges and prosecution

Even where protection orders are in place, police do not always enforce breaches and may decide not to charge. Charges are more likely in more severe cases of family violence, where perpetrators have a prior history of family violence, and have an ongoing relationship with the victim.¹⁵⁵ Victims do not always want police to lay charges, for reasons including fear of or ongoing commitment to the perpetrator, preferring the perpetrator receive help rather than punishment, financial dependence on the perpetrator, wishing to shield children from criminal proceedings or from being without a parent, previous negative experiences or an expectation that prosecution will be unsuccessful.¹⁵⁶

Even when charged, perpetrators may be released on bail. Nearly 1 in 5 male IPV homicide perpetrators in the decade to 2016 was on bail or parole at the time of the murder or manslaughter, raising concerns that the bail system is failing victims of family violence.¹⁵⁷

Finally, the overall rate of prosecution in family violence matters is low.¹⁵⁸ Several international studies have found a lower prevalence of court convictions and incarcerations for men who kill intimate partners, compared to men who kill other men.¹⁵⁹

8 Conclusion

Family violence is a significant and complex social problem. It is also an appallingly common problem, affecting many Australians. Several indicators suggest longer-term reduction in family violence incidents, however, others suggest that Australia is far from its target of stopping family violence altogether. There has been a spike in intimate partner homicides, and, as in other countries, sexual violence persists at an alarming rate.

Family violence is strongly gendered, with women greatly overrepresented among victims, and perpetrators most often men. Nevertheless, there are male victims and female perpetrators. All victims of family violence, including men, deserve compassion, understanding and access to services.

Gender-based approaches to family violence have dominated for several decades and remain important in prevention and intervention work at societal and individual levels, alongside policing and legal responses. A wide variety of complementary interventions may be required to address a broader range of social and economic determinants, including more intensive and tailored work with individual perpetrators to address factors including trauma and substance misuse.

Relationships Australia Victoria will continue to undertake research and evaluation activities related to family violence, to engage and collaborate within and outside the sector, and to deliver and further develop our prevention, early intervention and recovery services.

We remain committed to stopping family violence, as we work towards our vision for all Australians to have positive, respectful, safe and fulfilling relationships.



9 Notes

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