

Family Violence: Issues and impact

**GIPPSLAND
WOMEN'S
HEALTH**



This position paper is one of two co-produced by Gippsland PHN, Gippsland Women's Health and Gippsland Family Violence Alliance to highlight the issues, crime reporting and associated impacts of family violence and violence against women and children in Gippsland.

Type	Definition and examples
Physical	Kicking, pushing, punching, slapping, hitting, smashing things, strangulation
Psychological	Threats to harm/ kill/ suicide, standing over, intimidation, gas lighting, driving too fast
Stalking	Following, checking emails, monitoring vehicle mileage, secret cameras & recording devices, social media
Social	Geographic isolation, not allowing partner to see friends and family, making social events uncomfortable
Sexual	Rape, forcing unwillingly sexual acts, forced to watch pornography, image based abuse, reproductive coercion
Financial	Controlling employment, taking control of money and assets, having to account for all spending
Emotional	Name calling, put downs, humiliating and degrading
Spiritual	Not allowing practice of beliefs, forced to change religion, not respecting religious practices

Gippsland family violence rates per 100,000 people, as at June 2021

Indicator	Bass Coast	Baw Baw	East Gippsland	Latrobe	South Gippsland	Wellington
Police call outs for family violence incidents	2,506	1,860	3,255 (#3 in Victoria)	3,311 (#2 in Victoria)	1,742	2,977 (#4 in Victoria)
Incidents where young people experienced family violence	210	289	503 (#5 in Victoria)	1,025 (#1 in Victoria)	194	430 (#7 in Victoria)
Ambulance call outs for a domestic/sexual violence event	75.5	77.8	146.8 (#11 in Victoria)	246.7 (#1 in Victoria)	97.5	126.7 (#23 in Victoria)

National data

Almost **31%** (6,500) of the 21,300 assault hospitalisations for adults aged 15 and over were a result of family and domestic violence.

Of these 6,500 hospitalisations:

73% (4,800) were female  **27%** (1,700) were male 

65% (4,300) had the perpetrator reported as a spouse or domestic partner.

35% (2,300) had the perpetrator reported as a parent or other family member.

38% (8,100) of assault hospitalisations did not specify the relationship between perpetrator and victim.

Impact on children and young people

 Children experience family violence at rates **1.8** higher in regional and remote areas than in major cities.

Children who experienced a police reported family violence incident:

77% had a future interaction with the justice system within five years of witnessing an incident.

54% experienced subsequent family violence incidents.

62% of children became protected persons on Family Violence Intervention Orders.

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The health and social impacts of family violence

In 2015, it was reported that family violence and violence against women and their children was costing Australia \$21.6 billion each year with estimates if no further action is taken to prevent violence against women, the costs will increase to \$323.4 billion by 2045.

Longitudinal consequences

In 2015, it was estimated that if no female aged 15 and over had experienced partner violence there would have been:



Acquired brain injury and family violence

The prevalence of Acquired Brain Injury (ABI) among victims of family violence attending a Victorian hospital over a 10 year period.

40%

of victims sustained a brain injury



18%

of victims were children under the age of 15 and 25% of them sustained an ABI

Perpetrators of Intimate partner violence were twice as likely to have sustained an ABI as the general population.

Family violence and homelessness

As reported by the Gippsland's Homelessness Network, Victorian Parliamentary Inquiry into Homelessness Submission 2020:

9120 women a year are becoming homeless after leaving their homes due to family violence and are unable to secure long term housing.

7690 are returning to their perpetrators due to having nowhere else to live.

Family violence is the biggest contributor to homelessness in Gippsland, affecting women, young people, children and men.



Emerging trends reported by Gippsland services

Family violence practitioners in Gippsland are seeing an increase in diagnosis of ADHD and/or ADD in children who have a history of experiencing family violence. Practitioners are concerned that the children's trauma history is going unexplored throughout the diagnostic process.

Women with intellectual disability are presenting with increasingly complex cases.

Family violence victims are presenting with increasing complexity: mental health distress, substance abuse, home insecurity, welfare concerns.

Increasingly there is more than one perpetrator involved with the family, such as ex-partners, fathers, uncles and mother in laws.