

Factors affecting risk - Key Literature

Australia

Australian Bureau of Statistics, [4510.0 - Recorded Crime - Victims, Australia, 2017](#).

[Victims of Domestic and Family Violence-Related Offences](#)

This chapter presents experimental data about victims of selected Family and Domestic Violence (FDV) –related offences. Victims of selected offences have been determined to be FDV–related where the relationship of offender to victim, as stored on police recording systems, falls within a specified family or domestic relationship or where an FDV flag has been recorded, following a police investigation.

Key findings include:

- FDV-related homicide victims accounted for over a third of total homicide victims, and females accounted for over half of all FDV-related homicide victims.
- FDV-related assault is mostly likely to occur in the age range 25-34 years; and, across all states and territories, females are more likely than males to be victims – at least three times as likely, and up to six times more likely.
- FDV-related sexual assault accounted for over a third of total sexual assaults and there are six times as many female victims as male victims.

Australian Bureau of Statistics (ABS), [Personal Safety, Australia, 2016](#), ABS cat no. 4906.0 (2016).

This release presents information from the Australian Bureau of Statistics' (ABS) 2016 Personal Safety Survey (PSS).

The survey collected detailed information from men and women about their experiences of violence since the age of 18, as well as experiences of current and previous partner violence, stalking, physical and sexual abuse and harassment, abuse before the age of 15, and general feelings of safety.

The survey results demonstrate that approximately one fifth of women who experienced violence by a current partner and were pregnant at some stage during the relationship experienced violence during their pregnancy. For more than one quarter of these women, pregnancy was the first time they had experienced violence. Nearly one half of women who experienced violence by a previous partner and who were pregnant during the relationship experienced violence during their pregnancy, approximately one half for the first time.

See Tables 17-18, which highlight the link between pregnancy and experiences of violence.

Australian Domestic and Family Violence Death Review Network, [Data Report 2018 \(May 2018\)](#).

This report provides data on intimate partner homicides occurring between 2010 and 2014 in Australia, and aims to inform prevention initiatives. Key data findings include:

- > There were 152 intimate partner homicides which followed a history of domestic violence in Australia during the study period (p 9);
- > The majority of intimate-partner homicides involved a male killing his current or former female partner (p 10);
- > Actual or intended separation was present in over half of cases where men killed their female partners (p 12), but only in around 40 percent of female perpetrated homicides (p 21);
- > Almost one quarter of men who killed their female partners were named in Domestic Violence Orders protecting the female victims (p 13), and one quarter of women who killed their male partners were protected by a Domestic Violence Order naming the homicide victim as the respondent (p 22);
- > In most cases where a female killed her male partner, she was the primary victim of violence and killed her abuser (p 19);
- > The most common outcome for men who killed their partners was a murder conviction (p 16), while the most common outcome for women was a manslaughter conviction (p 24);
- > Over 20 percent of men who killed their intimate partners died by suicide (p 16);
- > Almost 20 percent of men who killed their female partners (p 14), and around half of women who killed their male partners, identified as Aboriginal (p 22);

In cases where men killed their female partners and were also domestic violence abusers, most had previously used physical, emotional and/or social abuse against the victim (pp 26-8).

Australian Institute of Health and Welfare, [Family, domestic and sexual violence in Australia: continuing the national story 2019](#).

This is primarily a data report to help inform government policies and plans and to assist in the planning

and delivery of violence prevention and intervention programs. It builds on AIHW's inaugural *Family, domestic and sexual violence in Australia 2018 report*. It presents new information on vulnerable groups, such as children and young women. It examines elder abuse in the context of family, domestic and sexual violence, and includes new data on telephone and web-based support services, community attitudes, sexual harassment and stalking. It also includes the latest data on homicides, child protection, hospitals and specialist homelessness services, while noting notable data gaps on various aspects of family, domestic and sexual violence and work underway to fill the gaps and develop new data sources.

Australian Institute of Health and Welfare, *Family, domestic and sexual violence in Australia* (Report, 2018).

This report usefully compiles and summarises current statistics on family violence, domestic violence and sexual violence from multiple sources. Its key points are:

- > women are at greater risk of family, domestic and sexual violence;
- > some groups of women are more vulnerable to all three types of violence (in particular, women who are Indigenous, young, pregnant, separating from a partner or experiencing financial hardship and women with disability);
- > children are often exposed to the violence;
- > the three types of violence are leading causes of homelessness and adverse health consequences for women and create significant financial cost; and
- > family violence is worse for Aboriginal and Torres Strait Islander people.

The report also identifies important gaps in the current research on family, domestic and sexual violence. No or limited data is available on:

- > children's experiences, including attitudes, prevalence, severity, frequency, impacts and outcomes of these forms of violence;
- > specific at-risk population groups, including Indigenous Australians, people with disability, and lesbian, gay, bisexual, transgender and intersex (LGBTI) people, including those in same-sex relationships;
- > the effect of known risk factors, such as socioeconomic status, employment, income and geographical location;
- > services and responses that victims and perpetrators receive, including specialist services, mainstream services and police and justice responses;
- > pathways, impacts and outcomes for victims and perpetrators; and
- > the evaluation of programs and interventions.

Bagshaw, Dale et al, 'Reshaping Responses to Domestic Violence' (Final Report, University of South Australia and Partnerships Against Domestic Violence, Commonwealth of Australia, April 2000).

This Australian research used a variety of methods including an anonymous 'phone-in' and focus groups. 102 women who were victims/survivors of domestic violence participated in the phone-in. 'Social abuse' was reported by 67 per cent of callers. Social abuse included 'systematic isolation of women from family and friends'. Techniques included perpetrators' ongoing rudeness to family and friends that gradually resulted in reluctance by family and friends to make contact due to concerns that contact would trigger abuse from the perpetrator. Other means by which women were socially isolated included moving to new towns or to the country where they knew nobody and were not allowed to go out and meet people. In some cases women were physically prevented from leaving the home and were kept 'prisoners' in their own homes' (p22-23).

Backhouse, Corina and Cherie Toivonen, *National Risk Assessment Principles for domestic and family violence: Companion resource* (ANROWS, 2018).

This review provides a summary of the evidence-base for the National Risk Assessment Principles for domestic and family violence developed on behalf of the Commonwealth Department of Social Services [Toivonen et al 2018]. This summary of literature highlights key aspects of the evidence-base that underpin the development and implementation of the Principles, including literature regarding: risk and safety; need and vulnerability; risk assessment and management approaches; intimate partner sexual violence and sexual assault; and multi-agency integrated service responses. It includes discussion of priority populations and the evidence that particular groups experience multiple challenges that heighten the likelihood, impact or severity of violence, as well as experiencing additional barriers to seeking and obtaining support (pp14-20).

Brown, Thea, Samantha Bricknell, Willow Bryant, Samantha Lyneham, Danielle Tyson and Paula Fernandez Arias, *Filicide offenders* (Australian Institute of Criminology Report No. 568 February 2019).

Report abstract:

Filicide is the killing of a child by a parent or parent equivalent. Between 2000–01 and 2011–12, there were 238 incidents of filicide in Australia involving the death of 284 children. This paper examines the characteristics of custodial parents, non-custodial parents and step-parents charged with the murder or manslaughter of their children.

Offender circumstances and characteristics differed according to the offender's gender and custodial relationship with the victim. As filicide is difficult to predict, intervention strategies should focus on families with multiple risk factors and address the needs of parents as well as those of children at risk.

Campo, Monica, *Domestic and family violence in pregnancy and early parenthood: Overview and emerging interventions* (CFCA Practitioner Resources, Australian Institute of Family Studies, 2015).

This practitioner resource contains information on risk factors for domestic and family violence for young women and women in pregnancy and early parenthood. It contains the following key points:

- > Women are at an increased risk of experiencing violence from an intimate partner during pregnancy.
- > If domestic and family violence already exists, it is likely to increase in severity during pregnancy.
- > Young women, aged 18–24 years, are more likely to experience domestic and family violence during pregnancy.
- > Unintended pregnancy is often an outcome of an existing abusive relationship.
- > Poor birth outcomes (such as low birth weight, premature birth) and post-natal depression are associated with domestic and family violence during pregnancy.
- > The long-term effects of exposure to domestic and family violence in utero are emerging.

Dearden, Jack, and Jason Payne, '*Alcohol and Homicide in Australia*' (2009) 372 *Trends and Issues in Crime and Criminal Justice* 1.

The current study builds on limited Australian research on alcohol-related homicide. It examines solved homicides recorded in the [National Homicide Monitoring Program](#) over a six year period. A key finding was that alcohol is equally likely to be implicated in intimate-partner homicides as it is in all other homicides. However, homicides involving women killing male intimate partners were far more likely to involve alcohol consumption by victim or offender or both, and that the overwhelming majority of Indigenous intimate-partner homicides were alcohol related.

Douglas, Heather and Robin Fitzgerald, '*Strangulation, Domestic Violence and the Legal Response*' (2014) 36 *Sydney Law Review* 231.

This paper presents a useful literature review of recent studies about the risk of attempted strangulation to health and as a predictive factor in death or serious injury. See especially pp232-236.

Dowling, Chistopher and Anthony Morgan, *Is methamphetamine use associated with domestic violence?* (Australian Institute of Criminology Report No. 563 December 2018).

Report abstract:

There is considerable evidence of the impact of methamphetamine use on violent behaviour. This paper presents findings from a review of existing research on the association between methamphetamine use and domestic violence.

Eleven studies met the criteria for inclusion. Domestic violence is common among methamphetamine users; however, methamphetamine users account for a small proportion of all domestic violence offenders.

There is evidence that methamphetamine users are more likely than non-users to perpetrate domestic violence. Importantly, methamphetamine use is frequently present along with other risk factors. This means methamphetamine use probably exacerbates an existing predisposition to violence, rather than causing violent behaviour.

Easteal, Patricia, and Dimian Grey, 'Risk of Harm to Children from Exposure to Family Violence: Looking at How It Is Understood and Considered by the Judiciary' (2013) 27(1) *Australian Journal of Family Law* 59.

Deals with factors affecting risk where children are involved in family violence. Highlights Kaspiew et al's report (2009)(below), establishing the prevalence of emotional or physical abuse experienced by parents during separation (p61). Children spending unsupervised time with the offender is a major risk factor regarding future violence (p 67). However, the vast majority of orders in the cases studied were for unsupervised contact as the court viewed 'couples violence' as least likely to pose a risk to children (p 68).

Grech, Katrina, and Melissa Burgess, '[Trends and Patterns in Domestic Violence Assaults: 2001 To 2010](#)' (Issue Paper 61, NSW Bureau of Crime Statistics and Research, 2011).

A NSW study. 'Forty-one per cent of all incidents of domestic assault are alcohol related. This percentage varies, however, from a low of 35 per cent in the Sydney Statistical Division to a high of 62 per cent in the Far West Statistical Division. The rate of recorded domestic assault for Indigenous women is more than six times higher than for non-Indigenous women.' This study deals with a variety of risk factors in depth, with a special focus on alcohol and related geographic issues.

Humphreys, Cathy and Monica Campo, '[Fathers who use violence: Options for safe practice where there is ongoing contact with children](#)' (CFCA Paper No. 43 – June 2017, Australian Institute of Family Studies).

The following summarises the key aspects of this paper:

Background

This paper responds to a challenge that has continued to frustrate workers attempting to intervene to support women and children living with domestic and family violence (DFV) – that the DFV intervention system (in the specialist women’s DFV sector and statutory child protection) is structured around women and their children separating from men who use violence. However, many women and children may not be in a position to separate from their abusive and violent partners, and some women and children’s wellbeing and safety may not be enhanced by separation.

Inquiry

The paper explored these questions by conducting a review of existing literature:

- > What is the practice or evidence base for working with families where the perpetrator remains in the home?
- > Are there safe ways to work with women and children living with a perpetrator of DFV, or for women and children who still have significant contact with a perpetrator post-separation?
- > In particular, whether there are strategies for working with fathers who use violence, that engage and address the issues for children, women and men who are continuing to live with DFV.

Observations

This review demonstrates that there is a paucity of evidence for effective approaches for responding to DFV in families where the perpetrator remains in the home or in regular contact with women and children. There are, however, a number of practices developing in these areas: nurse home visits; restorative justice approaches; couple counselling; statutory child protection investigations; and interventions with vulnerable families/whole of family approaches. All urge caution and all recommend a priority on training workers, and only ever bringing men and women together under certain circumstances and with strict caveats. This is necessary if work is to be effective and not inadvertently escalate danger and/or collude with the power and controlling tactics of the perpetrator of violence.

Conclusions

There is some experimentation with interventions in these complex family situations, and some early signs of success. The challenges of working with the diverse nature of fathers who use violence are significant. Nevertheless, this may prove to be an important practice development for future DFV intervention.

Kaspiew, Rae, et al, ‘Experiences of Separated Parents Study’ (Evaluation of 2012 Family Violence Amendments)’ (Report, Australian Institute of Family Studies, 2015).

This report sets out the findings of a core element of the Evaluation the 2012 Family Violence Amendments project—the Experiences of Separated Parents Study (ESPS). This element is based on a comparison of data from two cross-sectional samples of the Survey of Recently Separated Parents (SRSP): the 6,119 parents surveyed in the SRSP 2012, who had separated between 1 July 2010 and 31 December 2011, and the 6,079 parents surveyed in the SRSP 2014, who had separated between 1 July 2012 and 31 December 2013. The family violence amendments introduced by the *Family Law Legislation Amendment (Family Violence and Other Measures) Act 2011* came substantially into effect on 7 June 2012, meaning the SRSP 2012 survey represents parents’ pre-reform experiences and the SRSP 2014 represents parents’ post-reform experiences.

Together with the Longitudinal Study of Separated Families (LSSF) Wave 1 data, these samples of separated parents reported similar levels of family violence, with around 1 in 5 parents indicating they suffered physical hurt by their former partner and nearly 2 in 5 reporting emotional abuse alone (p 14). See generally chapter 3 – ‘Family Violence and Safety Concerns’. Most parents in both SRSP cohorts reported at least one type of emotional abuse before/during or since separation (p 58). Further, ‘overall, mothers reported experiencing emotional abuse in greater proportions than fathers both before/during separation and since separation’ (p 58). The most commonly reported form of emotional abuse (see p24) was ‘—insults with the intent to shame, belittle or humiliate’ (p 58). A similar proportion of parents in both cohorts reported that their children saw or heard family violence prior to or during separation (p 60). However, the proportion of parents reporting that their children witnessed family violence in the period since separation decreased in the second cohort.

Kaspiew, Rae, et al, ‘[Evaluation of the 2012 Family Violence Amendments](#)’ (Synthesis Report, Australian Institute of Family Studies, 2015).

Building on findings of the Survey of Recently Separated Parents 2012, the Longitudinal Study of Separated Families, and the 2009 AIFS Evaluation of the 2006 Family Law Reforms, this report examines the impacts of changes to the *Family Law Act 1975* (Cth) in the area of family law and has three parts:

- > Responding to Family Violence - a survey of family law practices and experiences which primarily involved online surveys of the practices and perspectives of family law system professionals($n=653$)
- > the Experiences of Separated Parents Study (ESPS), which comprised two cross-sectional quantitative surveys - the Survey of Recently Separated Parents [SRSP] 2012 ($n=6,119$) and the Survey of Recently Separated Parents 2014 ($n=6,079$) providing pre-reform and post-reform data on parents’ experiences of separation and the family law system; and
- >

the Court Outcomes Project (CO Project) involving:

- > Court Files Study: an examination of quantitative data from 1,892 family law court files providing insight into patterns in orders made by judicial determination and consent made in the Family Court of Australia, the Federal Circuit Court of Australia, and the Family Court of Western Australia, including in relation to parental responsibility and parenting time (pre-reform: $n=895$; post reform $n=997$);
- > an examination of patterns in courts filings based on administrative data from the three family law courts; and
- > an analysis of published judgments applying to the 2012 family violence amendments.

One of the 'Key messages' from the report is that parents who use family law systems tend to be those affected by complex issues including family violence, mental ill-health, substance abuse and safety concerns for themselves and/or their children. This is discussed in detail in chapter 2. In particular, it was found that each cohort of separated parents studied had similar patterns of family violence (p 10). Around two-thirds of separated parents indicated that they had a history of emotional abuse or physical violence prior to or during separation and this continued for a slightly lower proportion after separation (p 10). It noted the 'prevalence of physical violence diminished after separation, as did the prevalence of emotional abuse, though to a much less significant extent' (p 10). The exposure of children to family violence for each cohort of separated parents is discussed at p 14. Chapter 4 sets out the evaluation findings on whether the 2012 family violence amendments had supported increased disclosure of family violence and child abuse concerns to family law system professionals, the screening and assessment practices and responses to disclosures of family violence and/or child safety concerns.

Legislative Council Standing Committee on Social Issues, Parliament of New South Wales, *Domestic Violence Trends and Issues in NSW* (Report No 46, 2012).

A NSW report. At paragraphs 2.25 - 2.27 (pp16-7), the Committee notes key indicators of most likely victims: women over 18 years in a heterosexual relationship; women with children being up to three times more likely to be victims of domestic violence than women without children. From paragraph 5.25 (p101) onwards, the Committee deals with factors that exacerbate violence against women, including: "alcohol and drug use, exposure to pornography, violence in the media and exposure to violence as a child". The Committee notes that the same factors have an impact on one's likelihood to be a perpetrator of domestic violence. Paragraphs 9.127 - 9.147 (from p251) examine 'unworkable apprehended domestic violence order conditions'. The committee concludes in paragraphs 9.148 - 9.156 that conditions contained in an order should be individually tailored to the situation, the protected person, and the perpetrator; thus minimising the risk of breach and further violence.

Mooney, Rosemary and Deborah Byrne, *Understanding the relationship between family violence and brain injury* (The Brain Injury Association of Tasmania, 2016).

This report provides a summary of the key issues surrounding the complex relationship between injury and family violence in Australia. It notes that half of the people who perpetrate family violence have an existing brain injury (but not all people living with a brain injury perpetrate family violence). Research demonstrates that there is an association between brain injury and increased aggressive behaviour. Moreover, the types of abuse victims of family violence often report (being hit in the face, head and neck, being shaken, and being choked) are all risk factors for brain injury. Research has established that at least one third of women who have experienced family violence has sustained a brain injury. However, the needs of women who live with traumatic brain injury are not being met (p.1).

It notes that '[v]ictims of family violence are seldom screened for brain injury which means that the phenomenon of brain injury as a consequence of family violence is under reported; the same is true for perpetrators of family violence. Prevalence rates are therefore difficult to estimate due to under reporting, under diagnosis, and under researching of brain injury, making it an 'invisible' problem' (p.1).

It concludes that the relationship between brain injury and family violence shown in this report points to an 'urgent need for education and training across all intersecting areas in relation to implementing brain injury screening and the provision of targeted services that are appropriate and effective for people living with a brain injury' (p.2). This report makes fourteen recommendations.

Morgan, Anthony, Hayley Boxall and Rick Brown, *Targeting repeat domestic violence: Assessing short term risk of reoffending* (Australian Institute of Criminology Report No. 552 June 2018).

Report abstract:

Drawing on repeat victimisation studies, and analysing police data on domestic violence incidents, the current study examined the prevalence and correlates of short-term reoffending.

The results showed that a significant proportion of offenders reoffended in the weeks and months following a domestic violence incident. Individuals who reoffended more quickly were more likely to be involved in multiple incidents in a short period of time. Offenders with a history of domestic violence—particularly more frequent offending—and of breaching violence orders were more likely to reoffend. Most importantly, the risk of reoffending was cumulative, increasing with each subsequent incident.

The findings have important implications for police and other frontline agencies responding to domestic violence, demonstrating the importance of targeted, timely and graduated responses.

Noonan, Patrick, Annabel Taylor and Jackie Burke, [Links between alcohol consumption and domestic and sexual violence against women: Key findings and future directions](#) (ANROWS, 2017).

This literature review found that “there is little evidence that alcohol use is a primary cause of violence against women. The paper does, however, identify that there are clear associations, and in some cases, strong correlations between alcohol use and violence against women, including, for instance, in the severity of the violence.” The relationship between alcohol and violence against women manifests in three ways:

- > Alcohol use is linked with the perpetration of violence against women.
- > Alcohol use is linked with women’s victimisation by violence.
- > Alcohol is used as a coping strategy by women who have experienced violence

NSW Domestic Violence Death Review Team, [Annual Report 2012-2013](#) (Department of the Attorney General and Justice (NSW) (2015).

Includes detail on deaths referred to the Coroner, drawing on both data analysis and in-depth case analyses. Useful information about how domestic violence-related homicides and suicides are recorded in NSW. (In particular, see pp 7, 17, 22).

Office of the State Coroner (Qld), [Annual Report 2013-2014](#) (2014).

Includes detail on domestic and family violence related deaths referred to the Coroner. Useful information about how domestic violence-related suicides are recorded in Queensland. (In particular, see pp 14, 16).

Ombudsman Western Australia, [Annual Report 2016-2017: Family and Domestic Violence Fatality Review](#) (2017).

On 1 July 2012, the Office of the Ombudsman WA commenced its family and domestic violence fatality review function. By examining family and domestic violence fatalities, the Ombudsman is able to capture data relating to demographics, risk factors and social and environmental characteristics and identify patterns and trends in relation to these deaths. Patterns and trends are identified, recorded, monitored, reported and analysed. (In particular, see from p 97).

See also related: Ombudsman Western Australia, [Investigation Into Issues Associated With Violence Restraining Orders and Their Relationship With Family and Domestic Violence Fatalities](#) (2015)

Parkinson, Patrick, Judy Cashmore and Judi Single, 'Post-Separation Conflict and the Use of Family Violence Orders' (2011) 33(1) *Sydney Law Review* 1.

This article is based on interviews with 181 parents who had parenting disputes post-separation. Many of the disputes involve family violence orders (FVO). The research outlines the wide range of situations in which a FVO may be sought (from p11), including in relationships where there had been no history of violence over a long period. In these situations, it was difficult to assess risk pre-separation. In some cases, it was the act of applying for a FVO that led to the most severe instances of violence. The article also draws on the experiences of respondents to a FVO application. Other risk factors are also briefly identified including: pregnancy (p13); and coercive/controlling violence (p5).

Phillips, Janet, and Penny Vandenbroek, 'Domestic, Family and Sexual Violence in Australia - An Overview of the Issues' (Research Paper, Parliamentary Library, Parliament of Australia, 2014).

It expands on the risk factors identified in 2011. These include: perpetrators' substance dependency; victims' past exposure to violence (especially as a young person or child); and absence of social support (p 6). In particular, it draws on relevant Australian research to identify that the 'involvement of alcohol and drug use often leading to higher levels of aggression by perpetrators' (p7). The authors also outline which groups of women may be identified as being at greatest risk (p8).

Queensland Government, Special Taskforce on Domestic and Family Violence in Queensland, *Not Now Not Ever: Putting an End to Domestic and Family Violence in Queensland* (2015).

Notes that a suicide threat is considered a risk factor for lethal harm and constitutes a form of domestic and family violence where it is made for the purpose of "tormenting, intimidating or frightening the person to whom the behaviour is directed". (In particular, see p 68).

Walsh, C., et al, *Victorian Systemic Review of Family Violence Deaths - First Report* (Coroners Court of Victoria, 2012).

Includes detail on deaths referred to the Coroner between 2000-2010 and analysed by the Victorian System Review of Family Violence Deaths (VSFRVD). Useful information about how domestic violence-related homicides and suicides are recorded in Victoria, based on findings from data analysis and in-depth case reviews. (In particular, see pp 23, 26, 29).

Wilcox, Karen, 'Intersection of Family Law and Family and Domestic Violence' (Thematic Review 2 (reissue), Australian Domestic and Family Violence Clearinghouse, 2012).

Wilcox undertakes a review of recently published literature. Of particular relevance is her summary of studies into 'screening and risk assessment for family violence' (p 4). She notes that much of the literature expresses a 'concern with the capacity of the family law system to screen effectively for family and domestic violence or to assess risk.' She finds that lawyers and other professionals did not always ask about violence, or otherwise assess risk. However, the lawyers and dispute resolution practitioners who are interviewed for the studies still express confidence in their ability to recognise the risk of family violence.

In relation to separation as a risk factor, Wilcox cites Bagshaw et al, who found that 'where women [engaged in the family law system] had ended the relationship, 65% of women had done so because of violence' (p3).

Zilkins, R.R., Phillips, M.A., Kelly, M.C., Mukhtar, S.A., Semmens, J.B., & Smith, D.A., 'Non-fatal strangulation in sexual assault: A study of clinical and assault characteristics highlighting the role of intimate partner violence' (2016) 43 *Journal of Forensic and Legal Medicine* 1.

Western Australian Study. A total of 1064 women were included in the study; 79 (7.4%) alleged non-fatal strangulation during sexual assault. This study identifies and quantifies NFS risk factors in female sexual assault and highlights the strong association with intimate partner sexual assault. Notes as follows:

- > 7.4% of all female sexual assault cases involved non-fatal strangulation (NFS)
- > 58% of non-fatal strangulation sexual assault cases involved intimate partners
- > 23% of sexual assaults by an intimate partner involved NFS
- > NFS was most frequent in 30–39 year olds sexually assaulted by an intimate partner
- > External physical signs of NFS were absent in 49% who gave a history of NFS.

International

Adam Pritchard, Amy Reckdenwald and Chelsea Nordham, 'Nonfatal Strangulation as Part of Domestic Violence: A Review of Research' (2017) 18(4) *Trauma, Violence & Abuse* 407-424.

Awareness and understanding of non-fatal strangulation in cases of domestic violence has improved significantly in the past 15 years. This article reviews the recent literature on non-fatal strangulation in these circumstances, and highlights the challenges of improving research in this area. The authors 1) analyse the recent history of strangulation as it emerged from criminal justice and medical research within the broader area of domestic violence, and discussed how these changes have led to legal and prosecutorial amendments (page 408); 2) propose a general definition of strangulation and note the inconsistent use of certain terminology in the literature (page 410); 3) consider the research implications within the context of criminology, forensic science, law and medicine (page 412-18); and 4) call for five recommendations to

advance practice and research (page 418-20).

Block, Carolyn, 'Reducing Intimate Partner Homicide Rates: What are the Risk Factors for Death when a Woman is being Abused?' in Australian Institute of Criminology, *Domestic-related Homicide: Keynote Papers from the 2008 International Conference on Homicide* (Report No 104, Research and Public Policy Series, 2009) 62.

This paper summarised the most important findings of the Chicago Women's Health Risk Study (CWHRS). The CWHRS involved interviews with 705 women who screened positive for domestic violence, and was designed to inform service providers of how to identify risk factors for intimate partner homicides. CWHRS found that, while past violence is a significant risk factor (particularly where there has been a threat of use of a weapon, an attempt to strangle her, or abuse of substances (p69)), women who have not experienced a previous violent incident may still be at high-risk of death (p72). The study also found that girls as young as 11 were killed by an intimate partner (see the age breakdowns and abuse types on p81). Other important findings included: '(1) leaving as both a protective factor against but also a risk factor for death, (2) the importance of choking/attempted strangulation as a risk factor for death, (3) risk factors for an abused woman killing her abuser, and (4) the voices of women about help-seeking' (p63).

Block reports that women who had experienced a strangulation or choking attempt by the perpetrator in the last year were twice as likely to be killed as women who had not, with the CWHRS finding that:

- > '12 percent of women whose partner had tried to choke or strangle them in the past year were in the homicide sample, versus six percent of abused women who had not experienced a choking incident in the past year. Clinic/hospital women who said their partner had tried to choke or strangle them in the past year were more likely (16% versus 8%) to experience a very severe or life-threatening incident on follow-up (weapon use or threat, lost consciousness, permanent injury, internal injury, head injury or attempted murder)' (p70).

Brownridge, Douglas, et al., 'The Elevated Risk for Non-Lethal Post-Separation Violence in Canada: A Comparison of Separated, Divorced, and Married Women' (2008) 23(1) *Journal of Interpersonal Violence* 117.

This Canadian study used a nationally representative sample (n=7,369), and made two contributions to the existing literature:

- > first, compared with married women, separated women reported 9 times the prevalence of violence by their ex-husbands, and divorced women reported 4 times the prevalence of violence (pp 128-9); and
- > second, the risk factors for the married, divorced and separated women were different. Sexually

proprietary behaviour (for example, jealousy or possessiveness) and patriarchal dominance were significant risk factors only for married women, not for separated or divorced women (pp 129-30). In contrast, important risk factors for separated women were age and Indigenous status (p 130-1).

Thus, there may be different circumstances influencing post-separation violence and intimate partner violence.

Campbell, Jacquelyn, et al, 'Risk Factors for Femicide in Abusive Relationships: Results from a Multisite Case Control Study' (2003a) 93(7) *American Journal of Public Health* 1089.

This 11-city study sought to identify risk factors for femicide in abusive relationships. Proxies of 220 intimate partner femicide victims identified from police or medical examiner records were interviewed, along with 343 abused control women. Pre-incident risk factors associated with increased risk of intimate partner femicide included: perpetrator's access to a gun and previous threat with a weapon; perpetrator's stepchild in the home; and estrangement, especially from a controlling partner. Never living together and prior domestic violence arrest were associated with lowered risks. Significant incident factors included the victim having left for another partner and the perpetrator's use of a gun. Other significant bivariate-level risks included stalking, forced sex, and abuse during pregnancy.

Campbell, Jacquelyn, et al, 'Assessing Risk Factors for Intimate Partner Homicide' (2003b) 250 *National Institute of Justice Journal* 14.

This study examines the effectiveness of a particular risk assessment tool, the Danger Assessment Tool developed in 1985, in measuring women's risk in abusive relationships. It 'found that despite certain limitations, the tool can with some reliability identify women who may be at risk of being killed by an intimate partner' (p14). The Danger Assessment found that women whose abusers used or threatened use of a weapon were 20 times more likely to be killed, while the correlation between threatened or attempted suicide required further analysis. Other risk factors identified included: partner attempting to strangle the woman; partner violently and constantly jealous; partner controls most or all of the woman's daily activities; partner's use of alcohol and illicit drugs; and the woman ever being beaten while pregnant. Limitations of the tool include that, while the Danger Assessment process correctly assessed 83% of women who were murdered as high-risk, it also assessed 40 percent of abused women who were not killed as high-risk, demonstrating that the tool can only operate as a guide for identifying a woman's risk of death.

Charlotte Barlow and Siobhan Weare, 'Women as Co-Offenders: Pathways into Crime and Offending Motivations' (2019) 58(1) *The Howard Journal of Crime and Justice* 86-103.

This article examines a qualitative study in the UK which aimed to investigate co-offending women's pathways into, and motivations for engaging in, criminal behaviour. It considers not only the impact of co-

offending relationships on women's criminality, but also factors which intersect with these relationships in their lives. Interviews with eight women who accessed a women's advice and support centre were conducted. Findings showed that while co-offending relationships were a central pathway into offending, this often intersected with other circumstances in the women's lives, including drug addiction, socio-economic circumstances, and 'significant life events'. Moreover, women who co-offended with female friends were more likely to acknowledge their agency than those who co-offended with intimate male partners. Findings also demonstrated the significance of understanding the complex nature of the lives co-offending women, and the decision-making process.

Emily Brignone, Anneliese Sorrentino, Christopher Roberts and Melissa Dichter, 'Suicidal ideation and behaviors among women veterans with recent exposure to intimate partner violence' (2018) 55 *General Hospital Psychiatry* 60-64.

Female veterans are at a disproportionately high risk for suicide and intimate partner violence (IPV) compared to female non-veterans. Suicide rates increased by 32.7% among veterans between 2005 and 2015. There is evidence that female veterans differ from non-veterans in terms of IPV-related experiences. The authors examined the US Veterans Health Administration (VHA) electronic medical records for 8427 female veterans who completed screening for past-year IPV between April 2014 and 2016. Results showed a strong connection between IPV and suicidal ideation, and self-harm behaviours among VHA female veterans.

Fleury, Ruth E, Cris M Sullivan & Deborah I Bybee, 'When Ending the Relationship Does not End the Violence: Women's Experiences of Violence by Former Partners' (2000) 6(12) *Violence Against Women* 1363.

A US study of 278 women with abusive partners leaving a women's shelter were interviewed across two years. More than one third of the women were assaulted by their former partner during the time of the study. Those who were in a relationship longer before the first incident of violence were more likely to be assaulted after the end of the relationship suggesting that the violence may have started as a means by which the perpetrator could maintain control over the victim. There was also evidence that perpetrators who were highly sexually suspicious of the victim were more likely to be violent towards the victim after separation.

Folkes, Stephanie, N, Zoe Hilton and Grant T Harris, 'Weapon Use Increases the Severity of Domestic Violence but Neither Weapon Use Nor Firearm Access Increases the Risk or Severity of Recidivism' (2012) 28(6) *Journal of Interpersonal Violence* 1143.

A Canadian study. This reanalysis of 1,421 police reports of domestic violence by men found that 6% used a weapon during the assault and 8% had access to firearms. Firearm access was associated with assault

severity, but this was mostly attributable to use of non-firearm weapons. Weapon use was associated with older age, lower education, and relationship history as well as to assault severity. Victims were most concerned about future assaults following threats and actual injuries. Although firearm access and weapon use were related to actuarial risk of domestic violence recidivism, neither predicted the occurrence or severity of recidivism. The study concluded that, consistent with previous research in the United States and Canada, firearm use in domestic violence is uncommon even among offenders with known firearm access. Weapon use is characteristic of a subgroup of offenders who commit more severe domestic violence, and seizure of weapons may be an effective intervention.

Glass, Nancy, et al, 'Non-fatal Strangulation is an Important Risk Factor for Homicide of Women' (2008) 35(3) *Journal of Emergency Medicine* 329.

The study examines non-fatal strangulation by an intimate partner as a risk factor for major assault, or attempted or actual homicide of women. A case control design was used to describe non-fatal strangulation among actual and attempted homicides (n=506) and abused controls (n=427). The results demonstrate non-fatal strangulation as an important risk factor for homicide of women by intimate partners, underscoring the need to screen for non-fatal strangulation when assessing abused women in emergency department settings.

Graham, Kathryn; Sharon Bernards, Sharon C. Wilsnack and Gerhard Gmel; 'Alcohol May Not Cause Partner Violence But It Seems to Make It Worse: A Cross National Comparison of the Relationship Between Alcohol and Severity of Partner Violence' (2011) 26(8) *Journal of Interpersonal Violence* 1503.

This study assesses whether severity of physical partner aggression is associated with alcohol consumption at the time of the incident, and whether the relationship between drinking and aggression severity is the same for men and women and across different countries. National or large regional general population surveys were conducted in 13 countries as part of the GENACIS (Gender, Alcohol and Culture – an International Study) collaboration. Respondents described the most physically aggressive act done to them by a partner in the past 2 years, rated the severity of aggression on a scale of 1 to 10, and reported whether either partner had been drinking when the incident occurred. Severity ratings were significantly higher for incidents in which one or both partners had been drinking compared to incidents in which neither partner had been drinking. The relationship did not differ significantly for men and women or by country. The authors concluded that alcohol consumption may serve to potentiate violence when it occurs, and this pattern holds across a diverse set of cultures.

Jaffe, Peter, Katreena Scott, 'Risk Factors for Children in Situations of Family Violence in the Context of Separation and Divorce' (Department of Justice Canada, 2014).

This report provides a summary of the expanding literature in the field of family violence, with specific

attention to factors that increase the risk of harm to children during the critical time of parental separation. The report also summarises policies and practices for intervention and prevention as identified by Canadian experts and current research reports. The review highlights the many factors that increase children's risk of harm to their psychological and physical well-being (e.g., exposure to domestic violence; history of maltreatment; parental stress; social isolation of the family; inadequate resources and support) in the context of family violence and separating parents. The authors propose a model to guide judges, lawyers and court-related professionals to consider when looking at potential harm to children based on their vulnerabilities as well as the risks that parents may present. Findings of risk can lead to court mandated interventions and safeguards in determining parental access to their children. This analysis requires consideration of barriers to required services such as language and cultural barriers as well as poverty.

Livingston, Michael, 'The Ecology of Domestic Violence: The Role of Alcohol Outlet Density' (2010) 5(1) *Geospatial Health* 139.

This study assesses whether alcohol outlet density is related to the incidence of domestic violence and whether this relationship is due to alcohol availability or to co-occurring economic disadvantage and social disorganisation. The study found that the density of hotels (or pubs), but not packaged liquor outlets or restaurants and bars, was significantly associated with rates of domestic violence, even controlling for socio-demographic factors. Socio-economic disadvantage was also found to be associated with domestic violence rates. The results present a mixed picture of the links between alcohol availability and domestic violence, and are suggestive of the need for more research. The study provides valuable insights into substance abuse as a risk factor for domestic violence.

McFarlane, Judith, Jacquelyn Campbell and Kathy Watson, 'Intimate Partner Stalking and Femicide: Urgent Implications for Women's Safety' (2002) 20(1-2) *Behavioral Sciences and the Law* 51.

Researchers conducted a case control study of 821 women in 10 U.S. cities. A sample of 437 women who were killed or nearly killed by their intimate partners was compared with a control sample of 384 abused women residing in the community. The researchers assessed the relative significance of a set of risk factors for predicting femicide (homicide of a woman by her intimate partner) or near femicide (cases that could have but did not result in death for the victim). Compared with the control group of abused women (49%), significantly more of the killed/nearly killed women had histories of stalking (79%) in their abusive relationships. Multivariate analyses indicated that being "followed or spied on" by the abuser in the 12 months before the lethal or near lethal incident resulted in a nearly 2.5-fold risk. More detailed analyses identified five threat factors (in the perpetrator's behavior towards the victim) that increased odds of femicide/attempted femicide: (a) threatened to harm children if the woman left, (b) frightened the woman with a weapon before the incident, (c) left scary notes on the woman's car before the incident, (d) threatened to kill the woman, and (e) frightened or threatened the woman's family before the incident.

Mechanic, Mindy B, Terri L. Weaver & Patricia A. Resick, 'Risk Factors for Physical Injury Among Help-Seeking Battered Women: An Exploration of Multiple Abuse Dimensions' (2008) 14(10) *Violence Against Women* 1148.

This US study assessed the nature and extent of minor and severe injuries among a help-seeking sample of battered women. It assessed the roles of physical violence, sexual coercion, psychological abuse, and stalking in predicting minor and severe injuries in battered women. Length of relationship abuse and severity of physical aggression were the most robust predictors of minor and severe physical injuries. Consistent with other research findings, psychological abuse and stalking together contributed uniquely to the prediction of severe injuries.

Messing, Jill Theresa, Wilson, Janet Sullivan and Jacquelyn Campbell, 'Differentiating among Attempted, Completed, and Multiple Nonfatal Strangulation in Women Experiencing Intimate Partner Violence' (2018) 28(1) *Women's Health Issues* 104-111.

The identification of intimate partner violence (IPV) in health care settings is difficult, and strangulation increases the risk of death among women experiencing IPV. Previous literature suggests that women rarely seek treatment and care after IPV strangulation, and those who do, may not disclose prior assaults or the cause of the injury, thus leading to misdiagnoses and inadequate treatment plans. The authors examined the prevalence and correlates of non-fatal strangulation among 1008 women survivors of intimate partner violence. Trained researchers conducted semi-structured interviews with women survivors of IPV referred by police. Results showed that each strangulation was independently significantly associated with sexual violence when compared to non-strangulation. Multiple strangulation was associated with more IPV injury and risk factors for homicide, including loss of consciousness and miscarriage (see pages 107-108). The authors found that strangulation was a prevalent form of IPV and has significant health risks to women. Women's health practitioners are best placed to identify the signs and symptoms of strangulation, help women to understand the consequences and potential future fatality associated with strangulation, and direct them to appropriate resources to reduce the risk of mortality and morbidity.

Michelle Patch, Jocelyn Anderson and Jacquelyn Campbell, 'Injuries of Women Surviving Intimate Partner Strangulation and Subsequent Emergency Health Care Seeking: An Integrative Evidence Review' (2018) 44(4) *Journal of Emergency Nursing* 384.

This article reviewed the literature on women's injuries and their subsequent experiences in seeking health care after encountering non-fatal intimate partner strangulation (NF-IPS). Research shows that NF-IPS is higher in women than in men. Although injuries may be subtle or minimised, they may have severe health consequences. In recent years, there have been calls for nursing and other health care providers to improve practices related to strangulation screening, assessment and treatment. Overall, NF-IPS was associated with multiple negative physical (eg injuries to head/neck or neurological, vascular or respiratory

systems) and psychological (eg anxiety, depression, suicidal ideation or post-traumatic stress) outcomes for women. Studies suggested that women are reluctant to seek health care after being strangled. Reasons for their reluctance include wanting a safe place first, not wanting to share personal experiences, an abuser being present in the room during the visit, and feelings of hopelessness.

Miner, Emily, et al, 'Risk of Death or Life-Threatening Injury for Women with Children Not Sired by the Abuser' (2012) 23(1) *Human Nature* 89.

This US study further explores the previously identified link between the presence of children sired by a woman's previous partner and an increased risk of abuse and femicide by her current partner. The current research secured data from samples of 111 non-abused women, 111 less severely abused women, 128 more severely abused women, and 26 victims of intimate partner femicide from the Chicago Women's Health Risk Study. The study found that women who have genetic children in the household sired by a previous partner experience an increased risk of severe forms of abuse (by their current partner) compared with women whose children were all sired by their current partner. It also identified a trend of increasing representation of women with children sired by previous partners as victims of abuse as the severity of the abuse increases.

National Domestic Violence Fatality Review Initiative, [ABOUT NDVFRI](#) (2016).

The National Domestic Violence Fatality Review Initiative (NDVFRI) (US resource) is a unique resource centre that is dedicated to domestic violence fatality review by the Office on Violence Against Women, a branch of the US Department of Justice. Currently, 30 States in the US have a form of domestic violence fatality review. Domestic violence fatality review requires a shift from a culture of blame to a culture of safety. The Initiative aims to provide assistance for assessing domestic violence-related deaths, with the underlying objectives of:

- > Preventing domestic violence homicides and domestic violence in the future;
- > Preserving battered women's safety;
- > Identifying gaps in service delivery and assessing potential methods of remedying these organisational issues;
- > Holding domestic violence perpetrators, as well as the agencies and organisations that come into contact with the parties, accountable;
- > Providing technical assistance to States which either have implemented or have not implemented domestic violence fatality review.

The website includes a range of resources including reports, videos and webinars.

National Institute of Justice, 'How Effective Are Lethality Assessment Programs for Addressing Intimate Partner Violence?' (Office of Justice Programs, June 11 2018).

The article analyses the effectiveness of Lethality Assessment Programs (LAP) in addressing intimate partner violence (IPV). LAP was developed by the Maryland Network Against Domestic Violence in 2003 as a means for first responders to identify high-risk victims of IPV, and provide them with the tools to make decisions of self-care. As part of the program, police officers used an 11-question Lethality Screen to evaluate a victim's risk for lethal violence, and warned high-risk victims of their dangerous circumstances and offered to connect them with a social services provider. If victims agreed, they were put in contact, by phone, to a provider to receive victim advocacy services, safety planning, and referral for additional services. The researchers collected data on 700 female victims of IPV in seven police jurisdictions in Oklahoma.

Although the program did not appear to have a significant impact on reducing the incidence of IPV, it did seem to significantly reduce the severity and frequency of the violence that survivors experienced. It also appeared to increase help seeking and safety planning. Women who participated in the program were more likely to remove or hide their partner's weapons, to obtain formal services for domestic violence, to establish safety strategies with friends and family, and to obtain protection against their partner. The researchers also found that victims who received assistance through the LAP reported greater satisfaction with the police response. Consequently, LAP was described as a 'collaborative police-social service intervention with an emerging evidence base.'

The article was based on [Police Departments' Use of the Lethality Assessment Program: A Quasi-Experimental Evaluation](#).

Rossiter, KR. et al., 'Domestic Homicide in Immigrant and Refugee Populations: Culturally-Informed Risk and Safety Strategies' (Canadian Domestic Homicide Prevention Initiative, Domestic Homicide Brief 4, February 2018).

The purpose of this Briefing Paper is to highlight risk assessment, risk management, and safety planning for immigrant and refugee populations. The paper provides definitions of key terms, such as 'migrant', 'protected persons' and 'permanent residents'. It also identifies unique risk factors for domestic homicide, using the Immigrant Power and Control Wheel (p6). The authors highlight the importance in recognising that 'domestic violence and homicide among immigrant and refugee populations are not rooted specific in cultures, but in patriarchy' (p 5). The authors identify several factors that contribute to increased risk of domestic violence and homicide among immigrant and refugee populations (p4):

- > Acculturation level
- > Cultural norms and expectations

- > Geographic and social isolation
- > Length of residency in host country
- > Loss of socioeconomic status
- > Loss of culture, family structures and community leaders
- > Power imbalances between partners
- > Stress associated with migration
- > Post-migration strain and stigma
- > Strict or changing gender roles
- > Traditional patriarchal beliefs
- > Unresolved pre-migration trauma
- > Victim/survivor immigration status

Barriers to services for immigrant and refugee women are addressed, along with the need for culturally-informed strategies for risk assessment, risk management, and safety planning. Examples of culturally-specific risk assessment tools are provided.

Taylor, Gregory, *The Chief Public Health Officer's Report on the State of Public Health in Canada, 2016: A Focus on Family Violence in Canada* (Public Health Agency of Canada, 2016).

While focused on Canada, this report gives an overview of the factors that influence the risk of both experiencing and perpetrating family violence. Individual factors include: a history of child abuse or neglect, age, gender, traits, beliefs and behaviour, physical and mental health, substance use, and stress (p.20). Some of the family and social factors that increase the risk for family violence are poor parenting and parental attachment; intimate partner violence between parents; stress in relationships; mistreatment of older adults; social isolation and lacking social support (p.23). Community and societal factors that can influence family violence include cultural differences; social acceptability and normalisation of violence; and neighbourhoods (pp.23-25).

Vivienne, Elizabeth, 'Custody Stalking: A Mechanism of Coercively Controlling Mothers Following Separation' (2017) 25(2) *Feminist Legal Studies* 185-201.

This study adds to the literature in relation to post-separation violence by introducing the new concept of 'custody stalking'. Custody stalking is a parents's use of custody and/or child protection proceedings to obtain care time with children far in excess of their involvement prior to separation (p 187). Elizabeth views custody stalking as a specific pattern of coercive control, derived from the unique insights former partners have about how to torment women (p 187). The study was conducted through interviews with 12 mothers who had experienced domestic violence (p 190). The study found that custody stalking causes grief, damages psychological wellbeing and has a detrimental effect on their mothering relationships. However, the losses experienced by mothers in this study are described as 'culturally invisible' (p 187-8)

Webermann, Aliya R, and Christopher M Murphy, 'Childhood Trauma and Dissociative Intimate Partner Violence' (2018) *Violence Against Women* (onlinefirst).

This article considers research investigating whether childhood abuse and neglect is a predictor of dissociative intimate partner violence among perpetrators (p 4). Experiences of childhood abuse and neglect, including exposure to domestic and family violence, is a key predictor of IPV perpetration as an adult (p 2). Key findings include:

- > Around one third of the male perpetrators reported dissociative IPV (p 11);
- > Childhood abuse and neglect predicted dissociative IPV flashbacks (p 8), dissociative IPV-specific blackouts (p 8), dissociative IPV-specific derealisation (p 11), and IPV-specific aggressive dissociative self-states (p 11);
- > Childhood sexual abuse uniquely predicted amnesia (p 9).

The results also indicated that other potential traumas did not predict dissociative IPV, which suggests that dissociative IPV occurs more predictably where perpetrators who have experienced childhood neglect and abuse disconnect from their abusive behaviours (p 12).