In 2015, the National Children’s Commission conducted an investigation into the impact of family violence on children. Commissioner Megan Mitchell discovered widespread and serious levels of exposure to family violence, and huge gaps in evidence and understanding of children’s experiences.

**A child’s right to live free from violence**

Federal, state and territory governments, our nation’s leaders in business and the community, have come together in unprecedented ways at this point in Australia’s history to address family and domestic violence.

As Children’s Commissioner, this national conversation and renewed policy commitment has provided me with the opportunity to raise the importance of a child’s right to live free from violence of all forms and put a spotlight on the unique experiences of children affected by family violence.

This became the focus of my 2015 statutory report to the federal parliament. Through my examination I sought to identify and highlight the unique experiences of children affected by family and domestic violence and to ascertain which areas demand further attention.

We conducted a literature review, received and appraised written submissions, held a series of expert roundtables and a webinar, analysed available data and sourced new data.

I also sought to hear the voice of children themselves, working with The Kids Helpline to understand more about the contacts they receive about family violence, and accessing other relevant survey and research material.

**What we know**

Children experience family and domestic violence in different ways. These experiences are often described as either ‘witnessing violence’, ‘being exposed to violence’ or ‘being directly abused in a context of family and domestic violence’.

The data reviewed through the examination identified that, while children’s experiences of family and domestic violence are widespread and serious, the quality, consistency and availability of information about children’s exposure to family violence is at present alarmingly poor, and mostly derived through one-off surveys, estimates, proxy measures, or administrative data sets like those associated with child protection or homelessness services.

**Child abuse**

Information from child protection data sets help to build the picture of children’s exposure to violence. In 2013–14, 40,844 children were the subjects of substantiated child protection notifications in Australia. Forty per cent concerned emotional abuse (which frequently involves exposure to domestic violence), 28 per cent concerned neglect, 19 per cent...
concerned physical abuse and 14 per cent concerned sexual abuse.

Research also tells us that family violence and child abuse are interrelated, with one study estimating that domestic violence is present in 55 per cent of physical abuse cases and 40 per cent of sexual abuse cases against children.

Despite this, family and domestic violence is not routinely or consistently recorded in child protection systems, even though it is one of the strongest drivers of children into out-of-home care systems in this country.

**Homelessness**

Specialist homelessness services also collect data that tell part of the story of the size and nature of the impact of family violence on children. Of the 254,000 clients in 2013/14, more than a quarter (just under 70,000) were children, with a similar proportion of clients reporting family and domestic violence as the main reason for seeking assistance.

**Witnesses or bystanders**

While there is limited direct information about the prevalence of children being witnesses or bystanders to family violence, the ABS Personal Safety Survey 2012 reveals that much of the partner violence reported by women and men is seen or heard by children in their care.

Further, a survey of 5,000 young Australians aged 12–20 by David Indermaur (*Young Australians and Domestic Violence, 2001*) on behalf of the Australian Institute of Criminology found that 23.4 per cent of respondents reported having witnessed an act of physical violence by their father or step-father against their mother or step-mother.

It is important to emphasise that exposure to violence, even in the absence of direct abuse, can have a clear detrimental impact on children and is increasingly being recognised as a form of child abuse in itself.

For this reason the *Family Law Legislation Amendment (Family Violence and Other Measures) Act 2011* amended the definition of family violence to include circumstances in which a child is exposed to family violence. The extent to which the 2012 changes have resulted in reformed practice, however, is a live question, and one that is raised frequently with me by both children and adults who have had an experience of the family law system.

**Victims of assault**

There is a little more information out there in relation to children as direct victims of physical and sexual abuse by a family member, but this is still compromised in fundamental ways.

Data sourced from the ABS Recorded Crime Victims data set showed between 2010 and 2014 in NSW, SA, the ACT and NT only, there were more than 14,000 police-recorded child victims of physical assault by a family member.

There were over 12,000 police-recorded child victims of sexual assault by a family member during this same period in NSW, Victoria, QLD, Tasmania, the NT and the ACT.

**Children as homicide victims**

If we are shocked by the fact that one woman dies every week at the hands of a partner or ex-partner, the situation for children isn’t far behind, with one child every fortnight killed by a family member.

The Australian Institute of Criminology released a report in 2015 that looked at the family and domestic homicides from 2002 to 2012. Over this period 229 children died at the hands of their parents.

The report shows that children comprise the second most frequent group of victims of family and domestic homicides (21 per cent), after intimate partner homicides (56 per cent).

Over half (51 per cent) of all filicide cases (homicides where the victim is the child of the offender) involved children between one and nine years of age; 32 per cent were children under the age of one; 11 per cent were children aged 10 to 14 years; and two per cent were children aged 15 to 17 years.

**Aboriginal and Torres Strait Islander children**

As in many other areas, family and domestic violence disproportionately affects Aboriginal and Torres Strait Islander Australians.

Nationally, in 2012–13, Aboriginal and Torres Strait Islander women were 34.2 times more likely and men 28.3 times more likely to be hospitalised...
for non-fatal family violence-related assaults than non-Indigenous females and males.

The custom data I obtained from the ABS shows that Aboriginal and Torres Strait Islander children are also overrepresented as child victims of physical and sexual assault. For example, in New South Wales, while comprising 5.5 per cent of the child population, Indigenous children represent 10.75 per cent of physical assault victims and 11.11 per cent of sexual assault victims. The data is likely to be an underestimate of the actual number of victims as the data only includes offences that come to the attention of police. Again, the picture is incomplete and data is available for some states only.

ABS Personal Safety Survey

New data derived from the Personal Safety Survey 2012 shows that 839,400 women and 596,400 men first experienced physical abuse by a family member between zero and 14 years of age, and 515,200 women and 97,800 men first experienced sexual abuse by a family member between the years of zero and 14 years of age.

Fathers represent the largest proportion of perpetrators of violence against children aged under 15 years. Of the children who experienced physical violence by a parent before the age of 15, almost 60 per cent experienced the first violent incident between the ages of four and nine.

Impact on children

My examination confirmed that family and domestic violence can have wide-ranging and serious impacts upon children. Among other things, exposure to violence can manifest itself in mood problems, aggression and anti-social behaviour, low self-esteem, loneliness and impaired cognitive function.

The findings also support existing research that indicates that the effects of violence may manifest differently depending on the developmental stages of the children.

For example, infants and toddlers affected by family and domestic violence may exhibit delayed language and toilet-training, poor sleep patterns, constant crying and disrupted attachment. Older children may exhibit aggressive behaviour, anxiety and low verbal abilities. In adolescence, mental health issues, anger, depression, self-harm and suicidal ideation may be more likely.

In relation to what children themselves say about the impact of family and domestic violence, the Kids Helpline provided me with information on just under 1,000 contacts about family violence between 2013 and 2014, as well as the thoughts and feelings of children in the form of case notes: 42 per cent were from children from culturally and linguistically diverse backgrounds; 42 per cent were 13 years of age or under; 40 per cent related to exposure to violence between parents or a parent and an ex-partner; 35 per cent also raised concerns about child physical or emotional abuse; and 14 per cent involved violence by siblings.

Self-harm and suicidal ideation also appears to be connected with experiences of family violence and conflict. Of the nearly 20,000 child callers to the Helpline in 2012 and 2013 about suicide and self-harm, 17.8 and 17.3 per cent respectively reported a co-concern of family conflict.

If we don’t measure it, or we don’t measure it well, we don’t care about it. And if we don’t care about it, we don’t do anything meaningful about it.
The issue of sibling violence was also highlighted in the assault data sourced, along with a spike in violent assaults against 16 and 17-year old girls in intimate partner relationships. I have recommended specific attention and research in both these areas.

What we don’t know

There is significant work to do to develop reliable national data about the prevalence of family and domestic violence perpetrated against and around children. Existing information gaps undermine our ability to understand the full impact of family and domestic violence on children at both state/territory and national levels. If we don’t measure it, or we don’t measure it well, we don’t care about it. And if we don’t care about it, we don’t do anything meaningful about it.

Another barrier relates to definitional challenges. Across Australia, there are no consistent definitions, legal frameworks or common methods used to identify and refer to family and domestic violence.

It is encouraging that efforts are underway to remedy this. For example, the ABS has been tasked with developing a national data collection and reporting framework as part of the work of the National Plan to Reduce Violence Against Women and their Children. This will hopefully lead to a common language and definitional framework which can be used across Australian jurisdictions to record and measure family, domestic and sexual violence.

However, in order to understand family and domestic violence as it relates to children, it is imperative that children’s experiences are recognised and recorded in their own right. My report therefore recommended that data about a child’s experience as a victim of family and domestic violence be recorded as a separate entry in the ABS National Data Collecting and Reporting Framework, and not just part of an adult entry.

Information on family and domestic violence during pregnancy has also been identified as a key information gap, particularly given the heightened risk of family violence at this time. No Australian jurisdiction currently collects information on family and domestic violence as part of its Perinatal Data Collection.

In 2015 the Australian Institute of Health and Welfare released the report, Screening for Domestic Violence During Pregnancy—Options for future reporting in the National Perinatal Data Collection which discussed barriers to, and opportunities for, the collection of data on screening for family and domestic violence during pregnancy. In my report, I recommended that the options raised in this report be progressed as a matter of priority.

Research is also needed in other areas to adequately understand children’s experiences of family and domestic violence. For example, there is limited breakdown on the age of child victims. The custom data provided to me about child victims of physical assault and sexual assault could not be disaggregated beyond the age groupings of zero to nine years, ten to 14 years, and 15 to 17 years. These age groupings are too broad to be particularly helpful, given the range of developmental stages they cover. Further, while there is some information on Aboriginality, other characteristics such as cultural and linguistic background, disability and LGBTI status are not routinely available.

We urgently need to generate evidence where it is missing, and to translate what evidence we do have into action.

Historically, the needs of children have been somewhat peripheral to the public policy debate and approach to family and domestic violence, and increasingly—and often inappropriately—folded into child protection responses. What remains lacking is a clear and coherent policy framework that prioritises the needs of children across the prevention, intervention and response continuum.

Children cannot thrive nor can their rights be upheld where family violence permeates their lives. Our collective policy, social and moral objective must be to eliminate violence from the lives of children and remove it from the menu of problem solving once and for all.

Megan Mitchell is National Children’s Commissioner. This is an edited extract of her speech to the ANROWS Inaugural National Research Conference on Violence against Women and their Children on 25 February 2016.