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Chapter 7: Understandings of violence and actions taken following violence

'The answers were there before white man
come in'

Stories of strength and resilience for responding to violence In Aboriginal and Torres Strait
Islander communities

CHAPTER 7

UNDERSTANDINGS OF VIOLENCE AND ACTIONS TAKEN FOLLOWING VIOLENCE

This chapter begins by reporting on participants' perceptions of what behaviours constitute violence and of how common and serious violence is in their community. We conclude by reporting on formal and informal actions taken by those who experienced violence.

Behaviours perceived as violence

There are varied understandings of what constitutes violence in any population. Most participants recognised as violence the behaviours generally defined as violence in the contemporary literature and guidelines.^(73,74) However, some participants reported that community members did not always recognise or consider some types of violence as violence:

It's not [violence] when I financially control her. It's not [violence] when I accuse her of playing up. It's not [violence] when I do all these other verbal things, or psychological things ... it's [violence] when I hit her, and I don't hit my wife, because that would be domestic violence.

Education. They need to learn about all them thing while they're in school. Even people older ... they don't know about domestic violence too is family don't know about, if you're living with that woman and if you smash the TV or something, that's domestic violence. How's that domestic violence? They play with them young people's heads and that's what get them in more trouble, because everything is domestic violence, that's wrong ... Even when you ... verbal abuse ... Even if you want some money, that's violence, again domestic violence, because he controlling the money.

Financial abuse ... They need to learn before all this happen.

To gain an understanding of what is perceived as violence, CMS participants were asked, 'Do you think it is family violence if one partner in a relationship ...?' for the following eight behaviours:

- > forces the other partner to have sex
- > tries to scare or control the other partner by threatening to hurt the children, other family members or pets
- > repeatedly criticises the other person to make them feel bad or useless
- > throws or smashes objects near the other partner to frighten or threaten them
- > controls the social life of the other partner by preventing them from seeing family and friends
- > tries to control the other partner by denying them money
- > shares private pictures/photos with others
- > harasses the other partner over the phone or by text, email or social media.

For each, CMS participants could select from response options of 'always', 'usually', 'sometimes', 'no' and 'unsure'. We examined responses to individual items. Around half of CMS participants (49–56%) recognised each behaviour as 'always' violence; 14–21% identified each behaviour as 'usually' or 'sometimes' violence (Figure 6; Table 9). There was a substantial level of uncertainty, with at least one in 10 respondents indicating that they were 'unsure' whether each behaviour was violence. These findings may reflect, in part, two issues: one – that these behaviours have historically been considered forms of 'abuse' but have only been classified as 'violence' more recently (43); and two – that various behaviours have become normalised in some contexts.

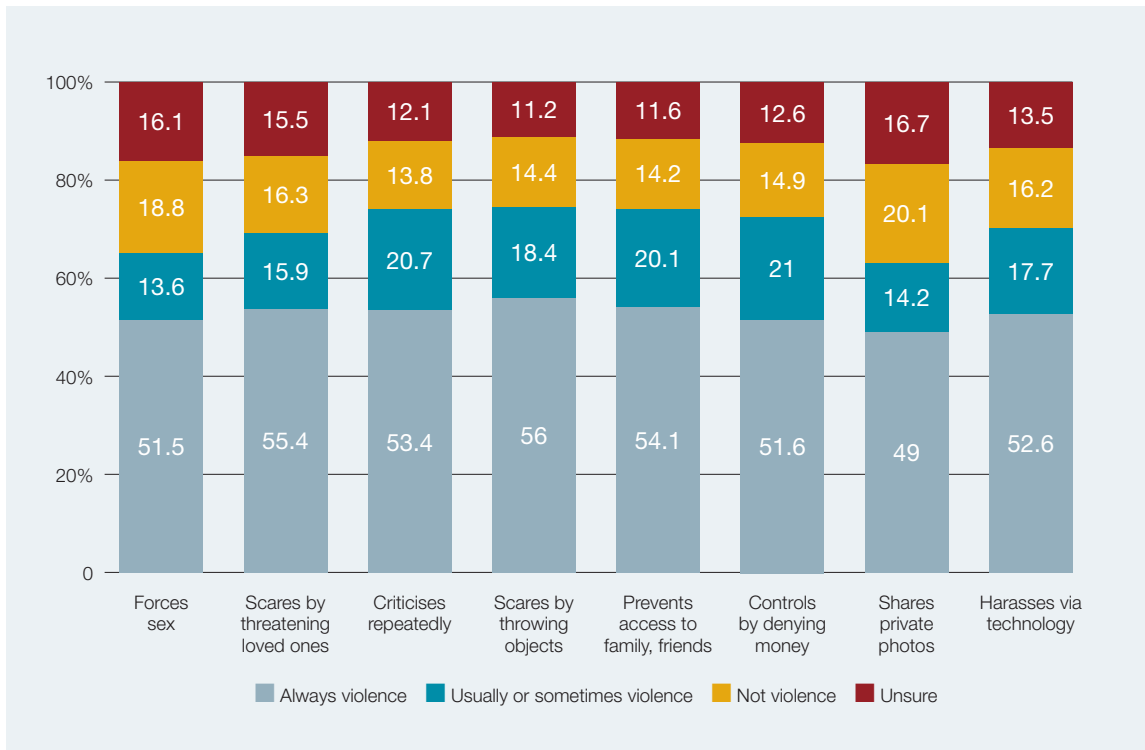


Figure 6: CMS: Perceptions of what constitutes family violence, overall

We created a composite score to categorise participants as having a low, moderate or high understanding of violence, according to current definitions, reflecting their pattern of responses across the eight items (see Appendix 3 for details). Among CMS participants:

- > Forty-three percent had a high understanding of violence, meaning that they classified each of the eight behaviours as ‘always’ violence.
- > Thirty-three percent had a moderate understanding of violence, meaning that, on average across behaviours, they were identifying behaviours as ‘usually or sometimes’ violence.
- > Twenty-four percent had a low understanding of violence, meaning that, for most behaviours, they identified the behaviour as ‘not’ being violence or indicated that they were unsure.

Findings from the CMS highlighted differences in participants’ level of understandings of violence by remoteness, gender and age group (Table 9):

- > Having a ‘high understanding’ of violence was significantly more common among participants in major cities (53%) than in remote (35%) areas (PR=0.66, 95%CI:0.55,0.79).
- > Having a ‘high understanding’ of violence was significantly more common among females (45%) than males (39%) (PR=1.18, 95%CI:1.04,0.34).
- > There was no significant difference by age group.

The prevalence of outcomes in the CMS data is not to be compared with other population level studies; however, internal comparisons (i.e. relationships within the sample) are generally understood to be generalisable beyond the study population. Our findings on gender differences in understanding of violence are broadly consistent with those of the 2017 NCAS,(43) where it was found that males had a lower level of understanding than females across several actions, such as criticising, denying money and seeking consent for sex.

In the CMS, we observed a link between participants’ understandings of violence and their experiences of violence. We found that the prevalence of experiencing violence (lifetime and within the past year) was significantly higher among participants who had a moderate or high, versus low, understanding of violence (Table 7). This might reflect greater awareness of what constitutes violence, making people more likely to recognise and report violent behaviours which they have experienced. Alternatively, these findings might suggest that participants who have experienced violence themselves develop an improved understanding of behaviours as violent. We found a link between participants’ understanding of violence and their own use of violence (Table 8); we found that moderate, versus low, understanding of what constitutes violence was linked with a significantly increased prevalence of ‘feeling violent’ (36% versus 26%; PR=1.39, 95% CI:1.09,1.89).

Perceptions of seriousness and prevalence of violence

What individuals perceive as violence may influence what they report as violence and the extent to which they perceive violence to be a common or serious issue in their community. When we asked participants about their perceptions of ‘violence’ within the community, this was subject to their own definitions and would, therefore, be influenced by different understandings of what constitutes violence.

The study deliberately did not impose a definition of ‘community’ on participants; it was not our role, as visitors and researchers. We adopted the position that a community should define itself. When individuals were asked to assess how common and serious violence was in their community, this was subject to their personal definition of community. When we asked about violence, this included violence by family members or known persons, as well as violence by persons unknown to the participant. The aim was to capture a breadth of forms of family and community violence.

Most community members and service providers who participated in interviews and focus groups described family and community violence as a concern and/or an issue in their community. In addition, there was broad recognition from service providers that family violence was a substantial problem in many communities:

... and I know it's fair to say that, domestic violence, I mean, there's different forms of domestic violence where you get, you know, the abusive stuff up here, and the name calling, right down to the, you know, the very violent, the physical harm. People have been killed in those, a lot of family violence leads to death and that.

The CMS showed that violence against women and against men was perceived to be both a common and a serious issue in communities (Figure 7), and this applied across all levels of remoteness (Figure 8 ; Figure 9; Figure 10). Concern about violence against women was raised more frequently, but many participants were also concerned about violence against men. Women appeared more concerned than men about the issue of violence against women (Figure 11; Figure 12).

Overall responses

- > Sixty five percent reported that violence against women was a *serious* issue in their community.
- > Forty-seven percent reported that violence against women was *common* in their community.
- > Forty five percent reported that violence against men was a *serious issue* in their community.
- > Twenty-eight percent reported that violence against men was *common* in their community (Figure 7).

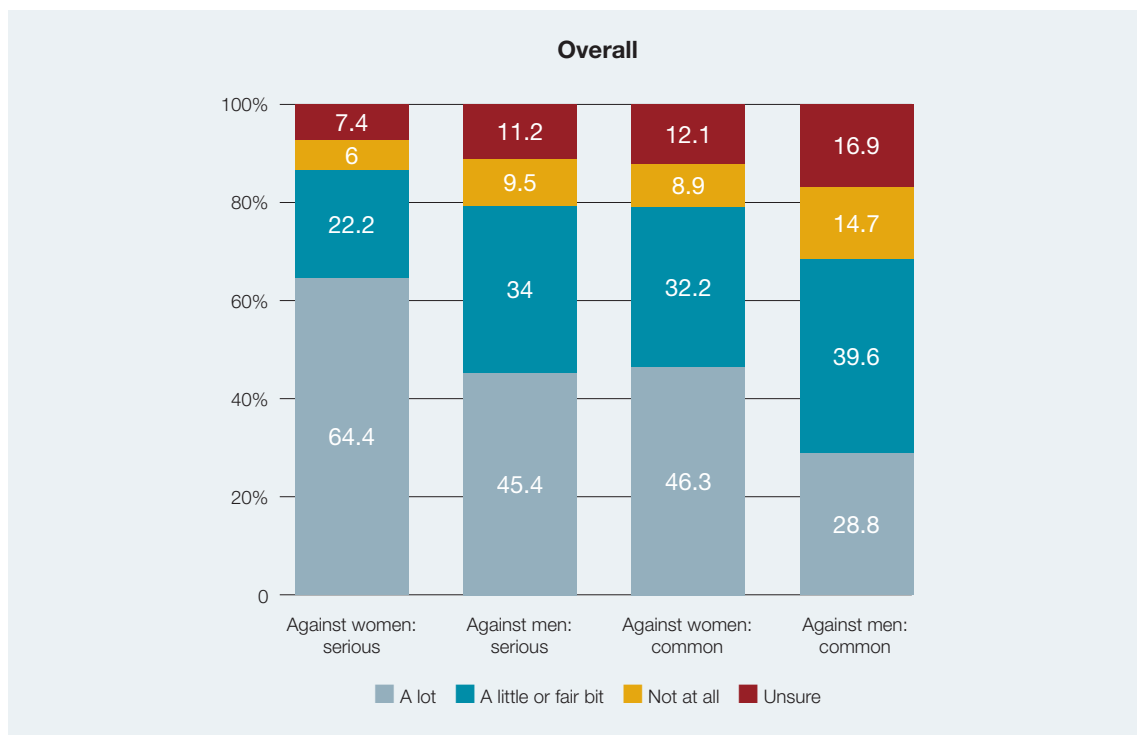


Figure 7: CMS: Perceptions of violence against women and men as serious/common in the community, overall

Responses by level of remoteness

- > It was slightly less common for participants in regional (26%) areas, than in urban (32%) or remote (31%) areas, to report that violence against men was *common* in their community (Figure 8; Figure 9; Figure 10).

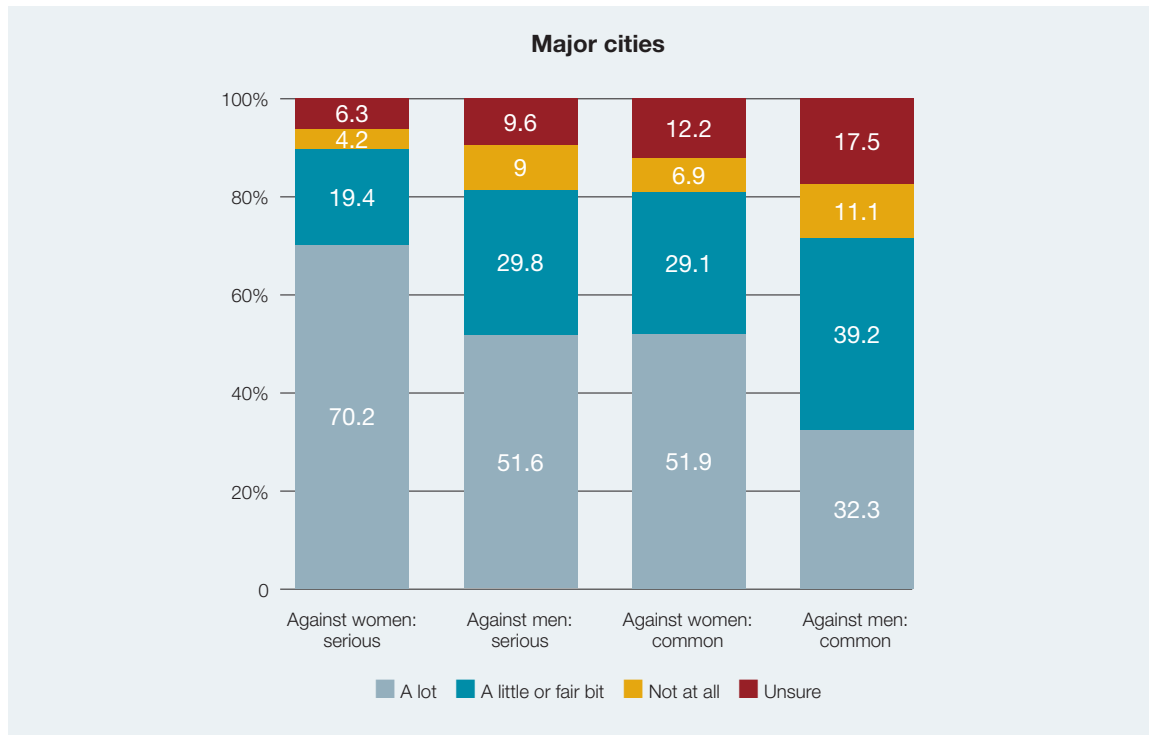


Figure 8: CMS: Perceptions of violence against women and men as serious/common in the community, major cities

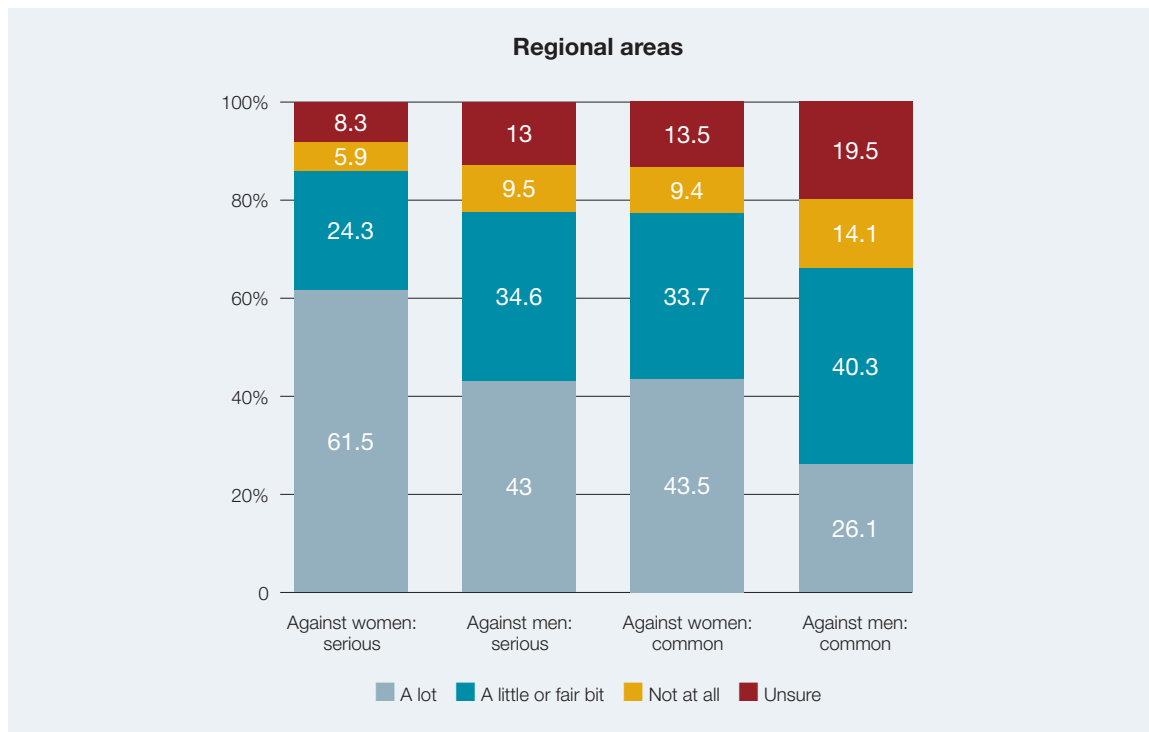


Figure 9: CMS: Perceptions of violence against women and men as serious/common in the community, regional areas

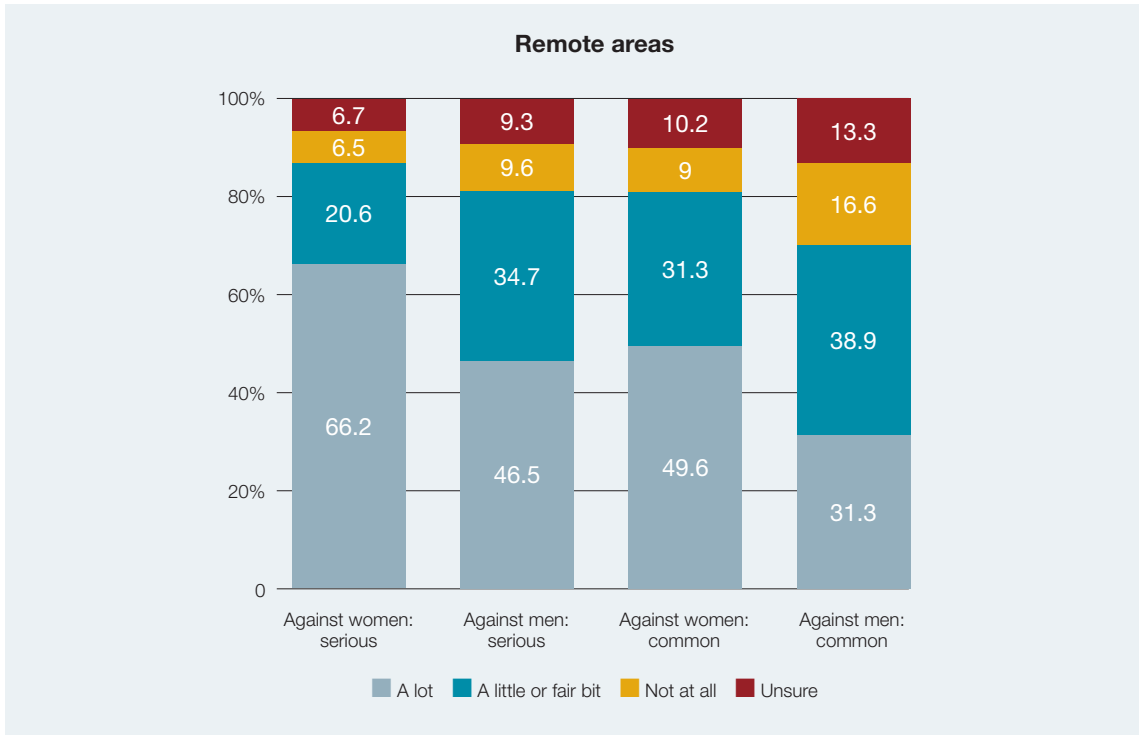


Figure 10: CMS: Perceptions of violence against women and men as serious/common in the community, remote areas

Female/Male responses

- > It was more common for women (51%) than men (41%) to report that violence against women was *common* in their community.
- > It was similarly common for females and males to report that violence against men was *common* and a *serious* issue in the community, and for males and females to report that violence against women was a serious issue. (Figure 11; Figure 12).

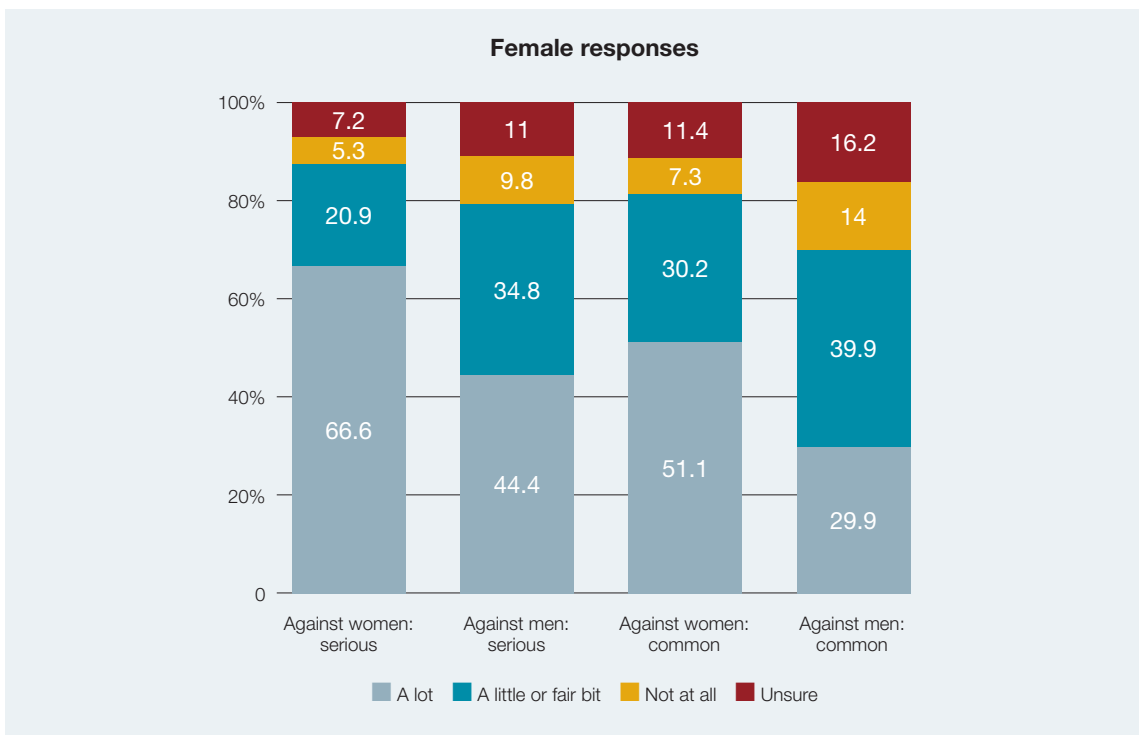


Figure 11: CMS: Perceptions of violence against women and men as serious/common in the community, female responses

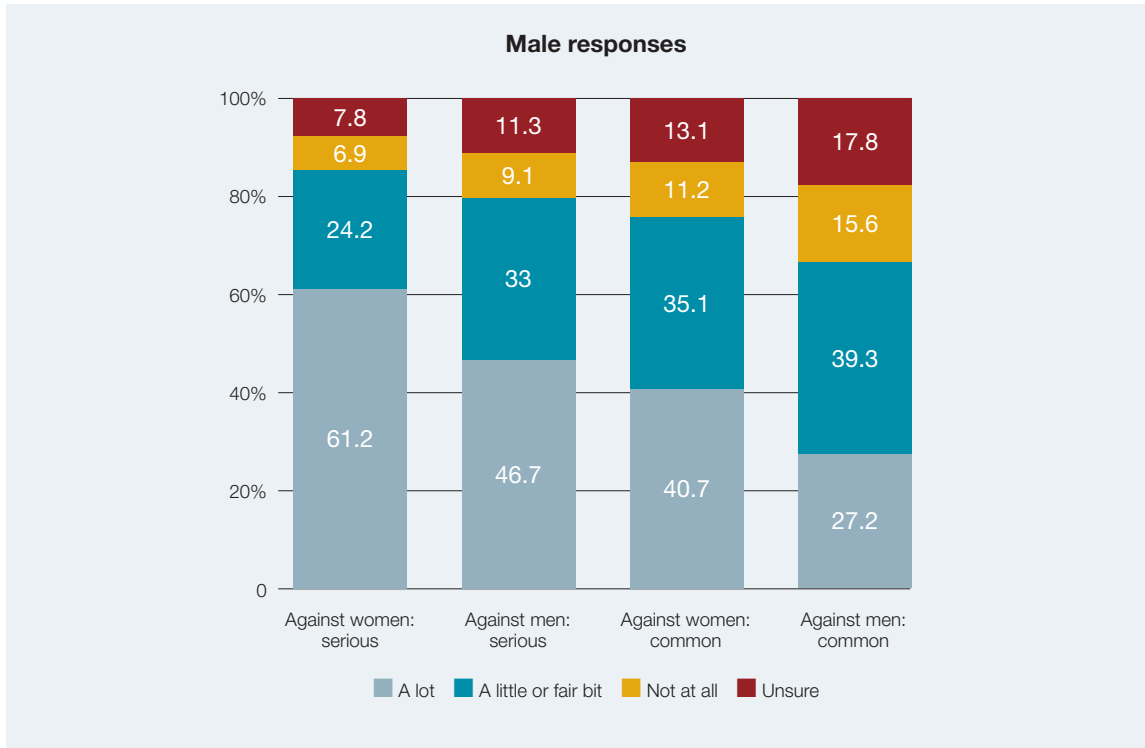


Figure 12: CMS: Perceptions of violence against women and men as serious/common in the community, male responses

These quantitative findings align with perspectives shared in the focus groups and interviews and are broadly consistent with other available evidence about perceptions of family violence in Aboriginal and Torres Strait Islander communities.

Informal and formal reporting of violence, and barriers to formal reporting

Both the qualitative and the quantitative data support the view that people are more likely to tell someone about the violence informally,³³ rather than formally reporting it to the police or other service providers. Elders are commonly spoken of as a trusted and safe confidant, and participants explained that they would prefer to tell an Elder about violence rather than formally report it:

I'd tell the Elders in town.

The most common action taken after violence was to tell someone, regardless of domain of violence, remoteness, gender or age. Among participants who had ever experienced any violence, 43% stated that they *informally* told someone about the violence, and 46% of them also *formally* reported it. A relatively small proportion of those who did not *informally* tell anyone about the violence *formally* reported it (18%) (Table 18).

Participants expressed mixed attitudes about formal reporting of violence to police or other services. Barriers included lack of trust in services, fear of family breakdown and concern about men being imprisoned and children being removed:

A lot of women will not go seek help for domestic violence because of the fear of they're going to lose their children. You go up to [service] and stuff like that, a notification's put in straight away here. Child Safety's knocking on your door the next day. You know, okay, so they stay in the situation and try to hide the situation as best as possible, in fear of losing their children. That's got to change, they've got to be able to feel that they can go to the services and seek help without fear of losing their children.

The CMS findings show that participants were more likely to *formally* report violence if the perpetrator was unknown to them, compared to if they were a family member or other known person (Table 17). This indicates there may be barriers to reporting violence perpetrated by family or known persons. This may relate to the concerns raised about reporting leading to family breakdown or retaliation.

33. Following feedback from an external member of the Study Advisory Group at the meeting held on 3 March 2020, we have reworded this subsection to distinguish formal and informal reporting of violence more clearly.

Interview and focus groups participants expressed fear about getting involved in a violent situation involving people outside their family. They were especially reluctant to report issues to the police, and unsure about how that interference would be received:

... you're afraid of the consequences for them if you do say anything.

... looking the other way and pretending they don't see it because they don't want to get involved.

And then if you do say something, if you're an onlooker, then they hate you for it, like, 'you a dog', like.

So, you've got think about ... you'll get involved with somebody's domestic violence, your family's got to be ready to get involved too.

Participants explained their reluctance to report family violence as fear of threats and retaliation from fellow community members. One participant described the experiences of a children's service worker:

... they're pretty scared to try and help them a lot.

When asked why the workers were scared, participants answered:

Retaliation, I suppose ... From the person who's the perpetrator ... I had a friend, she had to leave her work because of that sort of situation ... And with that situation of domestic violence, for myself, doing everything in the community outside of work, you're putting yourself at risk to potential violence against yourself or whatever if you see that partner that you've helped the mum and their kids get away from domestic violence and they try and blame you.

I've received a threat from a number unknown saying 'I suggest you back off', around the time I was helping that family leave domestic violence.

In the CMS, both males and females reported shame as a barrier preventing use of services (16% of females and 17% of males) (Table 20). One aspect was concern about the perception of other people in the community when they engaged services:

So, probably, in a lot of cases, if the mandatory report is made and then police are involved, then ... or [Department of Child Services] or [Family and Community Services], straight away people are probably just going draw their conclusion and say well, you know, 'How come they're looking at them, they must be doing something wrong.'

Commonly, participants felt that men were more likely to feel shame and stigma related to family violence, whether they experience or use violence:

Probably a lot of men out there in DV relationships but they're not confident to go down and speak about it because it's like nothing's going to be actioned or they're not going to be looked at the same way.

The CMS reflected this finding; it was more common for females (37%) than males (21%) to state that they had reported their experience of violence (Table 18).

Many service providers raised concern over community members' 'unwillingness' to engage with services because of shame. In some cases, the service providers seemed unaware of, or did not consider, the multiple factors that might prevent community members from accessing services related to violence:

Clients refuse to acknowledge that there is a problem ...

If clients are willing to disclose and ask for assistance then the service can greatly benefit the client.

... you still get the patients who do not want our help and refuse to give any information to us or the police.

Actions taken following experience of violence

CMS participants who had ever experienced violence were asked to report the actions they took following the violence. Of those who had ever experienced violence (Table 17; Table 18): 26% received physical or mental health care; 15% had time off work or study; 33% slept or stayed somewhere else; 43% told someone about the violence; 30% reported the violence; and 10% took another action not listed. Participants reported the following actions:

- > The most reported action taken after violence, for all of types of violence, was to tell someone. It was also the most reported action for all levels of remoteness, for both men and women, and for all age groups.

- > It was more common for participants in major cities to tell someone (48%), compared with participants in regional areas (44%) and remote areas (36%); in contrast, it was more common for participants in remote areas to report the violence (33%), compared with regional areas (30%) or major cities (26%).
- > It was more common for females than males to state that they slept/stayed somewhere else (39%, compared with 25%), told someone (49%, compared with 33%) and reported the violence (37%, compared with 21%).
- > Taking action other than telling someone was less common among youth aged 16 to 17 years than other age groups. For example, 7% of youth said that they got health care after experiencing violence, compared to 20–30% of all other age groups.
- > In general, taking any of these actions was more common among participants who had experienced physical or emotional violence than those who experienced sexual violence.
- > Participants who experienced violence in the past year were more likely to report taking action (35%) than those who experienced it more than a year ago (28%).
- > In general, taking action was more common among participants who experienced more (versus less) severe violence; this was measured by frequency of violence, number of domains of violence exposure and being scared of partner.³⁴ For example, participants who reported experiencing violence monthly or weekly were around twice as likely as those who experienced violence once or a few times to get health care (39%, compared with 21%), have time off work or study (26%, compared with 11%) and sleep/stay somewhere else (55%, compared with 26%).
- > Violence was more likely to be reported if the perpetrator was unknown (40%) than if the perpetrator was a family member (35%) or other known person (31%).
- > Regardless of whether the perpetrator was a family member, other known person or unknown, the most frequently reported action was to tell someone (43%).
- > Participants were more likely to sleep somewhere else if the perpetrator was a family member (47%, compared with 33% for other known person and 29% for unknown person).
- > Reporting of violence was more common among participants who experienced violence in the last year than among those who experienced it more than a year ago (35%, compared with 28%).

Conclusion

Our findings suggest that multiple barriers prevent or deter people from reporting violence, reduce service accessibility and inhibit service effectiveness. This is consistent with findings from a previous review of the literature on violence against women in Aboriginal and Torres Strait Islander communities,⁽³⁾ which highlighted the finding that much violence against Aboriginal and Torres Strait Islander women (as well as women in the total Australian population) is not reported.

We reiterate that the FaCtS Study (like others cited here) was not designed to produce nationally representative data, and comparisons between quantitative findings from the CMS and other studies cannot readily be made. Methods and measures have varied across studies, precluding direct comparison across data sources. Despite these methodological cautions, evidence from the CMS is broadly consistent with findings from other studies that have identified substantial levels of concern about violence in Aboriginal and Torres Strait Islander communities. One example is the Longitudinal Study of Indigenous Children (LSIC), which asked caregivers of the study children about the extent to which family violence was a problem in their community.³⁵ In 2013, 29% of caregivers participating in LSIC reported that family violence was a problem in their community: 5% reported that it happens ‘all the time’, 10% that it happens ‘a lot of the time’, and 14% that it happens ‘a bit of the time’.⁽⁷⁵⁾ The 2017 NCAS asked only about violence against women (43): 80% of male and 94% of female Aboriginal and/or Torres Strait Islander respondents agreed that violence against women was common.

34. This fits with previous evidence; analysis of the 2014–15 NATSISS found that, among women who had experienced family and domestic violence in the last year, 60% of those who were physically injured reported it to the police, compared with 40% of those who were not physically injured.⁽¹⁴⁾

35. LSIC is a community-based longitudinal survey of 1,700 families of Aboriginal and Torres Strait Islander children, conducted in several communities, ranging from urban to remote. It is not designed to produce nationally representative data. Most primary respondents in 2013 were Aboriginal and/or Torres Strait Islander people, and the majority (around 90%) were female.

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