

ANROWS

AUSTRALIA'S NATIONAL RESEARCH
ORGANISATION FOR WOMEN'S SAFETY
to Reduce Violence against Women & their Children

MEDIA RELEASE

WEDNESDAY 13 JULY 2022

REPORT EMBARGOED UNTIL TUESDAY 19 JULY 2022

Children five times more likely to receive a mental health service by the time they turn 18 after experiencing domestic and family violence

Early trauma-informed intervention is needed to respond to children experiencing the trauma of domestic and family violence (DFV) to support healing and buffer the risk of mental health issues appearing or escalating as the child grows.

An upcoming ANROWS research report led by a team from The University of Western Australia, [*Investigating the mental health of children exposed to domestic and family violence through the use of linked police data and health records*](#), compares the rates of mental health service use for children who had been exposed to DFV and those who had no known experience of violence.

ANROWS CEO Padma Raman PSM emphasised the right of every child to grow up in a safe, happy and healthy environment.

“Children experiencing domestic and family violence need access to services that are holistic and able to address multiple needs. Collaboration is the key to effective care – and to avoiding the potentially negative impacts of multiple services working in disconnected ways with children and families.”

“Even where there may be no or limited visible signs of mental distress, we should be encouraging everyone in a child's network to take the opportunity to act early and buffer the risk of mental ill health. Children shouldn't have to be visibly struggling with their mental health before the trauma of violence is addressed.”

The research, which linked a large sample of Western Australian police and health department data, found that children who had been exposed to DFV were almost five times more likely to have contact with a mental health service by the time they turned 18 than children with no known experience of violence (79% compared to 16%).

In addition, children who had been exposed to DFV were more likely than those with no known experience of violence to be diagnosed with a range of mental health issues, including a twofold risk in substance use disorder.

Children who had been exposed to DFV, compared to those with no known experience of violence, were:

- 1.2 times as likely to be diagnosed with a psychological development disorder
- 1.4 times as likely to be diagnosed with a depressive disorder
- 1.4 times as likely to be diagnosed with schizophrenia and psychoses
- 1.4 times as likely to be diagnosed with an organic disorder
- 1.5 times as likely to be diagnosed with an anxiety disorder
- 1.6 times as likely to be diagnosed with intentional self-harm
- 1.8 times as likely to be diagnosed with a personality disorder
- twice as likely to be diagnosed with a substance use disorder.

The research also revealed that on average there was a six-year delay between police or health intervention for DFV and a child receiving a mental health service. While children were aged around six at the time police or health services were aware that DFV was occurring within their household, children were not in contact with a mental health service until age 12.

The Hon Amanda Rishworth MP, Minister for Social Services, said that “Reducing violence against women and children is a first-order priority for the Albanese Labor Government.”

“This is why Minister for Women, Katy Gallagher, and I will meet with our state and territory counterparts on Friday [22 July] to discuss the important issues impacting Australian women and children including the next National Plan.”

“This important research by ANROWS highlights the intergenerational impact of domestic and family violence. Every child has the right to grow up in a safe environment and free from domestic and family violence. As a former psychologist working in the delivery of mental healthcare, I am concerned that children who have experienced domestic and family violence are more likely to be diagnosed with a range of mental health issues, including a twofold increase in substance abuse.”

“Also concerning is the delay between police or health intervention for domestic and family violence and a child receiving a mental health service. The Albanese Labor Government, along with our state and territory counterparts, will explore ways to reduce the impact of domestic and family violence on children.”

While the findings highlight the significant impact DFV can have on a child’s mental health and wellbeing, it is also important to emphasise that childhood represents the greatest opportunity for mental health intervention. The report recommends systemically building DFV and child mental health awareness among those working with children and young people, including the wider health and specialist workforce, and supporting practitioners to work in trauma-informed and culturally safe ways.

Journalists are invited to request an embargoed copy of the report and the associated resource *Children and young people’s mental health and domestic and family violence: What’s the link?* The report and details in this media release are embargoed until it is published on the ANROWS website on Tuesday 19 July 2022.

Acknowledgement of children’s lived experience

ANROWS acknowledges that children and young people living in homes where DFV is present are not simply “exposed” to DFV – they are experiencing it. There are no circumstances in which children and young people are exposed to DFV and are not also being impacted by this violence.

Therefore, ANROWS will always default to using “experienced DFV” instead of “were exposed to DFV” or “witnessed DFV”. This language aligns with the *National Plan to End Violence against Women and Children* (due for finalisation in 2022), which recognises that children experience DFV as victims in their own right, and also seeks to honour the voices of victims and survivors who have felt minimised, erased or unacknowledged as childhood survivors. Please note that in the above report, the authors have chosen to use the term “exposed to DFV”, and have provided a rationale for this choice in the “Definitions and key concepts” section.

For further information, contact Sophie Gillfeather-Spetere at ANROWS on +61 0411507362 or email sophie.gillfeather-spetere@anrows.org.au

About ANROWS

Australia’s National Research Organisation for Women’s Safety Limited ([ANROWS](#)) is a not-for-profit independent national research organisation.

ANROWS is an initiative of Australia’s *National Plan to Reduce Violence against Women and their Children 2010–2022*. ANROWS was established by the Commonwealth and all state and territory governments of Australia to produce, disseminate and assist in applying evidence for policy and practice addressing violence against women and their children.

ANROWS is the only such research organisation in Australia.