NDLERF

Alcohol/Drug-Involved Family Violence in Australia (ADIVA)

Final report

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Dr Arlene Walker, Dr Shannon Hyder, Lorraine Tonner, Prof Andrew Day

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Acronyms

ABS	Australian Bureau of Statistics
ADIVA	alcohol/drug-involved family violence in Australia
AOD	alcohol and other drugs
ARV	alcohol-related violence
ASGS	Australian Statistical Geography Standard
CCB	coercive controlling behaviour
CCS	Coercive Control Scale
CCV	coercive controlling violence
CI	confidence interval
DASS	Depression Anxiety and Stress Scales
DV	domestic violence
DVO	domestic violence order
DFVPA	*Domestic and Family Violence Prevention Act 2012* (Qld)
FDV	family and domestic violence
FV	family violence
FVO	family violence order
HED	heavy episodic drinking
IPV	intimate partner violence
IT	intimate terrorism
JO	justice order
M	mean
MAPS	Multi-Agency Protection Services
NDLERF	National Drug Law Enforcement Research Fund
OR	odds ratio
ORU	Online Research Unit
PFVO	Police family violence order
PSS	Personal Safety Survey
SCV	situational couple violence
SD	standard deviation
SDS	Severity of Dependency Scale
SEIFA	Socio-Economic Indexes for Areas

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Introduction

Family and domestic violence (FDV) are significant public health and social issues. According to the 2012 Personal Safety Survey (Australian Bureau of Statistics 2013), approximately 11.2 percent of the Australian population aged over 15 years (1.93 million people) have experienced physical or sexual violence perpetrated by a current or former partner. The negative consequences of FDV, which include physical injury, depression, suicide and post-traumatic stress disorder, have been well-documented (Stuart et al. 2013). A range of risk factors have been identified to contribute to FDV, including Alcohol and Other Drug (AOD) use. Of significance, AOD use represents risk factors that can be modified at individual and environmental levels.

Types of domestic violence

For this project, intimate partner violence (IPV) incidents include any instance where the relationship between the parties is of a romantic or spousal nature (eg husband, wife, ex-spouse, de facto partner). Family violence (FV) incidents include any incident involving other family members (eg mother, father, sibling etc).

Family and domestic violence (incorporating intimate partner violence) can include physical, psychological, sexual, and/or emotional abuse; range from mild threats to severe abusive acts; and occur on a one-time only individual basis or can be insidious abuse that occurs over an extended period of time (Mitchell 2011). Typologies of intimate partner violence distinguish types of IPV that differ qualitatively in terms of patterns of behaviour, developmental correlates, severity and harms. Typologies move beyond the physical, sexual and psychological categorisation typical among violence research (eg World Health Organization 2002) and instead clusters individuals based on a number of indicator variables. These more complex understandings of IPV have important implications for policy, screening processes for victims, and development of effective treatment programs that target the specific needs of victims and offenders (Day & Bowen 2015; Kelly & Johnson 2008).

In the past few decades there has been a growing understanding of the importance of contextualising IPV experiences within broader patterns of behaviour (Johnson 2005, 2008; Stark 2007). In particular, coercive controlling behaviour encapsulates the array of behaviours an individual uses to exert control over an intimate partner (eg economic/financial, threatening and intimidating behaviour, emotional control, isolation). Johnson's (2008) typology of IPV defines four violence types that can be distinguished via experience of coercive controlling behaviour and violence. Within this typology, 'violence' refers to acts of direct physical harm (eg hitting, slapping or kicking someone). Coercive controlling violence (CCV) refers to violence within intimate partnerships that is used to control a relationship (Johnson 2008). Johnson's typology identifies three patterns of CCV and an additional type of IPV whereby violence does not occur in the context of coercive controlling behaviour (situational couple violence).

The four types of IPV identified by Johnson in relation to partnerships are:

- intimate terrorism—where one partner is violent and controlling and the other is not;
- violent resistance—where one partner is violent and controlling, and the other is violent (in reaction to the other's control), but not controlling;
- mutual violent resistance—where both partners are violent and controlling; and
- situational couple violence (SCV)—that involves no control, only violence. Unlike the three previously defined types of IPV, SCV does not occur in the context of control, but rather occurs most commonly in the context of verbal aggression arising from mundane (ie situational) arguments that escalate into physical violence (Johnson 2008).

It is widely recognised that different data sources and study designs capture different types of domestic violence or DV (Graham-Kevan & Archer 2003a, 2003b). For example, police records identify a larger proportion of violent DV types, intimate terrorism and violent resistance, while population surveys more commonly identify SCV (Johnson 2006). While general population studies may claim representative samples, in this instance the bias of even minor non-response has critical implications. For example, intimate terrorists may be extremely unlikely to agree to participate in such a survey, and their partners are often isolated and likely to fear reprisals if they answer such questions (Johnson 2005). However, because victims of intimate terrorism are attacked more frequently, are more likely to be injured, and are more likely to seek help from police and medical facilities (Johnson & Leone 2005), it makes sense that samples recruited from police, emergency rooms and shelters tap this difficult-to-reach population. Focusing on only one perspective in isolation fails to provide a complete picture of the range and true extent of DV. Therefore, to provide a complete picture of the range and extent of DV types it is important to collect data from multiple sources.

Alcohol, drugs and family violence

Alcohol is involved in about half of all police-reported FDV incidents in Australia (FARE 2015; Grech & Burgess 2011), and is likely to be involved in a substantially greater proportion of all FDV. Evidence from police report and hospital data indicates that the probability of any family violence is increased on days when perpetrators consume alcohol. Physical assault has been found to be over 10 times more likely to occur on a day when any alcohol was consumed, and 12 times more likely on a heavy drinking day (Stuart et al. 2013). The frequency of intoxication, binge drinking or problem drinking has been shown to be more strongly associated with the severity of violence and the likelihood of injury than drinking itself (Braaf 2012). A large study of FDV across 13 countries found that violence was consistently rated as more severe when one or both partners consumed alcohol compared with incidents unrelated to alcohol. Further, alcohol-related FDV provokes a greater level of anger and fear, and is more likely to be perceived a crime, reported to police, and lead to arrest, compared with incidents unrelated to alcohol (ABS 2013; Holder 2007).

Leonard and colleagues have highlighted in laboratory studies of aggressive behaviour that subjects who receive alcohol are more aggressive than subjects who receive no alcohol or subjects who receive placebo beverages (Leonard 2005). In 1979, Taylor et al. (1979) demonstrated that aggression is a function of the interaction of alcohol consumption and level of provocation. Intoxicated and non-intoxicated subjects were given the opportunity to administer a potentially injurious level of shock to an opponent who behaved in either a provocative or an extremely provocative manner. The intoxicated subjects in the extreme provocation condition showed the greatest increase in the use of the potentially injurious shock (Taylor et al. 1979). Several studies of marital behaviour have also shown that alcohol administration to men increases the extent of negative verbal behaviour displayed by the men and their partners (eg Leonard & Roberts 1998).

Alcoholic men have also been found more likely to be drinking during violent events according to wives' accounts, and more likely to have consumed six or more drinks prior to violent events, according to husbands' accounts (Murphy et al. 2001). Importantly, blood alcohol content (BAC) appears to influence their behaviour and a BAC of 0.19 was reported in violent events compared with an estimated BAC of 0.11 in conflict events that did not include violence. In addition, several studies have reported that alcohol use is more common among serious physical assault events (Martin & Bachman 1997; Thompson, Saltzman & Bibel 1999).

Alcohol may encourage violence or other antisocial behaviour by disrupting normal brain function. For example, alcohol can weaken brain mechanisms that normally restrain impulsive behaviours, including inappropriate aggression (Gustafson 1994). By impairing information processing, alcohol can also lead a person to misjudge social cues and overreact to a perceived threat (Miczek et al. 1997). At the same time, alcohol narrows attention which may lead to an inaccurate assessment of the situation and potential consequences of acting on an immediate impulse (Cook & Moore 1993). A lack of executive control could also help to explain why adolescents and young adults are so frequently the perpetrators of violent behaviour when drunk. It has been shown that human brains continue to develop well into the twenties and that one of the last parts of the brain to develop is the prefrontal cortex, the region responsible for reigning in impulses through executive control (Lebel & Beaulieu 2011).

A history of childhood sexual abuse, neglect or exposure to family violence may also be a contributing factor (Miller 1993). Children who witness family violence may learn to imitate the roles of aggressors or victims, setting the stage for alcohol abuse and violence to persist over generations (Brookoff et al. 1997). Even obstetric complications which damage the nervous system at birth, along with subsequent parenting issues, such as those that might occur in an alcoholic family, may predispose one to violence, crime and other behavioural problems by the age of 18 (Raine et al. 1996; Raine, Brennan & Mednick 1994; White 2002). Finally, problematic alcohol use and a propensity to violence may stem from common causes, such as antisocial personality disorder (Virkkunen, Goldman & Linnoila 1996), temperamental traits, such as a risk-seeking personality, or a social environment (eg delinquent peers or lack of parental supervision) that encourages or contributes to deviant behaviour (Jessor & Jessor 1977; White 2002).

The availability of alcohol within a geographic location has consistently been linked to excessive alcohol consumption and all types of violence (eg Day et al. 2012; Livingston 2008). In particular, the alcohol outlet density of a geographic region has been associated with rates of police-reported FDV (Cunradi, Ames & Duke 2011; Livingston 2011; Roman & Reid 2012). In one study, across a nine-year period, each additional off-premise alcohol outlet in an American urban city was associated with a four percent increase in the number of FDV-related calls to police and a three percent increase in the number of FDV incidents attended by police (Cunradi, Ames & Duke 2011). This association appears to vary across the week, with a significant positive relationship during the weekend and no relationship on weeknights (Roman & Reid 2012). An observed negative relationship between on-premise outlets and FDV incidents (Cunradi, Ames & Duke 2011; Livingston 2011) suggests that alcohol consumption at licensed premises may have a protective effect against FDV. The evidence related to alcohol availability and FDV is based on aggregated police records and emergency calls and presentations; individual-level data are not considered. It is critical to investigate the role that alcohol availability plays in individual FDV incidents, as this represents a key gap in the current literature.

Research investigating the role drug use plays in FDV is less extensive than the evidence pertaining to alcohol. However, the available evidence indicates that illicit drug use and/or abuse is a factor in FDV. The prevalence of illicit drug use has been found to be higher among those involved in FDV (eg Smith et al. 2012). Limited evidence suggests a relationship between drug use/abuse and FDV (Nicholas et al. 2012). For example Stuart et al. (2008) reported that illicit drug use was a stronger predictor of family violence than alcohol abuse among a sample of American males and females arrested for family violence perpetration. In another study, males' use of stimulant drugs predicted perpetration of physical abuse, and females' use of sedatives was associated with psychological abuse perpetration (Mattson et al. 2012).

Drug use, including licit drugs such as over-the-counter medicines, has also been implicated as a coping mechanism in reaction to FDV (Johnson 2005; Johnson, Leone & Xu 2014). Using drugs as a coping mechanism may influence subsequent victimisation indirectly by contributing to the triggers of violence, such as financial issues and poor communication. Irrespective of the causal links between drug use and violence, it is clear that drug use and misuse should be important considerations in treating both victims and perpetrations of FDV. Further investigation is needed into the association of illicit drug use with FDV, and how it is related to alcohol use, particularly in Australia.

Role of police

It has been estimated that more than 60 percent of FDV is unreported to police (Morgan & Chadwick 2009); however, Australian evidence indicates an increasing willingness among victims to report FDV incidents to police (Marcus et al. 2009).

The police are the first contact for many FDV victims—particularly following severe alcohol-related violence. The initial police response and subsequent intervention are critical and can influence the risk of subsequent victimisation. Across Australia, FDV involves a significant proportion of police work. For example, about 40 percent of all assaults attended by the NSW Police Force in 2010 were FDV incidents (Grech & Burgess 2011).

Project objectives

To address the identified gaps in current knowledge about the role of alcohol and other drug use in family violence, this project sought to address the following four key research questions:

- What is the relationship between AOD use and FDV in the general Australian population?
- What role do key demographic, social and environmental factors play in the occurrence and severity of different types of FDV?
- How do variables differ in people who experience FDV where AOD use is involved, compared with those where AOD use is not involved?
- What are the major trends in FDV in relation to incidents attended by police and the factors common to them across Australia's states and territories?

National context

Addressing FDV in Australia is a Commonwealth Government national priority. *The national plan to reduce violence against women and their children 2010–2022*—released by the Council of Australian Governments (COAG) in February 2011—sets out a long-term overarching plan to guide Commonwealth, state and territory governments and community level efforts to reduce FDV across Australia. The six key outcomes of the plan are to ensure:

- communities are safe and free from violence;
- relationships are respectful;
- Indigenous communities are strengthened;
- services meet the needs of women and their children who are experiencing violence;
- justice responses are effective; and
- perpetrators stop their violence and are held to account.

The national plan is being delivered through a series of four, three-year action plans. The current project was conducted during implementation of the second action plan. This plan—Moving ahead 2013–2016—was released on 27 June 2014 and supported with more than $100 million of allocated Commonwealth funds across four years. It describes five national priorities:

1. Drive whole of community action to prevent violence.
2. Understand diverse experiences of violence.
3. Support innovative services and integrated systems.
4. Improve perpetrator interventions.
5. Continue to build the evidence base (Department of Social Services 2014).

A priority was to develop and implement a national domestic violence order (DVO) scheme to enable courts and police across jurisdictions to share information related to active DVOs in real time. The agency responsible for developing and maintaining national information sharing services between state, territory and Commonwealth law enforcement agencies, CrimTrac, was given $3.35m to develop and test a national DVO scheme through the National Domestic Violence Order Information Sharing Scheme.

State and territory context

The following briefly summarises the current family and domestic violence responses in place across Australia's states and territories, and in particular, their relevance for policing.

Australian Capital Territory

Aligned with the National Plan, the *ACT prevention of violence against women and children strategy 2011–2017* articulates the ACT Government's commitment to addressing FDV in the ACT. The primary objectives of the strategy are to ensure:

- women and children are safe;
- Aboriginal and Torres Strait Islander women and children are supported and safe in their communities;
- women and children's needs are met through coordinated systems and services; and
- men who use violence are held accountable and are supported to change their behaviours.

Developing the second implementation plan took place during the study period and was launched on 17 August 2015.

The ACT Policing is responsible for investigating all reported incidents of family violence and takes a pro-charge, pro-arrest approach. Established in 1998, the Family Violence Intervention Program is the ACT's coordinated interagency response to police-reported FDV incidents. It aims to provide protection and justice options for women, and to prevent violence. The program is based on collaboration between ACT Policing, and relevant FV government departments and non-governments services.

The Family Violence Incident Review was introduced in February 2009. It involves a weekly collaborative review by ACT police and the ACT Domestic Violence Crisis Service of all police-attended FV incidents. The aims of the review are to provide: an early identification, intervention and prevention approach to FV; an accurate record of FV incidents; increased victim and community confidence in responses to FV: and a picture of FV trends in the ACT.

Expanding the review in October 2015, ACT Policing introduced two specialised family violence and community safety teams dedicated to responding to FV. Community safety teams support operational police, providing victim support and early intervention responses to recidivist perpetrators. The domestic violence team is charged with coordinating ACT Policing's response to FV.

New South Wales

The New South Wales state government launched the Domestic and Family Violence Framework for Reform in February 2014 to improve responses to prevent and address FDV within New South Wales (NSW Department of Justice 2014). Prior to the launch of the reforms, the approach to FDV adopted within the state was fragmented, complex and inconsistent (New South Wales Government 2012). The DFV reforms sought to provide a consistent, integrated and collaborative response to FDV that was focused on supporting victims. The reforms are being rolled out in stages, starting in September 2014 in two locations. They are being implemented through five priority elements:

- a strategic approach to prevention and early intervention;
- streamlined referral pathways to secure victims' safety and recovery;
- accessible, flexible, person-centred service responses that make the best use of resources;
- a strong, skilled and capable workforce; and
- a strengthened criminal justice system response (NSW Department of Justice 2014).

The second element of the reforms focuses on the state's police responses to FDV and is set out in the *Safer Pathway* framework document. Safer Pathway outlines five key components to strengthen interagency collaboration. Two of these have direct impact for NSW police—the Domestic Violence Safety Assessment Tool, and information-sharing legislation. The tool assesses FDV risk level and enables early identification of FDV victims. The state's police are mandated, and service providers are encouraged to use the assessment tool for all FDV incidents. Legislative amendments to the *Crimes (Domestic and Personal Violence) Act 2007* provided exceptions to the state's privacy laws to enable service providers to share information about individuals involved in family and domestic violence.

Northern Territory

The *Northern Territory Domestic and Family Violence Reduction Strategy 2014–17: Safety is everyone's right* is a whole-of-government comprehensive strategy to address FDV in the Northern Territory. It is closely aligned with the national plan to reduce violence against women and their children. The overarching aims of the strategy are to:

- increase the safety of FDV victims and their children;
- reduce rates of intergenerational trauma as a result of exposure to FDV;
- increase perpetrators' accountability; and
- establish a sustainable integrated FDV service delivery system (Northern Territory Submission to the Senate Inquiry into Domestic Violence in Australia [Submission 158]).

The strategy centres on an integrated coordinated approach—involving government departments and non-government services—that is underpinned by detailed action plans. Key components include:

- the Domestic Violence Directorate to provide leadership and support;
- specialised services for FDV victims and children;
- an integrated information management and referral system—SupportLink;
- the Family Safety Framework to protect high-risk FDV victims;
- FDV training and improved information sharing for frontline staff;
- funding for men's programs and sexual assault support workers;
- a FDV prevention framework; and
- review of FDV legislation.

The Family Safety Framework is an action-based, crisis intervention response that targets FDV victims and their families at high risk of serious injury or death. The framework was introduced in Alice Springs in July 2012 as part of the Integrated Response to Family and Domestic Violence project established through the Alice Springs Transformation Plan with state and Commonwealth government support. Following the successful trial, the framework was extended to Katherine in April 2015, and Darwin and Tennant Creek (May 2015). It now forms a key part of the statewide FDV strategy. The safety framework includes: a common risk assessment tool, interagency referral process, information-sharing protocol, and fortnightly family safety meetings. The Family Safety Framework also provides for 'cross border' information-sharing between the Northern Territory and South Australia to ensure that FDV victims and their families located in remote regions of those jurisdictions are appropriately supported. The framework is led by the Northern Territory Police Domestic Violence Prevention Unit in partnership with relevant government and non-government agencies.

In addition to this leadership role, NT police developed Project Respect in 2012. This aims to reduce the incidence of FDV and to hold perpetrators accountable via a three-dimensional strategy of enforcement, engagement and empowerment. At an operational level, NT police have established a number of strike forces to target recidivist FDV perpetrators across major regions of the territory.

In 2009, the NT government amended the *Domestic and Family Violence Act 2007* to introduce mandatory reporting of FDV for all individuals over the age of 18 years. The Act now requires any adult in the Northern Territory to notify police if another person has caused, or is likely to cause, harm to a person with whom they are in a domestic relationship and/or the safety of another person is under threat due to a committed or probable act of FDV.

Queensland

The Queensland *Domestic and Family Violence Protection Act 2012* aims to protect people from FDV and hold perpetrators accountable. At the time of writing this report, the Queensland government response to FDV was being reformed. This includes reviewing the Act. The Special Taskforce on Domestic and Family Violence in Queensland, established on 10 September 2014, led to the report *Not now, not ever: Putting an end to domestic and family violence in Queensland* released in February 2015. This report outlines the Queensland government's commitment to leading a program of reform to establish a long-term prevention strategy centred on an integrated approach to addressing family and domestic violence. The state government committed $1.3 million over four years in the 2015–16 budget to implementing the first stage of reforms. This includes investing in the following:

- providing additional FDV crisis support;
- enhancing and integrating FDV service delivery;
- building the research evidence base;
- enhancing FDV justice system responses; and
- enhancing FDV police responses.

Changes to Queensland police responses to this type of violence as a result of the current wave of reforms includes:

- appointing FDV leadership roles;
- re-establishing a Queensland Police Service Domestic, Family Violence and Vulnerable Persons Unit;
- undertaking a review to improve the culture of police within the FDV area, as recommended by *Not Now, Not Ever* (the Bryce Report; Queensland Government 2015); and
- trialling different service delivery models to enhance police FDV response services.

South Australia

The South Australia Police domestic violence strategy was developed in 2005 and led to establishing, in November 2007, the best practice South Australia Police Domestic Violence Policing Model. Its core elements are:

- providing a minimum response framework to manage DV investigations and to provide support to victims;
- reinforcing the criminal investigation process for all DV incidents;
- compulsorily using a risk assessment process;
- requiring a child abuse notification to be made where a child is witness to or resides at an address where DV occurs;
- using safety planning processes to reduce the risk of harm to victims and families; and
- establishing a corporate Victim Policy Unit to support local service areas.

With government support, the police commissioner introduced the Multi-Agency Protection Service to South Australia in July 2014. This is a collaborative interagency information-sharing model to manage FDV and child protection across the state. It involves the Department of Education and Childhood Development, SA Health, Families SA, the Department of Corrections, and Victim Support Services. Based on a model operating in the United Kingdom, the service is a police-led initiative, with South Australia Police being the key organisation within the model.

The participating agencies are co-located within the same building to enable real-time information sharing, risk assessment and task allocation. The service aims to:

- provide a holistic risk assessment of domestic violence and child protection matters using a multi-agency approach;
- share information to improve service delivery across agencies;
- provide a collaborative approach to protect DV victims;
- reduce duplication of DV and child protection responses to improve efficiency across agencies;
- identify the most appropriate agency or agencies to act to ensure the protection of individuals exposed to DV and child protection issues; and
- provide a multi-agency summary document to the identified appropriate agency to support timely and efficient outcomes.

Tasmania

In line with the national plan, the Tasmanian government developed the Tasmanian Implementation Plan. This includes *Taking action: Tasmania's primary prevention strategy to reduce violence against women and children 2012–2022*. The strategy takes a public health, social justice approach to preventing family and domestic violence in Tasmania.

Since November 2004, Tasmania has adopted an integrated criminal justice response to FDV through the Safe at Home service system. Tasmania Police operates the system collaboratively with the government departments of Emergency Management; Justice; Health and Human Services; Education, and Premier and Cabinet. Safe at Home adopts a pro-arrest, pro-prosecution approach that prioritises the safety of victim of family and domestic violence.

Tasmania Police are often the first to respond to FV incidents. Operational police are responsible for determining the most appropriate response in each FDV case to enhance the safety of victims. Where appropriate, operational police issue police family violence orders (PFVOs), apply for family violence orders (FVOs) through the magistrates court, determine bail, and notify Children and Youth Services when any child/ren are impacted by FDV. Under Safe at Home, the Department of Police and Emergency Management also operates a 24-hour telephone family violence response and referral line, manages three victim safety response teams across the state, and employs six specialist police prosecutors and one police Safe at Home co-ordinator.

Victoria

Since 2006, the Victorian government has implemented policy and legislative reform to its family and domestic violence response, including:

- *Changing lives: A new approach to family violence in Victoria (2006–2009)*;
- *Family Violence Protection Act (FVPA) 2008*;
- *A right to safety and justice: Strategic framework to guide continuing violence reform in Victoria 2010–2020*;
- *A right to respect: Victoria's plan to prevent violence against women 2010–2020*; and
- *Strong culture, strong people, strong families: Towards a safer future for Indigenous families and communities*.

The reforms adopt an integrated holistic approach to family and domestic violence to prioritise the safety of women and children, hold perpetrators accountable, and prevent this violence. A key outcome of the reforms was the development of the Victorian Integrated Family Violence Service System—an integrated collaborative approach to FDV among police, justice and human services as well as involvement of non-government FDV organisations. The system provides for effective and timely referral pathways between services and includes common risk assessment tools, protocols, accreditation and funding models.

Family violence is a priority area for Victoria Police, as set out in its strategic forward plan: *The way ahead 2008–2013*, the strategy *Living free from violence—upholding the right: Victoria Police strategy to reduce violence against women and children 2009–2014*, and its code of practice. As a key partner in Victoria's integrated FDV system, Victoria Police adopts a pro-arrest approach which aims to ensure the:

- safety of all individuals affected by FDV;
- needs of children are considered and addressed;
- needs of diverse communities are considered;
- appropriate referrals are made;
- accountability of perpetrators; and
- cycle of violence is disrupted.

Operational police respond to all reported FDV incidents, conduct a risk assessment and take appropriate civil and/or criminal responses. The Victoria Police response to FDV is underpinned by FV liaison officers at every 24-hour police station, FV advisors and teams across the state, and the FV coordination unit (FVCU). Family violence liaison officers provide a coordinated, consistent approach to FDV, monitor and report on incidents, provide a contact and maintain relationships with other services, and coordinate police responses to complex or repeat FV incidents. Family violence advisors train operational police in FV issues, maintain relationships and networks with the community, FV services, and the FVCU. Family violence teams provide a specialist response and expert point of reference to FV incidents, case manage complex recidivist FV offenders and repeat victims, and investigate criminal cases. The FVCU has principal responsibility for supporting and advising Victoria Police employees on FV matters and developing statewide FV police policy and strategy.

Western Australia

At the time of this study, Western Australia Police were involved in seven strategies to prevent and interrupt family and domestic violence. These are briefly described below.

- Consultation on the Department for the Attorney General's National Domestic Violence Order Information Sharing Scheme.
- Involvement in the Family Violence Court Case Management—a collaborative case management model involving the Department of the Attorney General, Department of Corrective Services, Western Australia Police, and the Department for Child Protection.
- Exchanging data with government and non-government agencies involved in FDV case management since December 2013.
- Police representation on family and domestic violence response teams providing coordinated interagency responses to incidents involving common assessment processes, triage of responses, and shared responsibility for initiating and coordinating case management of at risk FDV cases.
- Development and use of the Domestic Violence Incident Report risk assessment tool to standardise information recorded by attending police officers, and sharing it with agencies.
- Development and delivery of the Constable Care Domestic Violence School Program in collaboration with the Constable Care Child Safety Foundation (Inc) from October 2014 to raise awareness and increase protective behaviours among primary school age children.
- Development of a perpetrator intervention initiative in partnership with the Men's Domestic Violence Helpline from December 2014, which aims to increase or promote the safety of women and children through actions, initiative, strategies and responses involving men at risk of, or currently using, violence. A pilot program, initiated in January 2015 involving police officers at the Perth Watch House, aimed to facilitate contact between male offenders in custody and the Men's Domestic Violence Helpline.

Summary

Family and domestic violence is a significant social issue that causes major social harm across Australia. In response, Commonwealth, state and territory governments have implemented policy interventions that vary in the degree to which there is cross-agency collaboration and the way in which data is collected. To date, little or no evidence exists about what approach is most effective at reducing this violence, nor is there evidence about what interventions are most cost-effective for state or Commonwealth governments. Similarly, there remains very little research into how specific agencies, like police, can intervene on specific contributing factors of FDV, especially those that might be preventable, and what impact such interventions might have. For example, while evidence indicates that numerous factors influence the prevalence and severity of FDV, AOD is one factor that can be modified at both an individual and environmental level. However, there is a lack of information about how interventions that address this issue might be used by police or other agencies to reduce violence, despite the extensive evidence demonstrating the role that alcohol and, to a lesser extent, illicit and other drug use/abuse plays in FDV. Further information is needed in relation to the role of AOD in individual FDV incidents, at both population and police record levels.

This study provides a background for future interventions, research to focus on such interventions, and it documents the role of alcohol and other drugs in violence in some Australian populations with the aim of informing future responses to this complex relationship.

Methods

In 2014, the National Drug Law Enforcement Research Fund (NDLERF) funded the Alcohol/Drug-Involved Family Violence in Australia (ADIVA) project for two years.

The project sought to provide an overview of family violence in Australia, with a focus on alcohol and other drug-related violence. The two arms of the project were to conduct:

- an Australia-wide 'personal safety' survey, focussing on AOD use; and
- retrospective studies of police offence data.

Australia-wide 'personal safety' survey

A 'personal safety' survey was conducted to describe the relationship between AOD and family violence in a sample of the general Australian population. The survey explored:

- key demographic, social and environmental factors of people involved in family violence;
- how variables differ in people who experience family violence where alcohol and other drug use is involved, compared with those where alcohol and other drugs are not involved; and
- the source(s) and types of alcohol involved in family violence incidents.

Pilot survey

The survey was piloted in August–September 2014 using a mail survey design. Surveys were posted to 9,000 Australian adults randomly identified through the *White Pages* telephone directory. The number of participants sampled from each state and territory was roughly based on population proportions, with the highest proportion of names drawn from Victoria and New South Wales (n=1,875 per state), followed by Queensland (n=1,500), and the remaining jurisdictions (n=750 each).

The pilot sample comprised 923 respondents aged between 18 and 92 years (M=57.90, SD=15.05), and included 438 males (48%) and 485 females (52%), with an overall response rate of 11.5 percent. Most (56%) participants were employed either part- or full-time, and 70 percent held post-secondary education qualifications. Most of the pilot sample (81.9%) lived in an Australian Statistical Geography Standard (ASGS) classified metropolitan or regional area. Lifetime experience of violence was reported by half (50%) the sample, while eight percent reported violence in the past three months. Of those who reported lifetime violence, 38 percent experienced IPV, 16 percent experienced FV, and 46 percent experienced 'other violence' as their most recent violent incident (see 'Violence types' later in this document).

The pilot sample was not representative of the Australian general population; the median age was substantially older and metropolitan regions were over-represented compared with the Australian population. Further, 11 percent of surveys were returned unopened due to inaccurate, incomplete or out-of-date addresses indicating inaccuracies in the Australian *White Pages* as a sampling source.

The postal survey methodology used, which led to a low response rate and a non-representative sample, was not ideal. However, this pilot phase informed decisions about survey design and sampling for the main survey study. This study unsuccessfully sought access to the electoral roll and Australian Bureau of Statistics data as alternative sampling sources during the pilot phase. Also, the Deakin University Human Research Ethics Committee did not approve of using the commercially available Australia on Disc to recruit a population sample.

Online panel survey

In response to the identified pilot study sampling issues, researchers modified the survey instrument and methodology used in the main survey. The survey instrument was reduced from 113 to 98 questions. Nine gambling behaviour items were removed from the final survey because a statistically significant association was not found between either gambling frequency or problematic gambling and experience of violence. Also dropped from the survey was one item on changes made to the respondent's usual routine as a result of their most recent violent experience. The survey was conducted wholly online. Finally, researchers oversampled individuals aged 18 to 25 years and those from rural and remote Australia to provide a representative sample.

Online panel surveys are an increasingly popular method to collect social research data, due to their reach, cost-effectiveness and speed (Greenlaw & Brown-Welty 2009). They also provide a solution to the decreasing telephone survey response rates caused in part to the trend towards mobile phones replacing residential landlines and greater use of call screening technologies (Farrell & Petersen 2010). Evidence from comparison studies indicates comparable findings from web-based surveys and more traditional laboratory studies (Birnbaum 2004). Online surveys also have been shown to have a higher response rate and data quality for under 35 year olds compared with mail-out surveys (Shin, Johnson & Rao 2012).

An Australian online social research company, Online Research Unit (ORU), was contracted to conduct the survey. The unit has ISO accreditation—the international standard for social, market and opinion research—which indicates use of quality-assured data management, recruitment and confidentiality processes. It uses multiple, mostly offline, recruitment sources, and has primarily an invitation-only policy. These strategies maximise representation across demographics and minimise self-selection bias.

Sample

The sample comprised Australian residents aged 18 years and older. A stratified random sampling design was used to obtain a proportionally representative sample of the population in each Australian state and territory, according to Australian Bureau of Statistics (2014) figures. Substantial evidence indicates that rates of violence are disproportionately higher among young compared with older adults (eg Kruger et al. 2007). Young adults (18–25 years) were underrepresented in the pilot sample, so individuals in this age group were oversampled to represent a minimum 20 percent of the final sample. Also oversampled to represent at least 20 percent of the final sample were individuals living in outer regional, remote and very remote areas with populations of less than 10,000 according to the ASGS.

Completed surveys were received from 5,155 individuals. Thirty-seven cases were removed from the dataset due to nonsensical or illegitimate responses. The final sample comprised 5,118 respondents, including 1,141 (22.3%) 18 to 25 year olds and 1,047 (20.5%) residents of outer regional, remote and very remote Australia.

Procedure

Respondents were recruited through the Australian ORU online research panel. To capture a range of demographics ORU uses multiple online (eg banner ads, search engines) and offline (eg print and radio advertising) channels to recruit a research panel. It regularly profiles its panel to ensure it represents ABS population estimates. The panel is comparable to ABS estimates on age and geographic location.

A stratified random sample of 5,000 research panel members who were Australian residents aged 18 years and older was surveyed between 16 January and 22 February 2015. The sample was stratified by age and geographic location, with 20 percent residing in rural locations and a further 20 percent aged between 18 and 25 years. Each Australian state and territory was proportionally sampled. An invitation to participate in the current study was emailed to a random 48,200 panel members during the data collection period. The email invited individuals to the online plain language statement and personal safety survey hosted securely on the ORU website. Respondents signalled their consent to participate by selecting a check box after reading the language statement. They subsequently completed the survey. Of the 48,200 panel members randomly emailed a study invitation 5,339 responded to the invitation email; 5,155 completed the online survey and 184 were screened out prior to completion due to not meeting eligibility criteria or failing to provide consent. The final sample represents a response rate of 10.7 percent.

The unit works on a reward-based system with research panel members receiving loyalty points per completed survey. Once they have earned $20 in loyalty points (typically requiring completion of several surveys), panel members exchange points for Coles Myer vouchers. The number of loyalty points panel members earn per survey is dependent on survey length and complexity. Panel survey respondents received a total of $2.50 in loyalty points following completion of the current personal safety survey.

Survey instrument

The survey was developed for the study, and incorporated key items from previous surveys and validated measures.

The final survey consisted of 98 questions and took about 20 minutes to complete (see Appendix A). Information was collected primarily about the respondent. Where applicable, respondents provided information about their current or most recent partner. The survey included five key sections.

Demographics

Demographic information collected included postcode, household composition, household income, age, sex, marital status, current relationship status, sex of current or most recent partner, migrant status, Indigenous status, and employment status and educational attainment of both respondent and partner.

Experience of controlling behaviour, aggression or violence

Information was collected regarding respondents' lifetime and most recent experience of violence. Respondents were asked to indicate whether they had experienced violence in their lifetime, more than 12 months ago, and within the past 12 months. Information on the frequency and location at which violence was experienced in the past 12 months was collected separately for experiences of physical violence, sexual violence, verbal aggression, unwanted sexual attention, intimidation, and other types of violence.

Respondents who had ever had a partner provided information on their experience of coercive control behaviours in the context of their current or most recent relationship. The Coercive Control Scale or CCS (Johnson, Leone & Xu 2014) was used to assess perpetration and victimisation of nine coercive controlling behaviours indicative of domestic violence. The original CCS assessed control tactics that may be used by a current or former partner, such as 'provokes arguments'. Johnson et al. (2014) reported that the scale possessed good internal consistency for ex-husbands (r=0.91), ex-wives (r=0.83), current husbands (r=0.75) and current wives (r=0.70). Respondents reported how often (never, sometimes, often, almost always) their partner engaged in each behaviour towards them. Respondents also reported how often they engaged in each control tactic towards their (current or ex-) partner using a modified version of the scale. The CCS items were reworded to assess respondents' behaviour, for example 'I provoke arguments'.

Detailed information was collected in relation to respondents' most recent experience of violence, including:

- time since incident occurred;
- type and nature of violence experienced, including whether respondent perpetrated, was victimised or retaliated to provocation;
- other person/s involved, including relationship to respondent;
- location of incident;
- injuries sustained;
- support/help-seeking following the incident;
- witnesses to incident;
- outcome of incident, including whether it was reported to police; and
- impact on work and life in general.

Substance use at the most recent incident

Seven questions related to AOD use at the most recent experience of violence. Information was collected about:

- nature of alcohol/other drug use by respondent and other person/s; and
- alcohol place of purchase and consumption, including distance from respondents' home and from the most recent incident location.

Substance use

Information was collected on usual AOD use, and the frequency with which use was involved in the respondents' experiences of violence.

Alcohol use was measured using the three-item AUDIT-C (Bush et al. 1998). The AUDIT-C identifies hazardous alcohol use and is scored on a scale of zero to 12. A score of four or more in men and three or more in women indicates hazardous drinking. The AUDIT-C has demonstrated good psychometric properties with high sensitivity (0.90), indicating accuracy in assessing problems with alcohol consumption (Bush et al. 1998). Respondents completed the AUDIT-C in relation to their own and their current or most recent partner's alcohol use, in addition to drinking together.

For respondents who indicated past 12-month illicit drug use, their level of drug dependence was assessed using the five-item Severity of Dependence Scale or SDS (Gossop et al. 1995). In previous research, the SDS has been found to possess high internal consistency (r=0.83) and test-retest reliability—interclass correlation coefficient=0.88 (Martin et al. 2006).

Feelings of personal safety and wellbeing

Respondents were asked whether they had ever felt unsafe during the past 12 months in five situations assessed in the Personal Safety Survey (2006). The situations included using public transport alone at night, walking alone at night, being home with only their partner, being home alone at night, and being home alone during the day. Respondents were also asked whether they had ever avoided each of these situations during the past 12 months due to feeling unsafe or other reason/s.

Respondents' level of distress over the past week was measured using the Depression Anxiety Stress Scales short form or DASS-21 (Henry & Crawford 2005). The 21-item scale measures depression, anxiety, and stress, and is used to assess emotional disturbance. Cut-off scores of four, three and seven, on the depression, anxiety and stress subscales, respectively, indicate disturbance beyond normal levels found within the population. Previous research has reported the DASS-21 to possess acceptable to high internal consistency (Antony et al. 1998).

Data analysis

Survey data were analysed based on frequency counts and percentages. Bivariate (chi-square and t-tests) and multivariate (logistic regression) statistics were conducted to explore group differences on key variables of interest.

Limitations

The online panel survey has several limitations. The sampling methodology used, limits the representativeness of the sample. Individuals who were sampled had a computer and access to the internet, were literate in the English language, and were members of the ORU online panel company. This strategy excluded individuals who did not meet these criteria, including homeless, disabled, and incarcerated individuals, new migrants, and those with low SES and education levels. It is possible that experiences of violence among these groups are systematically different compared with those of the current sample. Researchers attempted to achieve a representative sample of the Australian population by seeking to access the electoral roll, but this was not possible. The sampling method used—online panel survey—was the best approach given the project time and financial constraints. Furthermore, researchers oversampled individuals aged between 18 and 25 years and those from rural locations in an effort to increase sample representativeness.

While the survey was anonymous, what is recognised is the highly subjective nature of recounting a violent experience, especially FDV. Survey results are based on responses of only one individual present at the incident, which may be biased by recall and response errors to an unknown extent. This survey did not consider the perspective of other person/s involved in violent incidents and any third party witnesses.

Recall error may lead to underreporting violence. Individuals may have forgotten to report one or more experiences of violence or may have reported the most serious incident that may not have been their most recent. Also, AOD use can affect individuals' memories and, in some cases, can substantially reduce the amount of incident detail remembered.

The accuracy of responses from respondents may have been limited due to errors or inaccuracies. Respondents may have reported inaccurately due to misunderstanding survey questions or deliberately responding incorrectly to protect their integrity, safety or to protect someone else. To minimise this possibility the survey was conducted wholly online using an anonymous self-report design.

Controlling behaviour is very hard to capture as one particular incident. This was clear from recoding qualitative descriptions of the type of violence experienced at 'the most recent incident'. Respondents often described general controlling and psychologically damaging behaviours, for example 'controlling the relationship' or 'psychological-being made to feel inferior by spouse' or 'partner told people (my parents) I was mentally ill'.

The survey did not distinguish perpetrators from victims, but survey items were biased towards victims. For example, when asking the location of the most recent incident or the place of alcohol consumption, response options included 'at the perpetrator's home', 'at my home'. If the respondent was the perpetrator, technically they should have selected both options but multiple responses were not possible. Items relating to alcohol consumption assumed that perpetrator and victim were known to each other or drank together. However, this does not accurately capture instances where perpetrators and victims were strangers.

Finally, researchers have only questioned respondents in detail about their most recent violent experience, and it cannot be inferred that details of that incident are indicative of all incidents of violence experienced by the respondent. However, as the CCB scale is included, it is possible to infer whether the respondent has experienced a pattern of coercive controlling behaviour in their current or most recent intimate relationship.

Offences reported to police

The project originally proposed analysing data sourced from Tasmania, New South Wales and Western Australia to profile the demographic and personal factors involved in police-reported family violence incidents, and to identify the types of incidents that involve AOD. Data was subsequently sourced from the Australian Capital Territory, Northern Territory, South Australia, Queensland, Western Australia and Victoria to provide a national picture of police responses to FDV. Data from different states should not be compared directly as each has different protocols regarding what information is recorded, how that information is classified, and how different offences are classified. Three key research questions guided this arm of the project.

- What are the major trends in family violence in relation to incidents attended by police, and what are the common factors across states and territories?
- What are the key predictors of repeat incidents attended by police?
- What role do alcohol and other drugs play in breaches of family violence orders?

Australian Capital Territory

Family and domestic violence offence data were obtained from the ACT Policing database for 1 July 2009 to 30 June 2014. Across the reporting period there were 5,064 FDV offences. ACT Policing defines an incident as any activity reported to or by police that involves the use of police resources. Each incident has a unique number and may or may not result in an offence or police attendance. An offence (as reported in this document) is any act committed which breaches criminal legislation. Offences are always linked to a recorded incident and are unique; therefore a single offence should not be recorded against more than one incident. An offender is not always identified for every offence.

New South Wales

Data for the study were obtained from the NSW Police Force database for 1 January 2009 to 31 December 2013. During the reporting period 119,833 FDV incidents were recorded.

Northern Territory

Northern Territory Police data were obtained for 1 January 2010 to 31 December 2014. During the reporting period, 87,806 FDV incidents were recorded.

Queensland

Family and domestic violence data were obtained from the Queensland Police Service for 1 January 2010 to 1 December 2015. Across the reporting period 330,702 FDV incidents were recorded.

South Australia

Data for this study were obtained from the South Australian Police database for 1 January 2010 to 31 December 2014. During the reporting period 12,907 incidents were recorded.

Tasmania

Family and domestic violence data were obtained retrospectively from the Tasmania Police (incident data) and Department of Justice (offender and victim data) databases for 1 July 2009 to 30 June 2014. During the reporting period 12,975 FDV incidents were recorded.

On 15 October 2011, Tasmanian police implanted a new reporting system to record police-attended FDV incidents. Compared with the original system, the current system includes:

- systematic recording of disability status, AOD dependence, and language/s spoken;
- mandatory recording of risk assessment;
- recording of one or more victim and one or more offender per report;
- ability to indicate whether a child of the relationship was not present at the time of incident; and
- two incident category types—'incident' and 'argument'. The original system included an additional 'other' category to allow for a restraining order application.

Western Australia

Data for the study were obtained from Western Australia Police for 1 January 2010 to 31 December 2014. A total of 102,167 FDV incident records were extracted.

A new reporting system was implemented in Western Australia in August 2013. Systematically captured in the new reporting system are data relating to: location of alcohol consumption, AOD history, any financial issues, any mental health issues, and whether any children were present during the incident. Prior to August 2013, such information could only be captured in free text.

Data cleaning and analysis

Raw offence-based data was converted to incident-based data where information specific to each incident (eg alcohol presence, drug presence, child witnesses, repeat victims, recidivist offenders) was aggregated into each incident record. Thus, each incident may contain a number of separate offences (eg assault, property damage) and multiple victims and/or perpetrators. Incident characteristics, for example whether or not alcohol was present, were coded as 'yes' where any offence record within that incident indicated alcohol was present, otherwise 'no'. This method of summarising the data accounts for why the data presented here may not match official statistics that tend to refer to data that is offence-based rather than incident-based.

Often datasets contained records where the offence was reported within the reference period of the dataset, but actually occurred before the time of reference. These records were removed from the datasets.

Police data were analysed based on frequency counts and percentages. Bivariate (chi-square and t-tests) and multivariate (logistic regression) statistics were conducted to explore group differences on key variables of interest.

Incidents were classified as IPV or FV where flagged by police, or the relationship between offender and victim was available. Data from Western Australia and Tasmania could not be classified into IPV or FV, as the relationship between offender and victim was not available. Incidents are classified as IPV where the offender relationship is described as a spouse, husband, wife, ex-spouse, or any similar title, whereas FV incidents were any involving other family members (eg mother, father, sibling etc).

The Australian Bureau of Statistics developed the Socio-Economic Indexes for Areas (SEIFA) from the 2011 Census data to determine areas of socioeconomic advantage and disadvantage. The SEFIA scores of disadvantage are based on areas defined by the Australian Statistical Geography Standard. They measure resources such as economic resources, and education and occupation opportunities, to calculate the disadvantage within each defined area. Each area is given an index score to indicate how disadvantaged it is socioeconomically. This is not a rating of the individuals in these areas, but is an indication of allocation of funds, jobs and education prospects within these areas. These index scores can then be transformed into ordinal measures, such as quintiles, for better interpretation. The analyses in this report use quintiles of socioeconomic disadvantage where zero to 20 percent are areas that are the most socioeconomically disadvantaged, to 81 to 100 percent are areas that are the most socioeconomically advantaged. The SEIFA quintiles were linked for each state where postcode was available (see Table 306 in Appendix B).

Limitations

Limitations with the offending studies must be acknowledged. Only a proportion of all FDV is reported to police. Therefore, the data reported does not represent all FDV incidents that occurred within each of the states and territories during the study period.

Substantial amounts of data were missing both across and within jurisdictions for several possible reasons. A number of data fields across reporting systems were optional rather than mandatory. Attending police may focus on the most critical aspect of an incident and/or collect information for a specific purpose (ie court report). The prevalence of AOD-related incidents in the data probably does not reflect the number of all AOD-related FDV incidents police attend where alcohol was consumed, or was a contributory factor to the incident. Attending police officers make a judgement on key incident details to record based on a risk assessment of the situation and the purpose or likely outcome of the incident (ie court report). Further AOD involvement is recorded differently across jurisdictions, including offenders' and victims' level of intoxication, presence of alcohol at an incident, police judgement that alcohol was involved in an incident, and individuals' alcohol use history. This limits the ability to generalise and compare AOD-related FDV across jurisdictions.

The incident reporting systems used in Tasmania and Western Australia to collect FDV data changed during the study period. This led to changes in the specific data recorded and available for the current study and has limited this study's ability to track changes in the nature of police-attended FDV incidents over time. Of note, AOD use data have been systematically captured only since the new systems started operating in both Tasmania and Western Australia.

The type of violence at FDV incidents was not differentiated in all jurisdictions. In three states (ACT, NSW and SA) IPV and FV incidents were coded separately, while in Tasmania only IPV incidents were included, and in WA the IPV and FV incidents were combined into a single DV category. This limited the ability to examine differences in IPV and FV incidents to three states.

Finally, due to the substantial differences in the nature and type of data recorded in each jurisdiction, comparisons of FDV incidents across states and territories were not possible.

Survey results

Pilot survey

A total of 953 respondents completed the pilot survey—878 surveys were returned through the mail and 76 electronically. Thirty cases were removed due to substantial missing data, resulting in a final sample of 923.

Demographics

Age and sex

Table 1 displays the proportion of all, male, and female respondents within five age groups. Respondents were aged 19 to 92 years (M=58, SD=15.05). The sample was skewed towards older respondents, with substantially fewer respondents aged up to and including years compared with those aged more than 36 years. In all, 438 (47.5%) males, 475 (51.5%) females, and 10 respondents (1.1%) failed to disclose their sex.

Table 1 Proportion of all, male, and female respondents in five age groups (n=923)

Age (years)[a]	Total % (n)	Males % (n)	Females % (n)
18–25	1.4 (13)	1.4 (6)	1.5 (7)
26–35	7.0 (65)	4.6 (20)	9.7 (45)
36–50	22.2 (205)	18.5 (80)	26.7 (124)
51–65	34.1 (315)	34.5 (149)	35.3 (164)
66+	33.2 (904)	41.0 (177)	26.9 (125)

a: 19 respondents did not indicate their birth year

Ethnicity

The pilot sample included six (0.7%) indigenous respondents. Most identified as Australian (85.9%), followed by British (6.2%) and New Zealander (1.8%). Twenty-one percent of the sample was born outside Australia.

Socioeconomic indicators

Table 2 presents socioeconomic indicators of the pilot sample.

Table 2 Pilot sample socioeconomic indicators (n=923)

SES Indicator	n	%
Highest level of education[a]		
Year 11 or below	198	21.5
Year 12 or equivalent	67	7.3
Vocational qualification	288	31.2
Tertiary qualification	360	39.0
Gross annual household income[b]		
$25,000 or less	118	12.8
$25,001–$50,000	181	19.6
$50,001–$100,000	270	29.3
$100,001 or above	316	34.2
Employment status[c]		
Part-time	195	21.1
Full-time	321	34.8
Home duties	72	7.8
Unemployed	29	3.1
Not in the labour force (eg retired)	264	28.6

a: 2 respondents 'did not know' their highest level of education and 8 did not provide a response to this question

b: 38 respondents did not indicate their annual household income

c: 43 respondents indicated that they either 'did not know' their employment status, preferred not to answer, or did not provide a response to this question

As shown in Table 2, 39 percent of the pilot sample held tertiary qualifications and just over 20 percent had completed Year 11 or below. The modal gross annual household income of the pilot sample was $100,001 or above, followed by $50,000 to $100,000. A third of the sample was employed full-time, while 20 percent was employed part-time, and almost 30 percent was not currently in the labour force.

Residential location

Table 3 shows the proportion of the pilot sample from each Australian state and territory compared with the ABS (2014) population estimate. Compared with the general population, respondents from the Australian Capital Territory and Tasmania were over-represented and those from Queensland and New South Wales were under-represented.

Table 3 Proportion of pilot sample within each jurisdiction compared with ABS 2014 population estimates (n=923)

State/territory[a]	n	%	ABS population estimate %
Western Australia	68	7.4	10.9
New South Wales	171	18.5	32.0
Tasmania	125	13.5	2.2
Victoria	215	23.3	24.9
Northern Territory	47	5.1	1.0
South Australia	71	7.7	7.2
Australian Capital Territory	104	11.3	1.6
Queensland	107	11.6	20.1

a: 15 respondents did not provide a postcode or provided an invalid postcode and therefore could not be categorised into a jurisdiction

Source: ABS 2014

Table 4 shows the proportion of respondents living within each Australian Statistic Geography Standard (ASGS) region. Overall, 80.6 percent of the sample was from metropolitan regions and 17.8 percent was from rural or regional areas of Australia. Researchers collapsed the 'major city' and 'inner regional' regions to form 'metro' and the 'outer regional', 'remote', and 'very remote' regions to form 'regional'.

Table 4 Pilot sample geographical location according to Australian Statistic Geography Standard (ASGS) regions (n=923)

ASGS classification	% (n)[a]	2006 ABS census population estimates %[b]
Metropolitan		
Major city	503 (54.5)	68.4
Inner regional	241 (26.1)	19.7
Regional		
Outer regional	141 (15.3)	9.5
Remote	18 (2.0)	1.5
Very remote	5 (0.5)	0.8

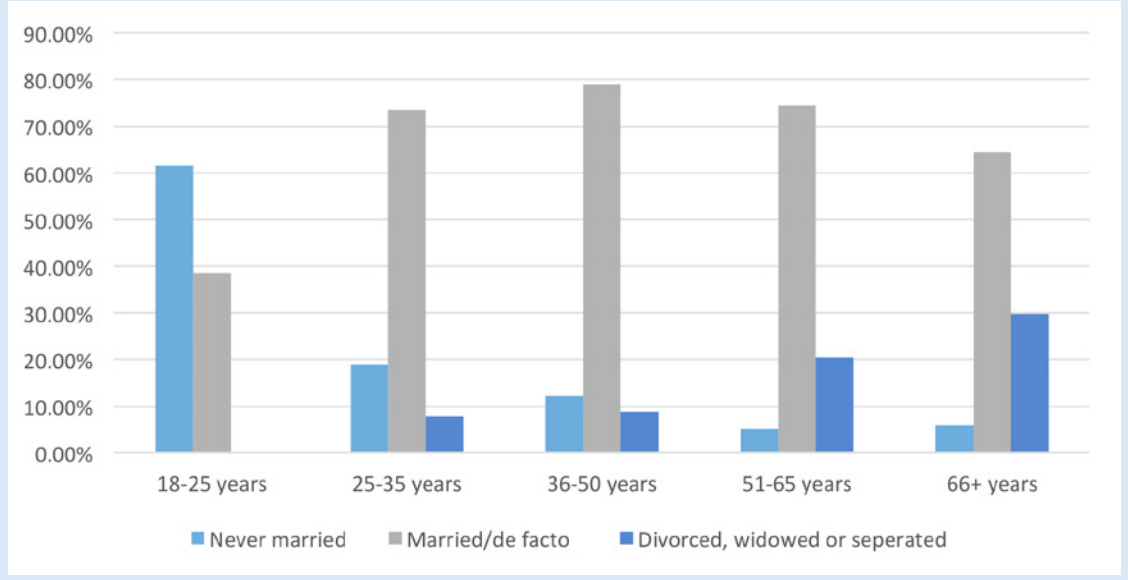
a: 15 respondents did provide a postcode or provided an invalid postcode and therefore could not be categorised into an Australian Statistical Geography Standard (ASGS) category

b: see http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4102.0Chapter3002008

Marital status and household composition

Most of the sample (70.5%) described their current marital status as married or de facto. Nine percent had never been married and 19.8 percent of the sample was separated, divorced or widowed. Figure 1 displays the marital status of respondents across five age groups.

Figure 1 Pilot sample age group by marital status



As shown in Figure 1, the proportion of respondents in a marital/de facto relationship was consistent across age groups. The proportion of respondents never married decreased across age groups, and the proportion of respondents widowed, divorced or separated increased across groups.

The mode household composition was 'couple only' (39.5%) followed by 'couple with dependent children' (26.7%), and 'lone person household' (19.5%). The remaining 14.3 percent of the sample comprised respondents living as a couple with dependent children and other individuals, multiple family households, one-parent families, and in shared accommodation.

Experience of violence

Of the total pilot sample, 50.9 percent (n=470) reported experiencing violence in their lifetime, and 6.1 percent (n=56) reported violence in the past 12 months.

Demographics

As shown in Table 5, respondents aged between 18 and 25 years were more likely to report violence in the past 12 months, while respondents aged between 36 and 50 years were more likely, and those more than 66 years less likely to report either past 12 months or lifetime violence. Those who held tertiary level qualifications were significantly more likely and those with a Year 11 or lower level of education were significantly less likely to report lifetime violence. Sex, being born in Australia, geographical location, and area level of disadvantage were not associated with experiencing either lifetime or past 12 months violence.

Table 5 Pilot sample characteristics according to lifetime and past 12 months experience of violence (n=923)

Variable	Lifetime violence % (n)	Chi square	Past 12 months violence % (n)	Chi square
All	50.9 (47)		6.1 (56)	
Age group (years)[b]				
18–25	46.2 (6)	0.11	7.5 (4)	14.82**f
26–35	58.5 (38)	1.66	6.2 (4)	0.01f
36–50	62.4 (128)	14.43***	9.3 (19)	5.57*
51–65	55.9 (176)	5.03*	5.1 (16)	0.54
66+	36.3 (111)	38.91***	3.3 (10)	5.64*
Males[a]	50.1 (234)	1.74	52.7 (29)	0.53
Females	49.9 (233)		47.3 (26)	
Born in Australia	50.8 (362)	0.00	6.5 (46)	2.32
Born outside Australia	50.5 (99)		3.6 (7)	
Highest level of education[c]				
Year 11 or below	33.8 (67)	29.53***	5.1 (10)	0.33
Year 12 or equivalent	50.7 (34)	0.00	7.5 (5)	0.32f
Vocational qualification	51.4 (148)	0.04	6.3 (18)	0.09
Tertiary qualification	60.3 (217)	20.76***	5.8 (21)	0.00
Gross household income[d]				
$25,000 or less	47.5 (56)	1.11	5.1 (6)	0.15
$25,001–$50,000	45.3 (82)	4.06*	2.2 (4)	5.53*
$50,001–$100,000	54.1 (146)	0.68	7.8 (21)	2.54
$100,001 or more	55.7 (176)	2.72	6.6 (21)	0.53
Resides in metro location[e]	49.7 (370)	2.18	6.0 (45)	0.01
Resides in regional location	56.1 (92)		6.1 (10)	
SEIFA disadvantage quintile[g]		2.36		3.28
1 (most disadvantage)	52.7 (69)		6.9 (9)	
2	52.6 (71)		5.9 (8)	
3	47.6 (79)		7.8 (13)	
4	54.3 (95)		6.9 (12)	
5 (least disadvantage)	48.8 (143)		4.1 (12)	

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: 10 respondents did not indicate their sex

b: 19 respondents did not indicate the year they were born

c: 8 respondents did not indicate the highest education level

d: 38 respondents did not indicate their household income

e: 15 respondents did not provide a valid postcode

f: analysis contains cell(s) with expected count of <5, Fisher's Exact Test is reported

g: 10 respondent's postcodes could not be classified into SIEFA nationwide ranking scores, 13 respondents did not provide a postcode

By substance use

Most (84.3%) of the pilot sample had consumed alcohol in the past 12 months, 65.7 percent had engaged in binge drinking at least once, and 52.3 percent drank at hazardous levels with past 12-month drinking behaviour assessed via the AUDIT-C. The mode number of standard drinks per occasion was one to two at least once in the past 12 months. Males were significantly more likely than females to binge drink (44.5% vs 25.1%, Phi=-0.20, p<0.001) and drink at a hazardous level (51.9% versus 31.4%, p<0.001). Scale scores were only calculated for respondents with complete data on all three items of the AUDIT-C (n=879). Few respondents (3.5%) had used an illicit substance in the past three months.

Table 6 indicates substance use behaviour by experience of violence. Binge drinking in the past 12 months was associated with experiencing violence, with 60.5 percent of those who binge drank reporting experience of lifetime violence compared with 45.2 percent of those who did not binge drink (Phi=19.10, p<0.001). No drinking variables were associated with experiencing violence in the past 12 months. Illicit substance use in the past three months was associated with experience of lifetime violence (Phi=-0.15, p<0.001) and experience of violence in the past 12 months (Phi=-0.10, p<0.01).

Table 6 Pilot sample experience of violence by substance use (n=923)

Variable	Lifetime violence % (n)	Statistic	Past 12 months violence % (n)	Statistic
Current drinker[a]		0.95		0.26
No	46.9 (67)		4.9 (7)	
Yes	51.3 (394)		6.0 (46)	
Binge drinker[b]		19.10***		2.05
No	45.2 (267)		5.1 (30)	
Yes	60.5 (187)		7.4 (23)	
Hazardous drinker[c]		3.13		0.32
No	47.7 (201)		5.2 (22)	
Yes	53.7 (246)		6.1 (28)	
Illicit substance use[d]		21.37***		9.66**e
No	90.6 (29)		18.8 (6)	
Yes	49.0 (428)		5.5 (48)	

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: 12 respondents did not indicate their current drinking status

b: 23 respondents did not indicate their binge drinking status

c: AUDIT-C scores could not be calculated for 44 respondents

d: 18 respondents did not indicate if they consumed an illicit substance in the past 3 months respondents did not indicate their household income

e: analysis contains cell(s) with expected count of <5, Fisher's Exact Test is reported

Mental health

The pilot survey included the depression and anxiety subscales of the DASS-21 (Lovibond & Lovibond 1995). Total scale scores were categorised as either within 'normal', 'mild', 'moderate', 'severe', or 'extremely severe' ranges. Scale scores were only calculated for respondents with complete data on scale items, n=875 for depression, n=888 for anxiety. Table 7 presents severity of depression and anxiety symptoms by experience of violence. The association between experience of violence and DASS scale classification was statistically significant across all comparisons ($p<0.001$). For each comparison, compared with those who did not experience violence, a smaller proportion of respondents who reported violence were categorised as within 'normal' ranges, and a greater proportion were classified in all other categories (ie experienced more severe depression and anxiety symptoms). Experience of lifetime violence accounted for 21 percent ($p<0.001$) of the variance in depression and 18 percent ($p<0.001$) of the variance in anxiety. Keeping in mind the low cell sizes for comparisons with past 12 month violence and mental health, experience of past 12 month violence was associated with 16 percent ($p<0.001$) of the variance in depression and 19 percent ($p<0.001$) of the variance in anxiety.

Table 7 Pilot sample depression and anxiety severity classification by experience of violence (n=923)

	Lifetime violence % (n)		Past 12 months violence % (n)	
DASS scale classification	No	Yes	No	Yes
Depression[a]				
Normal	90.5 (391)	75.8 (336)	84.3 (697)	62.5 (30)
Mild	4.6 (20)	9.0 (40)	6.8 (56)	8.3 (4)
Moderate	3.7 (16)	7.7 (34)	5.1 (42)	16.7 (8)
Severe	0.2 (1)	2.7 (12)	1.3 (11)	4.2 (2)
Extremely severe	0.9 (4)	4.7 (21)	2.5 (21)	8.3 (4)
Anxiety[b]				
Normal	93.6 (408)	83.0 (375)	89.0 (743)	75.5 (40)
Mild	3.2 (14)	7.1 (32)	5.3 (44)	3.8 (2)
Moderate	1.4 (6)	4.4 (20)	2.8 (23)	5.7 (3)
Severe	1.4 (6)	1.5 (7)	1.4 (12)	1.9 (1)
Extremely severe	0.5 (2)	4.0 (18)	1.6 (13)	13.2 (7)

a: n=875

b: n=888

Most recent experience of violence

Most recent experience of violence was analysed among respondents who reported lifetime experience of violence. A total of 33 respondents indicated experience of lifetime violence but did not indicate who was involved in the most recent experience of violence and were therefore excluded from analyses regarding most recent experience of violence. Thus, the analytic sample for this section is n=437. Of those who reported lifetime violence, 38.0 percent (n=166) reported IPV, 15.6 percent (n=68) reported FV, and 46.5 percent (n=203) reported other violence at the most recent incident.

Demographics

A significantly greater proportion of those who experienced other violence lived in a regional location compared with FV (Phi=-0.13, p<0.001). A significantly smaller proportion of those who experienced FV were located in areas of greatest disadvantage compared with respondents who reported either IPV (Phi=-0.16, p<0.05) or other violence (Phi=-0.17, p<0.01) incidents. Further, a significantly greater proportion of those who experienced FV were located in areas of least disadvantage compared with IPV (Phi=0.18, p<0.01). Countries of birth or education were not significantly associated with incident type.

As Table 8 shows, males were significantly more likely to report other violence compared with both IPV (Phi=0.52, p<0.001) and FV (Phi=0.31, p<0.001). Significantly greater and smaller proportions of those who experienced IPV reported a household income range of $50,001 to $100,000 and $100,000 plus, respectively, compared with other violence (Phi=0.11, p<0.05; Phi=-0.14, p<0.01).

Table 8 Pilot sample characteristics according to most recent violent incident type (n=437)

	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs Other	FV vs Other
Age group (years)[b]						
18–25	1.2 (2)	0.0 (0)	2.0 (4)	ns[g]	ns[g]	ns[g]
26–35	10.6 (17)	6.1 (4)	8.5 (17)	ns	ns	ns
36–50	30.4 (49)	14.8 (18)	27.5 (55)	ns	ns	ns
51–65	39.8 (64)	15.2 (25)	38.0 (76)	ns	ns	ns
66+	18.0 (29)	19.8 (19)	24.0 (48)	ns	ns	ns
% male[a]	21.8 (36)	40.3 (27)	74.8 (151)	**	***	***
% born in Australia	83.5 (132)	74.2 (49)	76.7 (155)	ns	ns	ns
Highest level of education[c]				ns[g]	ns	ns[g]
Year 11 or below	15.2 (25)	14.7 (10)	11.9 (24)			
Year 12 or equivalent	6.7 (11)	4.4 (3)	6.9 (14)			
Vocational qualification	30.7 (62)	34.1 (56)	30.9 (21)			
Tertiary qualification	43.9 (72)	50.0 (34)	50.5 (102)			
Gross household incomed						
$25,000 or less	15.1 (24)	10.3 (7)	11.4 (23)	ns	ns	ns
$25,001–$50,000	17.0 (27)	17.6 (12)	16.9 (34)	ns	ns	ns
$50,001–$100,000	37.1 (59)	35.3 (24)	26.9 (54)	ns	*	ns
$100,001 or more	30.8 (49)	36.8 (25)	44.8 (90)	ns	***	ns
% living in regional location[e, f]	17.7 (29)	11.9 (8)	24.1 (48)	ns	ns	*
SEIFA disadvantage quintile[h]						
1 (most disadvantage)	14.6 (24)	3.1 (2)	16.2 (32)	*	ns	**
2	17.7 (29)	13.8 (9)	14.7 (29)	ns	ns	ns
3	19.5 (32)	16.9 (11)	15.7 (31)	ns	ns	ns
4	22.0 (36)	21.5 (14)	20.3 (40)	ns	ns	ns
5 (least disadvantage)	26.2 (43)	44.6 (29)	33.0 (65)	**	ns	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns non-significant.

a: 3 respondents did not indicate their sex, b: 11 respondents did not indicate the year they were born, c: 4 respondents did not indicate the highest education level, d: 10 respondents did not indicate their household income, e: 8 respondents did not provide a valid postcode, f: 9 respondents did not indicate if they were born in Australia, g: analysis contains cell(s) with expected count of <5, Fisher's Exact Test is reported, h: SEIFA disadvantage quintile was not classified for 11 respondents, n=426

By substance use

No significant differences existed between the proportion of respondents who experienced IPV and FV, and the proportion of respondents who were current, binge or hazardous drinkers (see Table 9). A significantly greater proportion of those who experienced other violence indicated they were a current drinker compared with those who reported IPV (Phi=-0.11, p<0.05) and a significantly greater proportion of those who reported other violence were binge drinkers compared with respondents who reported a FV incident (Phi=-0.16, p<0.01). Although a significantly greater proportion of respondents who reported IPV (Phi=0.14, p<0.05) and other violence (Phi=0.15, p<0.05) reported illicit substance use compared with FV, the analyses contained low cell sizes and should therefore be interpreted with caution.

Table 9 Pilot sample substance use according to most recent violent incident type (n=437)

	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Current drinker (yes)[a]	81.1 (133)	90.9 (60)	89.0 (178)	ns	*	ns
Binge drinker (yes)[b]	40.0 (64)	29.2 (19)	47.5 (94)	ns	ns	**
Hazardous drinker (yes)[c]	55.7 (88)	49.2 (31)	59.0 (115)	ns	ns	ns
Illicit substance use (yes)[d]	6.8 (11)	0.0 (0)	9.0 (0)	*[e]	ns	**[e]

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns non-significant.

a: 7 respondents did not indicate their current drinking status

b: 14 respondents did not indicate their binge drinking status

c: AUDIT-C scores could not be calculated for 21 respondents

d: 11 respondents did not indicate if they consumed an illicit substance in the past 3 months respondents did not indicate their household income

e: analysis contains cell(s) with expected count of <5, Fisher's Exact Test is reported

By substance involvement

Alcohol was consumed at less than half (39.5%), and other drugs used at 12.5 percent, of most recent incidents. Alcohol use at the most recent incident was not indicated by seven respondents and drug use at the most recent incident was not indicated by 20 respondents. The proportion of alcohol- or drug- related incidents did not significantly vary among IPV, FV, and 'other violence' incidents. As shown in Table 10, respondents were significantly more likely to use alcohol at IPV (Phi=-0.18, p<0.01) and other violence (Phi=-0.22, p<0.001) incidents compared with FV incidents.

Table 10 Pilot sample substance use at most recent incident (n=437)						
	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Alcohol use at most recent incident[a]						
Any (yes)	39.5 (64)	42.9 (27)	38.6 (78)	ns	ns	ns
Respondent (yes)	13.6 (22)	1.6 (1)	20.3 (41)	**	ns	***
Other person(s) (yes)	32.7 (53)	41.3 (26)	31.2 (63)	ns	ns	ns
Drug use at most recent incident[b]						
Any (yes)	14.1 (22)	16.4 (10)	10.2 (20)	ns	ns	ns
Respondent (yes)	4.5 (7)	0.0 (0)	2.0 (4)	ns	ns[c]	ns[c]
Other person(s) (yes)	10.9 (17)	16.4 (10)	8.1 (16)	ns	ns	ns

** statistically significant at p<0.01. *** statistically significant at p<0.001. ns non-significant.

a: alcohol use at most recent incident was not indicated by 7 respondents

b: drug use at most recent incident was not indicated by 20 respondents

c: contains cell(s) with expected count of <5, Fisher's Exact Test is reported

Police involvement

Of the most recent incidents, 21.8 percent were reported to the police. Four respondents did not indicate if the incident was reported to the police. No significant differences were evident in the proportion of IPV (17.2%), FV (22.4%) and other violence (25.6%) incidents that were reported to the police.

As shown in Table 11, compared with other violence, IPV incidents were more likely to result in a police order being put in place (Phi=-0.33, p<0.01), a referral to support services to be made (Phi=-0.24, p<0.05), and emergency/safe accommodation to be organised (Phi=-0.37, p<0.01). Family violence incidents were also more likely to result in a police order (Phi=-0.42, p<0.01) compared with 'other violence' incidents.

Table 11 Pilot sample police actions according to most recent violent incident type (n=95)						
Police action[a b]	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Someone was arrested	16.0 (4)	21.4 (3)	28.6 (12)	ns[c]	ns	ns[c]
Someone was removed	20.0 (5)	40.0 (6)	16.3 (7)	ns[c]	ns[c]	ns[c]
Someone was detained	9.5 (2)	15.4 (2)	19.0 (8)	ns[c]	ns[c]	ns[c]
Someone was charged	24.0 (6)	28.6 (4)	31.0 (13)	ns[c]	ns	ns[c]
A police order was put in place	44.0 (11)	57.1 (8)	14.6 (6)	ns	**	**[c]
Referral to support services was made	42.3 (11)	35.7 (5)	20.0 (9)	ns	*	ns[c]
Information about violence was provided	36.0 (9)	42.9 (6)	20.0 (9)	ns	ns	ns[c]
Emergency/safe accommodation was organised	19.2 (5)	6.7 (1)	0.0 (0)	ns[c]	**	ns[c]
Attended the scene, but no action was taken	23.1 (6)	28.6 (4)	27.1 (13)	ns[c]	ns	ns[c]
Attended the scene, but perceived that it was something that 'just happened'	23.1 (6)	0.0 (0)	23.9 (11)	ns[c]	ns	ns[c]

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: comparisons exclude respondents who answered 'I don't know' for an action on a pair-wise basis

b: 5 respondents did not indicate the actions taken by the police

c: analysis contains 1 cell with expected count <5, Fisher's Exact Test is reported

Alcohol and drug use at an incident were not significantly associated with police involvement (yes vs no) for IPV, FV, or other violence (ps>0.05). Low cell sizes for the pilot data prevent meaningful interpretation of analyses comparing police actions (e.g., someone was arrested, someone was removed) by drug and alcohol involvement, so refer to the panel data instead.

Mental health

Table 12 presents respondents' severity of depression and anxiety symptom scores for responses to the most recent violent incident type. The pilot survey included two subscales of the DASS—depression and anxiety (Lovibond & Lovibond 1995). Total scale scores were categorised as either within 'normal', 'mild', 'moderate', 'severe', or 'extremely severe' ranges. Given that all comparisons contained some cells with a count of less than five, only the comparisons between other violence and IPV were significant for severity of depression and anxiety. A greater proportion of those who reported other violence were classified within the 'normal' depression range; therefore, those who experienced IPV reported more severe depression symptoms compared with those who experienced other violence.

For anxiety, the difference in proportion classified within the 'normal' range was not as pronounced as it was for depression. Nevertheless, 9.6 percent of those who reported IPV at the most recent incident reported severe or extremely severe levels of anxiety compared with only 2.5 percent of those who reported an 'other violence' incident.

Table 12 Pilot sample depression and anxiety severity classification according to most recent violent incident type (n=437)

DASS scale classification	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Depression[a]				ns[c]	*[c]	ns[c]
Normal	65.2 (101)	79.7 (51)	81.6 (160)			
Mild	12.3 (19)	6.3 (4)	7.1 (14)			
Moderate	8.4 (12)	9.4 (6)	7.1 (14)			
Severe	4.5 (7)	3.1 (2)	1.5 (3)			
Extremely severe	9.7 (15)	1.6 (1)	2.6 (5)			
Anxiety[b]				ns[c]	*[c]	ns[c]
Normal	80.3 (126)	80.0 (52)	86.1 (173)			
Mild	7.6 (12)	9.2 (6)	6.5 (13)			
Moderate	2.5 (4)	4.6 (3)	5.0 (10)			
Severe	3.2 (5)	1.5 (1)	0.0 (0)			
Extremely severe	6.4 (10)	4.6 (3)	2.5 (5)			

* statistically significant at p<0.05.** statistically significant at p<0.01.

a: n=415

b: n=423

c: analysis contains cell(s) with expected count of <5, Fisher's Exact Test is reported

Coercive controlling behaviour

Respondents' and their partner(s') engagement in coercive controlling behaviours (CCBs) was measured via a modified version of the CCS (Johnson, Leone & Xu 2014). In the pilot survey the respondents were asked to 'please rate the extent to which each statement applies to your behaviour towards your current partner and previous partners (if you have had any)' and to 'please rate the extent to which your current partner and previous partners' (if you have had any) behaviour towards you'. This language differs from the panel survey in which respondents were asked to rate their behaviour towards their current or most recent partner (rather than their current and previous partner[s]) and their current or most recent partners (rather than their current and previous partner[s]) behaviour towards them. Using the same cut-off to distinguish low and high CCB defined by Johnson, Leone and Xu (2014), respondents' and partners' CCBs were categorised as either 'no', 'low' or 'high' CCB (see Table 13). No significant differences existed in the proportion of male and female respondents classified as engaging in no, low and high CCB (ps >0.05).

Table 13 Pilot sample respondent and partners(s) coercive controlling behaviour (n=923)

Coercive controlling behaviour	Respondent % (n)[a]	Partner(s) % (n)[a]
No	23.2 (194)	26.6 (221)
High	66.8 (560)	49.9 (415)
Low	10.0 (84)	23.6 (196)

a: scale scores were only calculated for respondents with full data on all 9 items of the CCS, n=838 for the respondent and n=832 for their current and previous partners

Table 14 compares incident type according to level of CCB engagement. Respondents who reported either family or other violence were significantly more likely to engage in 'no' CCBs compared with those who reported an IPV incident, while respondents who reported IPV were significantly more likely to engage in a high level of CCBs compared with those who reported other violence incident/s. Compared with FV and 'other violence' incidents, a significantly smaller proportion of respondents who reported an IPV incident also reported that their partner(s) engaged in either no or a low level of CCBs, and a significantly greater proportion reported that their partners engaged in a high level of CCBs.

Table 14 Pilot sample respondent and partner(s) engagement in coercive controlling behaviours according to most recent incident type (n=437)

Coercive controlling behaviour	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Respondent[a]						
No	6.6 (10)	18.3 (11)	16.8 (31)	**	**	ns
Low	74.3 (113)	66.7 (40)	72.8 (134)	ns	ns	ns
High	19.1 (29)	15.0 (9)	10.3 (19)	ns	*	ns
Partner(s)[a]						
No	5.4 (8)	23.3 (14)	18.7 (34)	***	***	ns
Low	25.7 (38)	53.3 (32)	61.0 (111)	***	***	ns
High	68.9 (102)	23.3 (14)	20.3 (37)	***	***	ns

* statistically significant at p<0.05.** statistically significant at p<0.01. *** statistically significant at p<0.001

a: scale scores were only calculated for respondents with full data on all 9 items of the CCS, n=396 for the respondent and n=390 for their current and previous partners

By substance use

As shown in Table 15, a similar proportion of respondents who engaged in either no or a high level of CCBs, were current drinkers. A significantly greater proportion of respondents who engaged in a low level of CCBs were current drinkers compared with those who engaged in either no or a high level of CCB. Respondents who engaged in either no or a low level of CCB were significantly less likely to report binge drinking in the past 12 months compared with those who engaged in a high level of coercive controlling behaviours.

The proportion of respondents who had used an illicit substance in the past three months was significantly greater among those who engaged in no versus a high level of CCB, but not a low level of that behaviour.

Table 15 Pilot sample respondent coercive controlling behaviour by substance use (n=923)

	No CCB % (n)	Low CCB % (n)	High CCB % (n)	No vs low CCB	Low vs high CCB	No vs high CCB
Respondent drinking behaviour[a]						
Current drinker (yes)	80.6 (154)	87.9 (487)	78.6 (66)	*	*	ns
Binge drinker (yes)	27.4 (52)	35.8 (195)	47.0 (39)	*	*	**
Hazardous drinker (yes)	48.4 (90)	52.7 (281)	56.3 (45)	ns	ns	ns
Illicit substance use (yes)	1.1 (2)	4.0 (22)	6.0 (5)	nsb	ns	*

* statistically significant at p<0.05.** statistically significant at p<0.01.

a: n=892 for current drinker, n=818 for binge drinker, n=799 for hazardous drinker, n=823 for illicit substance use

b: p=0.52

Mental health

Table 16 presents respondents' severity of depression and anxiety symptom scores according to partners' level of CCB engagement. All comparisons were statistically significant. The proportion of respondents within the 'normal' depression and anxiety range decreased from experience of no through high CCB. Generally, an increase in experience of CCB was associated with a greater severity of depression and anxiety symptoms.

Table 16 Pilot sample depression and anxiety severity according to partners' level of CCB engagement (n=923)

DASS scale classification	No CCB % (n)	Low CCB % (n)	High CCB % (n)	No vs low CCB	Low vs high CCB	No vs high CCB
Depression[a]				*c	***c	***c
Normal	93.8 (196)	84.4 (340)	68.6 (129)			
Mild	2.4 (5)	6.2 (25)	10.6 (20)			
Moderate	2.4 (5)	6.5 (26)	9.0 (17)			
Severe	0.0 (0)	0.7 (3)	4.3 (8)			
Extremely severe	1.4 (3)	1.7 (7)	7.4 (14)			
Anxiety[b]				*c	***c	***c
Normal	94.8 (201)	89.1 (360)	79.3 (153)			
Mild	2.8 (6)	5.4 (22)	6.2 (12)			
Moderate	0.0 (0)	3.2 (13)	6.2 (12)			
Severe	0.5 (1)	0.7 (3)	3.6 (7)			
Extremely severe	1.9 (4)	1.5 (6)	4.7 (9)			

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: n=801

b: n=815

c: contains cell(s) with expected count of <5, Fisher's Exact Test is reported

Panel survey results

This study received 5,155 completed surveys. Thirty-seven contained unreliable responses and were removed from the dataset. The final panel sample comprised 5,118 respondents.

Demographics

Age and sex

The panel sample included 2,450 males (47.9%), 2,652 (51.8%) females, and 16 (0.3%) transgender respondents. These respondents were excluded from all subsequent analyses regarding gender due to insufficient numbers. Respondents were aged 18 to 89 years (M=48, SD =18.95). As shown in Table 17, about twice as many females as males were in the youngest age group, and nearly twice as many males as females in the oldest group.

Table 17 Proportion of total sample and males and females in five age groups (n=5,118)

Age group (years)	Total % (n)	Males % (n)	Females % (n)
18–25[a]	22.1 (1130)	15.4 (378)	28.4 (753)
26–35	10.6 (542)	8.7 (212)	12.4 (330)
36–50	17.1 (872)	16.2 (397)	17.9 (475)
51–65	28.3 (1445)	31.1 (761)	25.8 (684)
66+	21.8 (1113)	28.7 (702)	15.5 (411)

a: respondents aged 18–25 years were oversampled to represent a minimum 20% of the sample

Ethnicity

Twenty-five percent of the sample was born outside Australia. Eighty-four respondents (1.6%) were Aboriginal or Torres Strait Islander. The proportion of Indigenous Australians in the sample was lower than the estimated proportion within the Australian population (around 2.5–3.0%). The structure of the Indigenous population in Australia is young, with about 35 percent aged between zero and 14 years—compared with 19 percent in the total population (Australian Bureau of Statistics 2014). As the study excluded those younger than18 years of age it is expected that a lower proportion of Indigenous respondents were sampled than is represented in the total Australian population. The number of Indigenous Australian respondents surveyed is too few to be reliably analysed. Researchers are sensitive to the fact that domestic and family violence among the Indigenous population is qualitatively different from that experienced in the general population. Family and domestic violence among Indigenous Australians is the target of specific policy interventions tailored to the unique risk factors experienced by this population. Researchers recognise that domestic and family violence among Indigenous Australians is an important issue worth exploring; however, this is beyond the key aims and scope of this report.

Socioeconomic indicators

Researchers collected information on education, gross annual household income and current employment status to provide a snapshot of respondent socioeconomic status (Table 18). The area level of relative socioeconomic disadvantage was calculated from respondent postcode.

As shown in Table 18, most (61.1%) of the sample held post-secondary qualifications. The mode household income of the sample was $50,001 to $100,000. A quarter of the sample (25.8%) was employed full-time, but the mode employment status was 'Not in the labour force' (29.6%) which corresponds with the proportion of the sample at retirement age. About equal proportions of the sample were classified into each SEIFA socioeconomic disadvantage quintile.

Table 18 Panel sample socioeconomic indicators (n=5,118)

SES Indicator	n	%
Highest level of education		
Year 11 or below	939	18.3
Year 12 or equivalent	1,053	20.6
Vocational qualification	1,269	24.8
Tertiary qualification	1,857	36.3
Gross annual household income[a]		
$25,000 or less	741	14.5
$25,001–$50,000	1,395	27.3
$50,001–$100,000	1,543	30.1
$101,000 or above	903	17.6
Employment status[b]		
Casual	467	9.1
Part-time	750	14.7
Full-time	1,320	25.8
Home duties	496	9.7
Unemployed	471	9.2
Not in the labour force (eg retired)	1,516	29.6
SEIFA disadvantage quintile[c]		
1 (most disadvantage)	1,072	21.0
2	1,044	20.5
3	1,000	19.6
4	1,043	20.5
5 (least disadvantage)	940	18.4

a: 526 respondents declined to provide their household income

b: 87 respondents declined to provide their employment status and 11 answered they 'don't know' their employment status

c: SEIFA disadvantage index could not be calculated for 178 respondents due to 159 respondents not providing their postcode and postcodes of 19 respondents could not be classified into SEIFA disadvantage quintiles

Residential location

The proportion of respondents from each Australian state and territory compared with ABS (2014) population estimates is shown in Table 19. The proportion of respondents from each jurisdiction corresponds similarly to ABS population estimates.

Table 19 Proportion of panel sample within each jurisdiction compared with ABS 2014 population estimates (n=5,118)

State/territory[a]	n	%	% ABS population estimate[b]
Western Australia	448	8.8	10.95
New South Wales	1320	25.8	32.00
Tasmania	234	4.6	2.19
Victoria	1181	23.1	24.87
Northern Territory	63	1.3	1.04
South Australia	533	10.5	7.18
Australian Capital Territory	64	1.3	1.64
Queensland	1097	21.5	20.10

a: 159 respondents declined to provide their postcode and 19 respondents provided an invalid postcode

b: ABS population estimates based on 2014 figure (Australian Bureau of Statistics 2014)

Table 20 shows the proportion of respondents within ASGS regions. Most of the sample (75.0%) lived in a metropolitan location. Researchers oversampled respondents who resided in regional locations, approximately doubling the proportion within the Australian population (10%) to comprise at least 20 percent of the total sample. They classified 'major city' and 'inner regional' regions as 'metro' and 'outer regional', 'remote', and 'very remote' as 'regional'.

Table 20 Proportion of panel sample within ASGS regions (n=5,118)

ASGS classification[a]	% (n)[a]	2006 ABS census population estimates %[b]
Metropolitan		
Major city	58.6 (3000)	68.4
Inner regional	17.4 (893)	19.7
Regional		
Outer regional	16.6 (851)	9.5
Remote	2.9 (146)	1.5
Very remote	1.0 (50)	0.8

a: 159 respondents declined to provide their postcode and 19 respondents provided an invalid postcode

b: see http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4102.0Chapter3002008

Note: ASGS=Australian Statistical Geography Standard

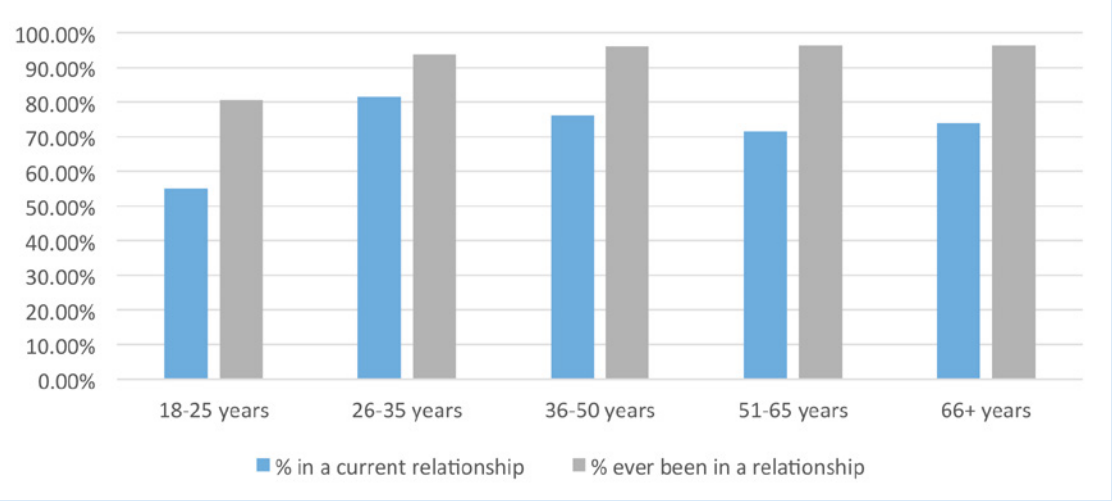
Marital status and household composition

Most respondents (70.2%) were in a current relationship. At the time of the survey a small proportion (7.5%) of the sample had never been in a relationship.

Respondents aged 18 to 25 years (55.0%) were least likely and those aged 26 to 35 years (81.4%) were most likely to be in a current relationship (see Figure 2). For 5.5 percent of respondents their current or most recent relationship was with a partner of the same sex.

The mode household composition was 'couple only' (25.6%), followed by 'couple with dependent children' (18.2%), 'couple with non-dependent children' (18.6%), and 'lone person household' (17.4%). The remaining 20.2 percent of the sample comprised those living as a couple with dependent children and other individuals, multiple family households, one-parent families, and in shared accommodation.

Figure 2 Age group by relationship status (n=5,118)



Experience of violence

This section presents findings related to respondents' lifetime and past 12-month experiences of violence.

Lifetime violence

Just less than half (44.5%; 2,278) of the sample reported that they had experienced violence in their lifetime. Sample characteristics according to lifetime experience of violence are shown in Table 21.

Table 21 Sample characteristics according to lifetime experience of violence

	Experienced lifetime violence		
	Yes % (n)	No % (n)	Statistic
M age (SD)	47.54 (17.75)	47.81 (19.87)	*U*=3170895.00
Age group (years)[b]			
18–25	39.2 (447)	60.8 (694)	$X^2_{(1,5118)}$ =16.91***
26–35	45.0 (245)	55.0 (299)	$X^2_{(1,5118)}$ =0.07
35–50	51.0 (446)	49.0 (428)	$X^2_{(1,5118)}$ =18.14***
51–65	51.3 (742)	48.7 (704)	$X^2_{(1,5118)}$ =37.78***
66+	35.8 (398)	64.2 (715)	$X^2_{(1,5118)}$ =44.01***
Male[a]	43.5 (1066)	56.5 (1384)	$X^2_{(1,5102)}$ =1.70
Female	45.3 (1202)	51.2 (1450)	
Born in Australia	45.8 (1753)	54.2 (2071)	$X^2_{(1,5118)}$ =10.87***
Born outside of Australia	40.6 (525)	59.4 (769)	
Aboriginal/Torres Strait	71.4 (60)	28.6 (24)	$X^2_{(1,5118)}$ =25.05***

Table 21 Sample characteristics according to lifetime experience of violence

	Experienced lifetime violence		
	Yes % (n)	No % (n)	Statistic
Highest level of education[b]			
Year 11 or below	43.9 (412)	56.1 (527)	$X^2_{(1,5118)}=0.19$
Year 12 or equivalent	38.2 (402)	61.8 (651)	$X^2_{(1,5118)}=21.53$***
Vocational qualification	51.1 (649)	48.9 (620)	$X^2_{(1,5118)}=30.06$***
Tertiary qualification	43.9 (815)	56.1 (1042)	$X^2_{(1,5118)}=0.46$
Gross annual household income			**$X^2_{(3,4582)}=1.32$**
$25,000 or less	46.3 (343)	398 (741)	
$25,001–$50,000	46.6 (650)	53.4 (745)	
$50,001–$100,000	44.8 (691)	55.2 (852)	
$101,000 or above	44.9 (405)	55.1 (498)	
Relationship status[b]			
In a current relationship (yes)	44.4 (1593)	55.6 (1998)	$X^2_{(1,5118)}=0.11$
Ever been in a relationship	45.9 (2174)	54.1 (2561)	$X^2_{(1,5118)}=50.49$***
Never been in a relationship	27.2 (104)	72.8 (279)	
Residential location[b]			
Western Australia	49.8 (225)	50.2 (223)	$X^2_{(1,4940)}=4.24$*
New South Wales	43.1 (569)	56.9 (751)	$X^2_{(1,4940)}=3.07$
Tasmania	50.4 (118)	49.6 (116)	$X^2_{(1,4940)}=2.75$
Victoria	42.5 (502)	57.5 (679)	$X^2_{(1,4940)}=4.42$*
Northern Territory	54.0 (34)	46.0 (29)	$X^2_{(1,4940)}=2.00$
South Australia	45.0 (240)	55.0 (293)	$X^2_{(1,4940)}=0.00$
Australian Capital Territory	45.3 (29)	54.7 (35)	$X^2_{(1,4940)}=0.00$
Queensland	47.0 (516)	53.0 (581)	$X^2_{(1,4940)}=2.00$
Geographical location[c]			**$X^2_{(1,4940)}=15.99$*** **
Metropolitan	43.7 (1701)	56.3 (2192)	
Regional	50.6 (530)	49.4 (517)	
SEIFA disadvantage quintile[c]			
1 (most disadvantage)	45.4 (487)	54.6 (585)	$X^2_{(1,5099)}=0.40$
2	48.9 (510)	51.1 (534)	$X^2_{(1,5099)}=9.70$**
3	43.2 (232)	56.8 (568)	$X^2_{(1,5099)}=0.95$
4	45.9 (479)	54.1 (564)	$X^2_{(1,5099)}=0.96$
5 (least disadvantage)	38.8 (365)	61.2 (575)	$X^2_{(1,5099)}=15.41$***

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: respondents who identified as transgender (n=14) or other (n=3) were excluded

b: analyses used dummy coded variables (0=no; 1=yes)

c: 159 respondents declined to provide their postcode and 19 respondents provided an invalid postcode

Mean age did not significantly differ between those who reported lifetime experience of violence compared with those who did not. Comparing the five age groups revealed that a smaller proportion than expected of those in the youngest (18–25 years) and oldest (66+) age groups reported lifetime violence, with 39.2 percent and 35.8 percent within these age groups respectively, compared with 44.5 percent of the total sample. No difference was evident in the proportion of males and females who experienced lifetime violence. Additional analyses revealed that for the 36 to 50 year age group only, a significantly greater proportion of females reported lifetime violence compared with males (55.2% vs 45.8%, OR=1.45; 95%CI=1.11–1.90; p<0.01). This interaction is displayed in Figure 3.

Respondents in a current relationship were not significantly more likely to experience lifetime violence. However, a significantly greater proportion of respondents who had ever been in a relationship reported lifetime violence compared with respondents who had never been in a relationship (45.9% vs 27.2%).

A significantly greater proportion of respondents from regional locations reported lifetime violence compared with those from metropolitan locations (50.6% vs 43.7%), and this was similar for both males and females. Comparing age groups revealed that the effect of residential location was significant only among the 25 to 35, and 36 to 50 year age groups, with those living in regional locations within each age group 1.80 times (OR=1.80; 98%CI=1.15–2.81) and 1.61 times (OR=1.61; 98%CI=1.17–2.22) more likely to report lifetime violence, respectively (p<0.01)—see Figure 4.

A significantly greater proportion of respondents lived in areas of relative disadvantage (2nd SEIFA quintile) and a significantly smaller proportion of those in areas of least disadvantage (5th SIEFA quintile) reported lifetime violence.

Figure 3 Percentage of males and females in five age groups who reported lifetime violence (n=2,278)

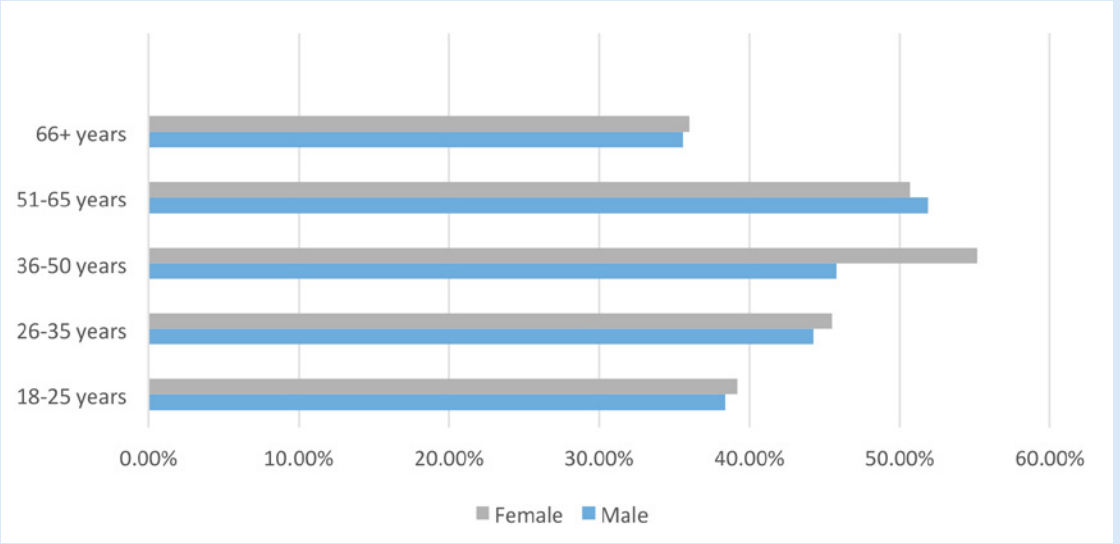
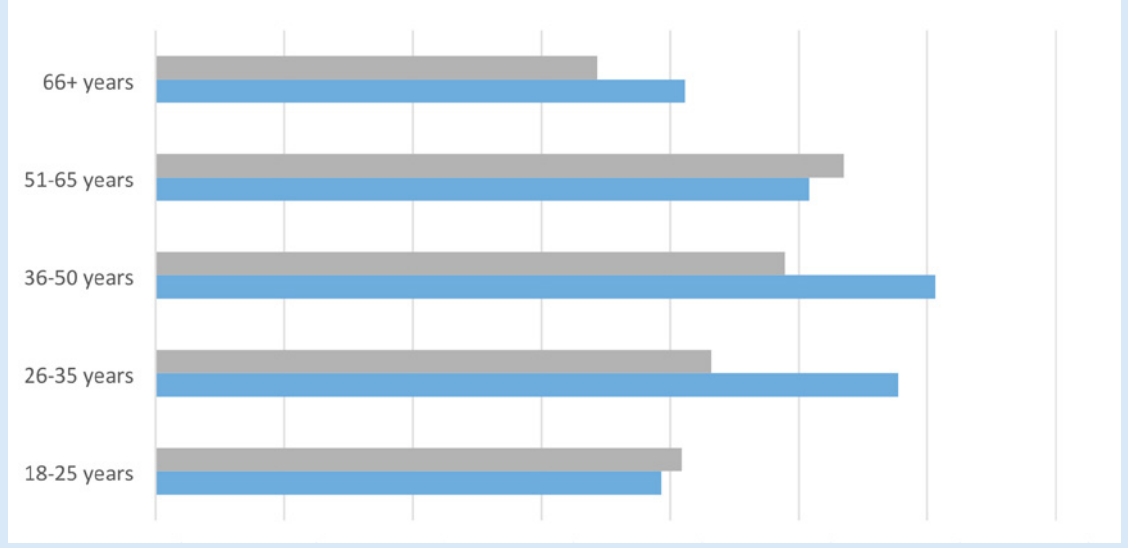


Figure 4 Percentage of respondents residing in metropolitan and regional geographical locations who reported lifetime violence (n=2,278)



Recent violence

Of respondents who reported lifetime violence, 13.5 percent (n=307, or 6.0% of the total sample) reported that they had experienced violence in the past 12 months (recent violence).

The mean age of respondents who reported recent violence (M=36 years; SD=16.71 years) was 12 years younger than respondents who did not, $p<0.001$. Figure 5 shows a decrease in the proportion of respondents who reported recent violence across age groups. Respondents aged 18 to 25 years comprised 42.0 percent of the group that reported recent violence, yet represented only 22.3 percent of the total sample.

Females were more likely to report recent violence compared with males (6.9% vs 4.9%, respectively; OR=1.43; 95%CI=1.13–1.82; $p<0.01$). However, the trend of a decrease in the likelihood of reporting violence with increasing age was similar for males and females (see Figure 5). As shown in Table 22, there were few statistically significant differences in demographic characteristics between respondents who reported recent violence, and those who did not.

Figure 5 Percentage of males and females in five age groups who reported recent violence in the past 12 months (n=307)

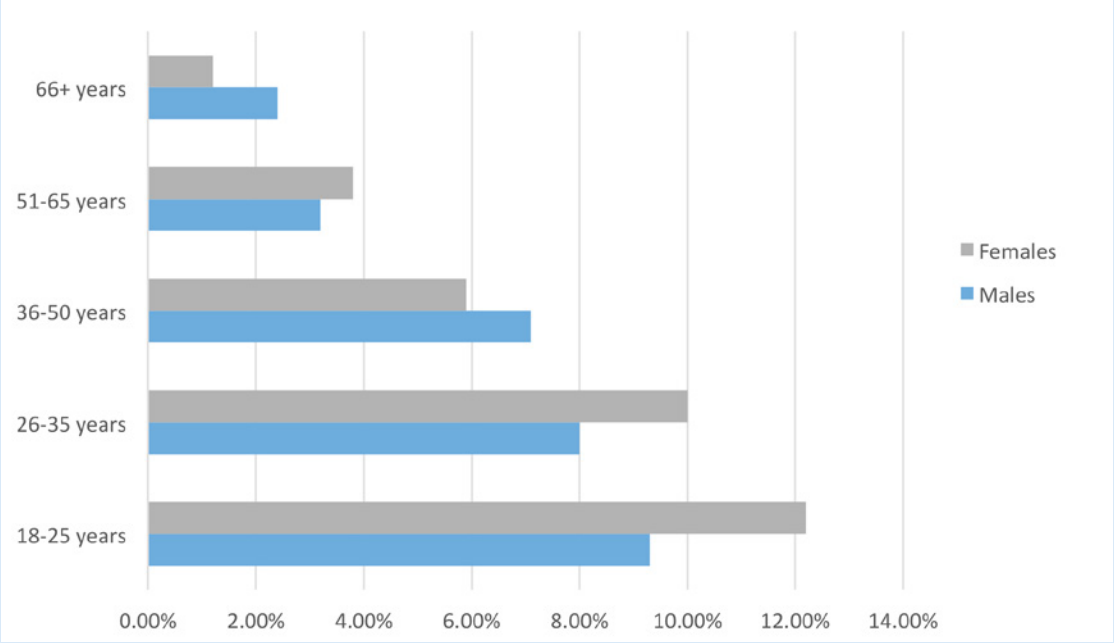


Table 22 Sample characteristics according to recent experience of violence (n=5,118)

	Recent violence experience		
	Yes % (n)	No % (n)	Statistic
M age (SD)	36.35 (16.71)	48.41 (18.86)	U=469812.00***
Age group (years)[b]			
18–25	11.3 (129)	88.7 (1,012)	$X^2(1,5118)$ =75.35***
26–35	9.2 (50)	90.8 (494)	$X^2(1,5118)$ =11.04***
35–50	6.4 (56)	93.6 (818)	$X^2(1,5118)$ =0.31
51–65	3.5 (50)	96.5 (1,396)	$X^2(1,5118)$ =23.07***
66+	2.0 (22)	98.0 (1,091)	$X^2(1,5118)$ =40.80***
Sex[a]			**$X^2(1,5102)$ =9.06****
Male	4.9 (121)	95.1 (2,329)	
Female	6.9 (184)	93.1 (2,468)	
Born in Australia	6.5 (250)	93.5 (3,574)	$X^2(1,5118)$ =7.80**
Born outside Australia	4.4 (57)	95.6 (1,237)	
Aboriginal/Torres Strait	6.0 (5)	94.0 (79)	$X^2(1,5118)$ =0.00
Highest level of education[b]			
Year 11 or below	4.2 (39)	95.8 (900)	$X^2(1,5118)$ =6.94**
Year 12 or equivalent	7.1 (75)	92.9 (978)	$X^2(1,5118)$ =0.07
Vocational qualification	6.1 (79)	93.9 (1,191)	$X^2(1,5118)$ =0.07
Tertiary qualification	6.2 (117)	93.8 (1,742)	$X^2(1,5118)$ =0.20

Table 22 Sample characteristics according to recent experience of violence (n=5,118)			
	Recent violence experience		
	Yes % (n)	No % (n)	Statistic
Gross annual household income			**$X^2(3,4582) = 5.80$**
$25,000 or less	5.0 (37)	95.0 (704)	
$25,001–$50,000	5.4 (75)	94.6 (1,320)	
$50,001–$100,000	6.4 (98)	93.6 (1,445)	
$101,000 or above	7.4 (67)	92.6 (836)	
Relationship status[b]			
In a current relationship (yes)	6.0 (215)	94.0 (3,376)	$X^2(1,5118) = 0.03$
Ever been in a relationship	6.1 (288)	93.9 (4,447)	$X^2(1,5118) = 0.79$
Never been in a relationship	5.0 (19)	95.0 (364)	
Residential location[b c]			
Western Australia	8.5 (38)	91.5 (410)	$X^2(1,4940) = 5.53$*
New South Wales	6.3 (83)	93.7 (1,237)	$X^2(1,4940) = 0.32$
Tasmania	2.1 (5)	97.9 (229)	$X^2(1,4940) = 6.43$*
Victoria	5.8 (69)	94.2 (1,112)	$X^2(1,4940) = 0.05$
Northern Territory	6.3 (4)	93.7 (59)	$X^2(1,4940) = 0.02$
South Australia	4.3 (23)	95.7 (510)	$X^2(1,4940) = 2.92$
Australian Capital Territory	6.3 (4)	93.8 (60)	$X^2(1,4940) = 0.01$
Queensland	6.3 (69)	93.7 (1,028)	$X^2(1,4940) = 0.25$
Geographical location[c]			**$X^2(1,4940) = 0.01$**
Metropolitan	6.0 (233)	94.0 (3,660)	
Regional	5.9 (62)	94.1 (985)	
SEIFA disadvantage quintile			
1 (most disadvantage)	4.5 (48)	95.5 (1,024)	$X^2(1,5099) = 5.85$*
2	6.8 (71)	93.2 (973)	$X^2(1,5099) = 1.49$
3	6.8 (68)	93.2 (932)	$X^2(1,5099) = 1.41$
4	6.4 (67)	93.6 (976)	$X^2(1,5099) = 0.41$
5 (least disadvantage)	5.5 (52)	94.5 (888)	$X^2(1,5099) = 0.45$

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: participants identifying as transgender (n=14) and other (n=3) were excluded from this analysis

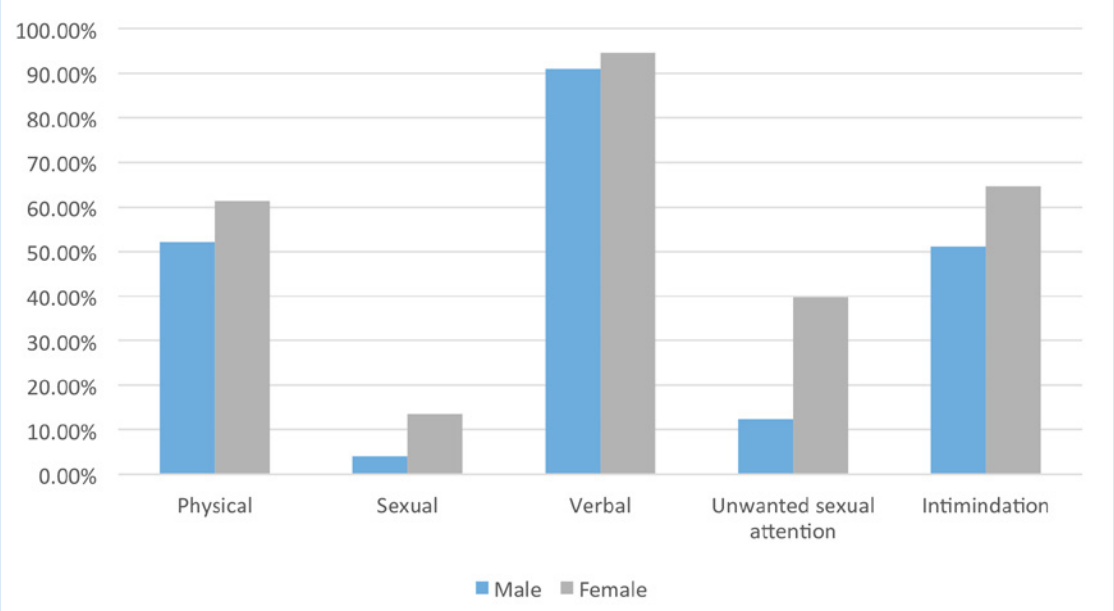
b: analyses used dummy coded variables (0=no; 1=yes)

c: 159 respondents declined to provide their postcode and 19 respondents provided an invalid postcode

Recent violence type

Most respondents who experienced recent violence (93.2%) reported at least one incidence of verbal aggression in the past 12 months, corresponding to 5.6 percent of the entire sample. Physical aggression (57.3%) and intimidation (59.3%) were reported by more than half of those who reported recent violence. As shown in Figure 6, among those reporting recent violence, a significantly greater proportion of women reported recently experiencing sexual violence (13.6% vs 4.1%, OR=3.65, 95%CI=1.36–9.81; p<0.01), unwanted sexual attention (39.7% vs 12.4%, OR=4.65, 95%CI=2.51–8.61, p<0.001), and intimidation (64.7% vs 51.2%, OR=1.74, 95%CI=1.09–2.78, p<0.05), compared with men.

Figure 6 Violence types experienced by males and females who reported recent violence (n=307)



As shown in Table 23 below, regardless of violence type, recent experiences of violence most frequently occurred at the respondent's home. Sexual violence incidents frequently occurred at the perpetrator's home, while physical violence, verbal aggression and intimidation often occurred outdoors.

Table 23 Characteristics of recent violence experiences according to violence type (n=307)

	Physical (n=176)	Sexual (n=31)	Verbal (n=286)	Unwanted sexual attention[b] (n=89)	Intimidation[b] (n=182)
% sample[a]	57.3 (3.4)	10.1 (0.6)	93.2 (5.6)	29.0 (1.7)	59.3 (3.6)
% males (n)	52.1 (63)	4.1 (5)	90.9 (110)	12.4 (15)	51.2 (62)
% female (n)	61.4 (113)	13.6 (25)	94.6 (174)	39.7 (73)	65.7 (119)
Location % (n)					
At my home	64.2 (113)	48.4 (15)	59.4 (170)	17.7 (32)	44.9 (40)
At perpetrator's home	12.5 (22)	32.3 (10)	11.0 (34)	5.5. (10)	16.9 (15)
At another person's home	9.7 (17)	16.1 (5)	15.7 (45)	7.7 (14)	18.0 (16)
Outdoors	23.3 (41)	16.1 (5)	29.0 (83)	17.1 (31)	28.1 (25)
At my workplace	11.4 (20)	6.5 (2)	18.9 (54)	10.5 (19)	27.0 (24)
Inside a licensed premises	7.4 (13)	6.5 (2)	12.2 (35)	17.1 (31)	18.0 (16)
Outside a licensed premises	8.5 (15)	3.2 (1)	9.1 (26)	9.4 (17)	7.9 (7)
In a private vehicle	11.9 (21)	6.5 (2)	21.3 (61)	3.3 (6)	18.0 (16)
On public transport	5.1 (9)	9.7 (3)	7.7 (22)	14.4 (26)	13.5 (12)
At a sporting venue	4.0 (7)	0 (0)	4.2 (12)	1.7 (3)	3.4 (3)
Other	3.4 (6)	3.2 (1)	4.9 (14)	40.3 (73)	7.9 (7)

a: proportion of sample who reported past 12-month experience of violence (proportion of the total sample)

b: the high n of respondents indicating 'other' as location for unwanted sexual attention, and low n for location of intimidation are due to a survey coding error; therefore, percentages are only indicative of trends rather than representing an actuality of this sample

Usual substance use

This section presents findings related to usual (past 12 month) alcohol and illicit drug use.

Respondent alcohol use

Forty-three percent (n=2,200) of the sample were classified as hazardous drinkers according to the AUDIT-C criteria. Males were significantly more likely to drink at hazardous levels; 46.3 percent of males compared with 40.1 percent of females were classified as hazardous drinkers, p<0.001. Less than half the sample (37.7%) engaged in heavy episodic drinking in the past 12 months.

Tables 24 and 25 show that hazardous alcohol consumption was significantly associated with recent, but not lifetime, violence. However, there was a gender interaction effect where a significantly greater proportion of male hazardous drinkers also reported lifetime violence compared with males who did not drink at hazardous levels (46.4% vs 41.0%, Phi=0.5, p<0.01). Among females, hazardous drinking and HED were not significantly associated with lifetime violence, but were associated with a significantly greater likelihood of recent violence (Phi=0.05, p<0.05; Phi=0.06, p<0.001, respectively).

Table 24 Respondent patterns of usual alcohol use according to experience of lifetime violence (n=5,118)

	Lifetime violence experience		
	Yes	No	Chi square
Full sample			
Hazardous alcohol use			
Yes	45.7 (1,006)	54.3 (1,194)	2.32
No	43.6 (1,272)	56.4 (1,646)	
HED			
Yes	46.8 (905)	53.2 (1,027)	6.84**
No	43.1 (1,373)	56.9 (1,813)	
Males			
Hazardous alcohol use			
Yes	46.4 (526)	53.6 (608)	7.10**
No	41.0 (540)	59.0 (774)	
HED			
Yes	48.2 (525)	51.8 (565)	17.10***
No	39.8 (541)	60.2 (819)	
Females			
Hazardous alcohol use			
Yes	44.9 (477)	55.1 (586)	0.15
No	45.6 (725)	54.4 (864)	
HED			
Yes	44.9 (375)	55.1 (461)	0.11
No	45.5 (827)	54.5 (989)	

** statistically significant at p<0.01. *** statistically significant at p<0.001

Note: HED=Heavy episodic drinking (consumption of 6 or more drinks on one occasion at least once in the past 12 months)

Table 25 Respondent patterns of usual alcohol use according to experience of recent violence (n=5,118)			
	Recent violence experience		
	Yes	No	Chi square
Full sample			
Hazardous alcohol use			
Yes	6.9 (151)	93.1 (2,049)	5.12*
No	5.3 (156)	94.7 (2,762)	
HED			
Yes	7.5 (145)	92.5 (1,787)	12.40***
No	5.1 (162)	94.9 (3,024)	
Males			
Hazardous alcohol use			
Yes	5.4 (61)	94.6 (1,073)	0.87
No	4.6 (60)	95.4 (1,256)	
HED			
Yes	6.1 (66)	93.9 (1,024)	5.21*
No	4.0 (55)	96.0 (1,305)	
Females			
Hazardous alcohol use			
Yes	8.4 (89)	91.6 (974)	5.65*
No	6.0 (95)	94.0 (1,494)	
HED			
Yes	7.5 (144)	92.5 (1,782)	10.82***
No	5.1 (161)	94.9 (3,015)	

* statistically significant at p<0.05. *** statistically significant at p<0.001

Note: HED=Heavy episodic drinking (consumption of 6 or more drinks on one occasion at least once in the past 12 months)

Illict drug use

Of the total sample, 5.6 percent (n=286) reported that they had used an illicit substance in the past 12 months. Illicit drug use was significantly associated with both lifetime (Table 26) and recent (Table 27) violence. Specifically, 8.5 percent of respondents who reported lifetime violence and 17.6 percent of those who reported recent violence had used illicit drugs. This corresponds to 67.8 percent and 18.9 percent of respondents who reported illicit drug use, reporting lifetime and recent violence, respectively. Illicit drug use accounted for 11 percent (Phi=-0.11, p<0.001) of the variance in lifetime violence and 13 percent (Phi=-0.13, p<0.001) in recent violence.

Gender

The effect of illicit drug use on experience of violence was stronger for females than males, especially in relation to recent violence. Illicit drug use accounted for 12 percent (Phi=-0.12, p<0.001) and 17 percent (Phi=-0.17, p<0.001) of the variance in females' experiences of lifetime and recent violence, respectively, and 10 percent (Phi=-0.10, p<0.001) and seven percent (Phi=-0.07) of the variance in males' experiences of lifetime and recent violence, respectively.

Severity of drug dependence

Illicit drug users' severity of drug dependency was not significantly different for those that did (*M*=6.57, *SD*=9.72) and did not (*M*=7.84, SD=11.34) experience recent violence. Illicit drug users who experienced lifetime violence reported a significantly higher mean level of drug dependency (*M*=8.51, SD=11.96) compared with users who did not experience lifetime violence (*M*=5.71, *SD*=8.56, p<0.05).

A significantly smaller proportion of drug users who reported recent violence were classified as having a high level of drug dependency (15.9%) compared with users who did not experience recent violence (5.6%). A two-step cluster analysis was used to classify illicit substance users as having a low or high level of drug dependency symptoms. Respondents with SDS total scores one to 18 were classified as 'low' and respondents with total scores 19 to 47 were classified as 'high'. Chi-square analyses were conducted to determine if lifetime or past 12 month violence experiences varied by SDS classification and sex. This finding was only marginally significant (p=0.47) and opposite trends were evident relating to lifetime violence (see Table 26).

For both males and females, no significant differences were evident in the proportion of drug users who reported either lifetime or recent violence, classified with a low versus high level of drug dependency (ps >0.05). Although any illicit drug use was associated with an increased likelihood of reporting lifetime violence, the relationship between severity of dependency and experience of violence is less clear.

Table 26 Respondent illicit drug use according to experience of lifetime violence (n=5,118)

	Lifetime violence experience		Chi square statistic
	Yes % (n)	No % (n)	
Full sample			
Illicit substance use past 12 months—yes	8.5 (194)	3.2 (92)	66.71***
Dependency classification[a]			
Low	84.0 (163)	90.2 (83)	2.00
High	16.0 (31)	9.8 (9)	
Males			
Illicit substance use past 12 months—yes	7.0 (75)	2.8 (39)	24.14***
Dependency classification[a]			
Low	80.0 (60)	84.6 (33)	0.36
High	20.0 (15)	15.4 (6)	
Females			
Illicit substance use past 12 months—yes	9.6 (115)	3.7 (63)	38.72***
Dependency classification[a]			
Low	87.0 (100)	94.3 (50)	2.07
High	13.0 (15)	5.7 (3)	

*** statistically significant at p<0.001

a: based on Severity of Dependency Scale (SDS)

Table 27 Respondent illicit drug use according to experience of recent violence (n=5,118)			
	Recent violence		Chi square statistic
	Yes % (n)	No % (n)	
Full sample			
Illicit substance use past 12 months—yes	17.6 (54)	4.8 (232)	89.16***
Dependency classification[a]			
Low	94.4 (51)	84.1 (195)	3.93*
High	5.6 (3)	15.9 (37)	
Males (n=114)			
Illicit substance use past 12 months—yes	11.6 (14)	4.3 (100)	13.73***
Dependency classification[a]			
Low	92.9 (13)	80.0 (80)	1.25b
High	7.1 (1)	20.0 (20)	
Females (n=168)			
Illicit substance use past 12 months—yes	21.2 (39)	5.2 (129)	73.59***
Dependency classification[a]			
Low	94.9 (37)	87.6 (113)	1.65b
High	5.1 (2)	12.4 (16)	

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: based on Severity of Dependency Scale

b: analyses include cells with expected count <05, Fisher's Exact Test is reported

Drug of choice

Of the 286 respondents who reported illicit drug use, 241 nominated a 'drug of choice'. Open-ended responses were coded as either 'marijuana or other depressants' or 'methamphetamines, MDMA and other stimulants'. Drug users' nominated drug of choice had no association with any experience of violence.

Alcohol and drug involvement in general experiences of violence

Current drinkers (respondents who reported alcohol consumption in the past 12 months) were more likely than non-drinkers to indicate that alcohol was involved in their experiences of violence (Phi=0.13, p<0.001). A greater proportion of non-drinkers (8.7%) believed that alcohol contributed to the violence they had experienced on a daily or almost daily basis compared with current drinkers (3.6%). This indicates that others' alcohol use had an impact on the violence experienced by non-drinkers.

Respondents who did not use illicit drugs were more likely to believe that drugs were involved in the violence they experienced, compared with those who used illicit drugs (Phi=0.19, p<0.001).

Mental health and experience of violence

The following outlines this study's results relating to the impact of violence on mental health and feelings of safety.

Mental health

Lifetime and recent violence were associated with significantly higher mean depression, anxiety and stress scores (see Table 28 below).

Table 28 Mean depression, anxiety and stress score according to experience of lifetime and recent violence (n=5,118)

	Lifetime violence			Recent violence		
DASS[a] scale	Yes M(SD)	No M(SD)	Mann-Whitney U Test	Yes M(SD)	No M(SD)	Mann-Whitney U Test
Depression[b]	4.46 (5.24)	2.32 (3.75)	15.59***	6.76 (5.98)	3.00 (0.06)	10.81***
Anxiety[b]	2.83 (4.20)	1.53 (2.96)	12.47***	4.87 (5.16)	1.93 (3.43)	9.82***
Stress[b]	4.25 (4.58)	2.35 (3.40)	16.49***	6.58 (5.31)	2.98 (3.89)	11.65***

*** statistically significant at p<0.001

a: depression, Anxiety Stress Scale

b: total scale score ranges 1–21

Overall, most of the sample scored within the 'normal' range for symptoms of depression (73.3%), anxiety (79.8%), and stress (87.1%). As shown in Figures 7 and 8, experience of violence was associated with scoring above the normal range for each mental health symptom.

Table 29 shows the severity of mental health symptoms according to lifetime violence and Table 30 shows these according to recent violence. A greater proportion of respondents who reported any violence met criteria for 'severe' or 'extremely severe' levels of all three symptoms. The association between experience of violence and DASS classification was statistically significant across all comparisons (ps <0.001), with small to medium effect sizes indicating that DASS classification accounted for 17 to 21 percent of the variance in lifetime violence, and 18 to 19 percent in recent violence.

Figure 7 Proportion of respondents within DASS severity classifications who reported lifetime violence (n=2,278)

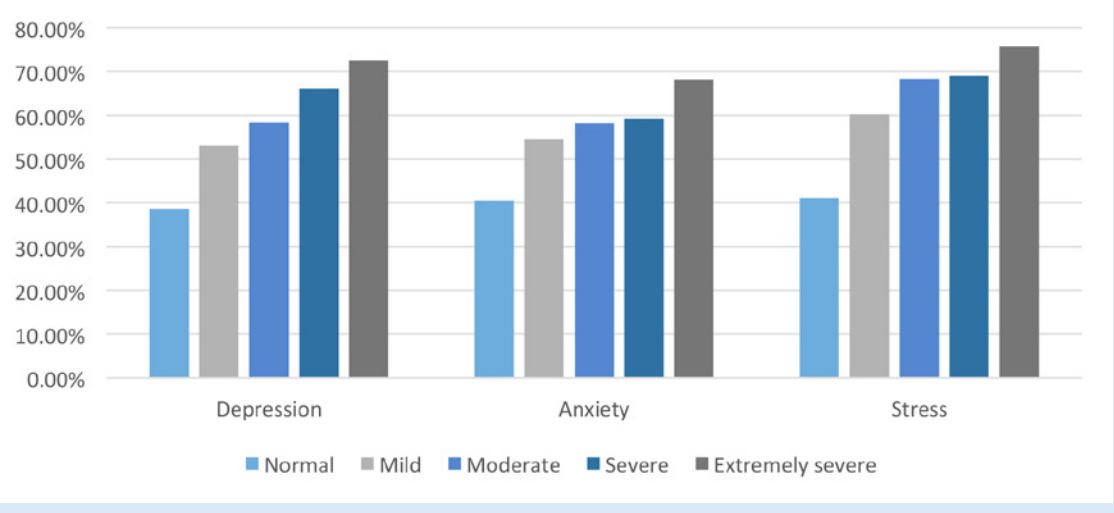


Figure 8 Proportion of respondents classified according to DASS severity levels who reported recent violence (n=307)

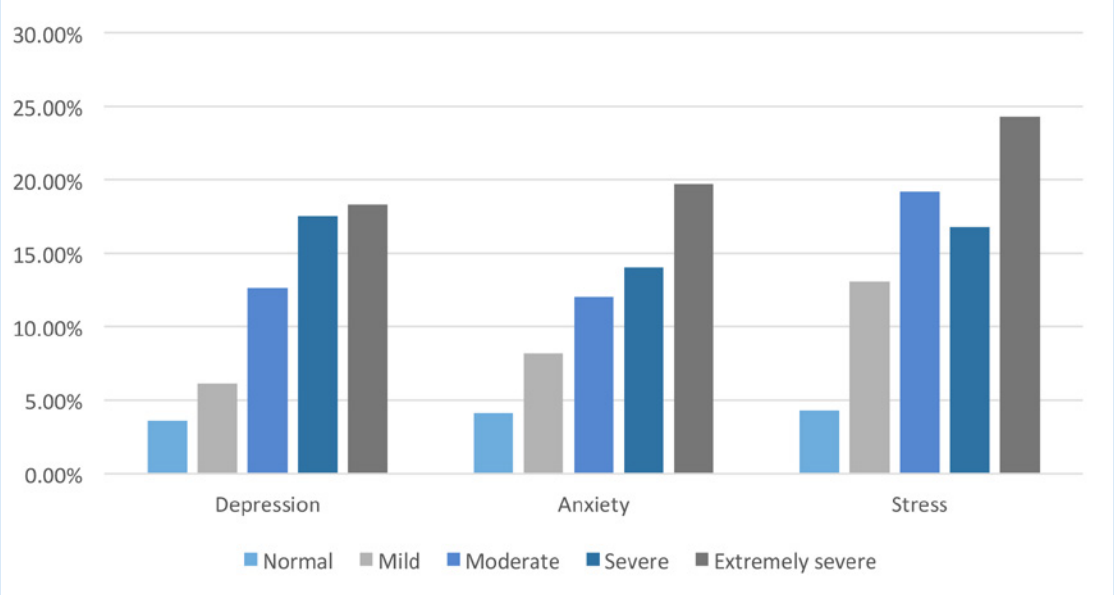


Table 29 Depression, anxiety and stress severity classification according to experience of lifetime violence (n=5,118)

	Lifetime violence experience		Chi square (Cramer's V)
	Yes % (n)	No % (n)	
Depression			223.20*** (0.21***)
Normal	63.6 (1,449)	81.1 (2,305)	
Mild	8.4 (192)	6.0 (169)	
Moderate	14.5 (330)	8.3 (235)	
Severe	5.1 (117)	2.1 (60)	
Extremely severe	8.3 (190)	2.6 (73)	
Anxiety			142.29*** (0.17***)
Normal	72.7 (1,655)	85.5 (2,429)	
Mild	7.3 (167)	4.9 (139)	
Moderate	6.8 (155)	3.9 (111)	
Severe	4.1 (93)	2.3 (64)	
Extremely severe	9.1 (208)	3.4 (97)	
Stress			158.13*** (0.18***)
Normal	80.6 (1,837)	92.3 (2,620)	
Mild	5.7 (129)	3.0 (85)	
Moderate	6.7 (153)	2.5 (71)	
Severe	4.5 (103)	1.6 (46)	
Extremely severe	2.5 (56)	0.6 (18)	

*** statistically significant at $p<0.001$

Table 30 Depression, anxiety and stress severity classification according to experience of recent violence (n=307)

	Recent violence experience		Chi square (Cramer's V)
	Yes % (n)	No % (n)	
Depression			193.22*** (0.19***)
Normal	44.0 (135)	75.2 (3,617)	
Mild	7.2 (22)	7.0 (339)	
Moderate	23.1 (71)	10.3 (494)	
Severe	10.1 (31)	3.0 (146)	
Extremely severe	15.6 (48)	4.5 (218)	
Anxiety			164.47*** (0.18***)
Normal	54.7 (168)	81.4 (3,916)	
Mild	8.1 (25)	5.8 (281)	
Moderate	10.4 (32)	4.9 (234)	
Severe	7.2 (22)	2.8 (135)	
Extremely severe	19.5 (60)	5.1 (245)	
Stress			134.87*** (0.19***) [a]
Normal	62.9 (193)	88.6 (4,264)	
Mild	9.1 (28)	3.9 (186)	
Moderate	14.0 (43)	3.8 (181)	
Severe	8.1 (25)	2.6 (124)	
Extremely severe	5.9 (18)	1.2 (56)	

*** statistically significant at p<0.001

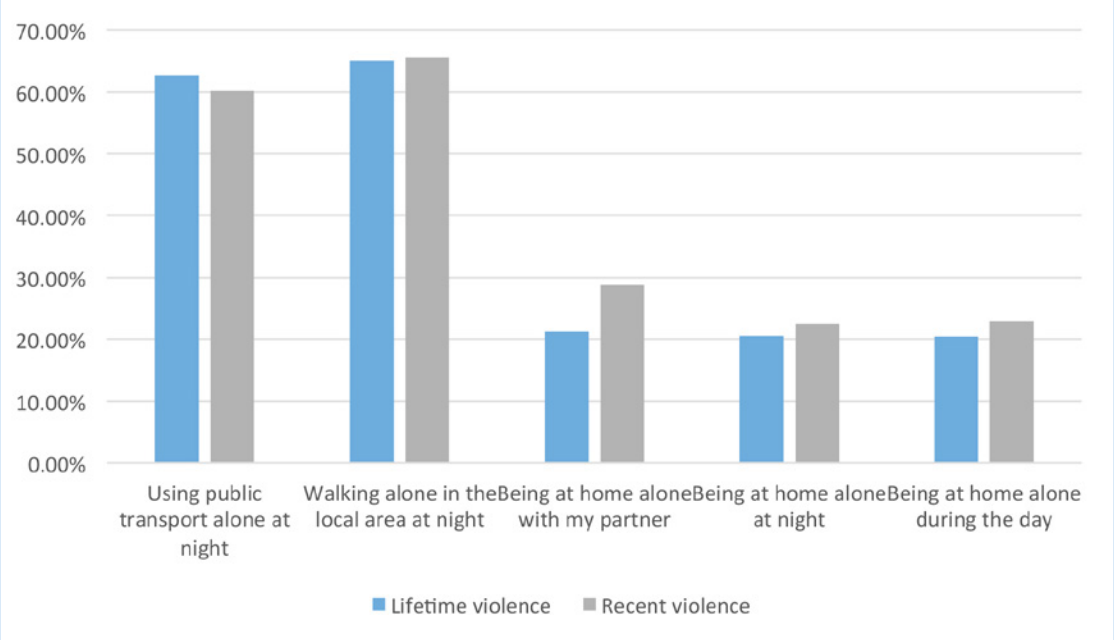
a: Fisher's Exact Test

Feelings of personal safety

As shown in Figure 9, a large proportion (60–65%) of respondents who experienced violence, reported feeling unsafe on public transport, when alone at night, and when walking in the local area at night. They also avoided being in these situations. Conversely, about 20 percent of respondents who experienced violence and reported feeling unsafe at home (either alone with partner, alone at night, or alone during the day) avoided being in that situation due to feeling unsafe.

No significant differences were evident in the proportion of respondents who did and did not report violence and who avoided each situation due to feeling unsafe, with the exception of 'being home alone with my partner'. Specifically, among respondents who felt unsafe at home alone with their partner, 28.8 percent of those who also reported recent violence, compared with 17.4 percent of those who did not report recent violence, avoided being in this situation (p<0.05). The size of this effect was small (Phi=0.11, p<0.05) and was based on only a small number of cases within the sample (n=312).

Figure 9 Proportion of respondents who experienced lifetime (n=2,278) or recent violence (n=307) and avoided five situations due to feeling unsafe



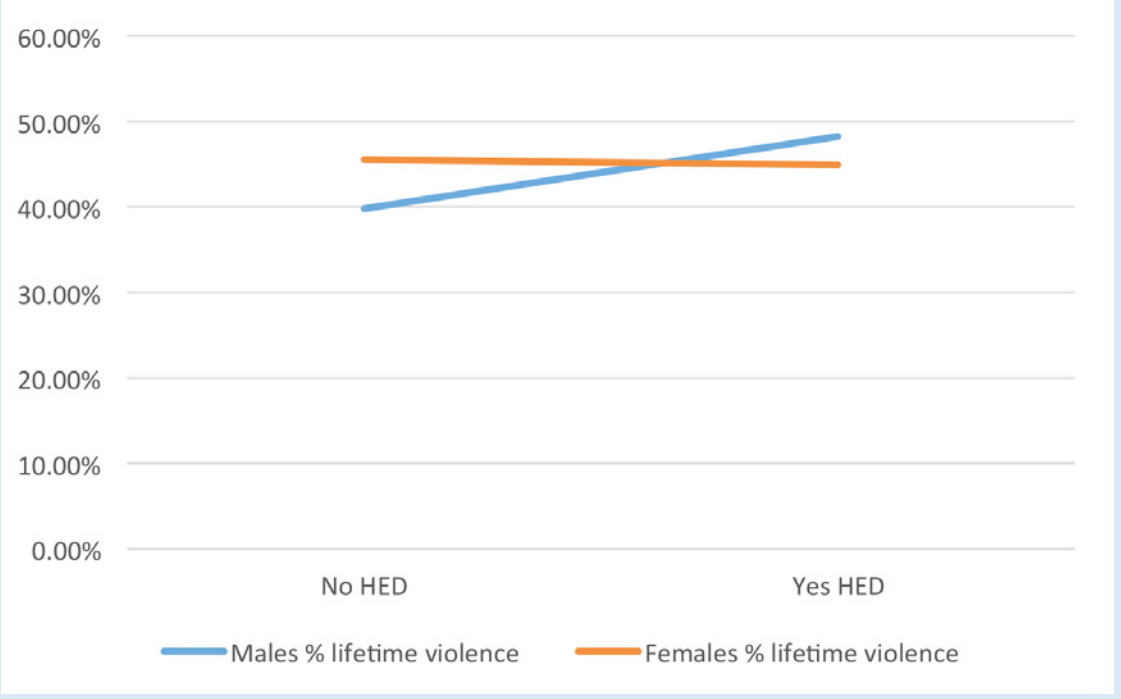
Multivariate predictors of violence

To determine which of the factors discussed in the proceeding sections contributed unique variance to the prediction of lifetime and recent violence, two hierarchical logistic regressions were conducted with experience of violence (no vs yes) as the outcome variable. Demographic factors (age, sex, education and geographic location) were entered in the first step, alcohol and drug use variables were entered in the second step, and interaction terms (with sex) were entered in the third step. Household income was not included in these analyses as a control due to high levels of missing data on this variable (n=536).

Lifetime violence

As shown in Table 31, in the fully adjusted model (Step 3), low and high substance dependency levels remained significant predictors of lifetime violence, with ORs increasing to 2.93 (95%CI=2.01–4.27) and 7.06 (95%CI=2.01–24.81), respectively. The only significant interaction was between HED and sex. Sex also became a significant independent predictor. Taken together, while males were significantly less likely to report lifetime violence (OR=0.78, 95%CI=0.69–0.92), HED increased males' likelihood of lifetime violence, but not females' likelihood of lifetime violence (OR=1.47, 95%CI=1.07–2.03)—see Figure 10.

Figure 10 Interaction effect of HED on experience of lifetime violence for males versus females



Overall the model accounted for four to six percent of the variance associated with lifetime violence (Cox & Snell R Square=0.05; Nagelkerke R Square=0.06). The classification of participants was biased towards no experience of lifetime violence. A total of 76.5 percent of respondents who did not experience lifetime violence, and 38.7 percent of those who did, were correctly classified.

Recent violence

As shown in Table 32, age was associated significantly with recent violence at each step. In the fully adjusted model (Step 3), respondents aged 18 to 25 years were six times more likely to report recent violence compared with respondents aged 66 years and older (OR=6.03, 95%CI=3.62–10.04). The odds of violence decreased across age groups. No other demographic factors were significant at any step.

The addition of substance use variables at Step 217 added significant variance to the model (X2(11, 4,932)=34.46, p<0.001), however, only illicit drug use uniquely predicted recent violence. Illicit drug users were 2.8 times more likely than non-users to report recent violence (OR=2.83, 95%CI=1.27–31.53, p<0.001). Given the low number (n=20) of respondents classified with a high level of illicit drug dependency among those who experienced recent violence, only illicit drug use (yes vs no) was included in the model predicting recent violence. The addition of interaction effects between drug use and sex at Step 3 added no significant variance to the model (X2(3, 4,932)=12.76, p>0.05); however, adding the interaction effects increased the odds ratio associated with illicit drug use from 2.83 to 3.55 (95%CI=2.28–5.53, p<0.001).

While the fully adjusted model added significant variance to the prediction of recent violence (X2(17, 4,932)=166.97, p<0.001), the model correctly classified 100 percent of respondents who did not report recent violence but zero percent of respondents who did report recent violence. The final variance accounted for by the model ranged between three and nine percent (Cox & Snell R Square=0.03; Negelkerke R Square=0.09).

Table 31 Hierarchical logistic regression model predicting experience of lifetime violence

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Age (years)												
18–25[a]												
26–35	0.12	1.11	1.13	0.90–1.40	0.15	1.71	1.16	0.93–1.45	0.14	1.51	1.15	0.92–1.44
36–50	0.32	10.57	1.38***	1.13–1.67	0.40	15.76	1.49***	1.22–1.81	0.38	14.56	1.47***	1.21–1.79
51–65	0.30	11.63	1.35***	1.14–1.61	0.42	20.43	1.52***	1.27–1.82	0.39	17.83	1.48***	1.23–1.78
66+	-0.30	9.68	0.74**	0.61–0.89	-0.15	2.18	0.86	0.70–1.05	-0.17	2.90	0.84	0.69–1.03
Male	-0.05	0.75	0.95	0.84–1.07	-0.07	1.16	0.93	0.83–1.06	-0.24	8.76	0.78**	0.69–0.92
Born outside Australia	-0.17	6.40	0.84*	0.73–0.96	-0.16	5.57	0.85*	0.74–0.98	-0.16	5.21	0.85*	0.74–0.98
Never been in a relationship	-0.68	29.20	0.51***	0.39–0.65	-0.62	23.57	0.54***	0.42–0.69	-0.61	23.16	0.54***	0.42–0.69
Highest level of education												
Year 11 or below	-0.07	0.86	0.93	0.78–1.10	-0.10	1.44	0.90	0.76–1.07	-0.11	1.61	0.89	0.75–1.06
Year 12 or equivalent	-0.16	3.85	0.85	0.72–1.00	-0.17	4.07	0.84*	0.71–0.99	-0.18	4.64	0.83*	0.70–0.98
Vocational qualification	0.24	10.19	1.27***	1.10–1.48	0.24	9.60	1.27**	1.09–1.47	0.24	9.63	1.27**	1.09–1.47
Tertiary qualification[a]												
Resides in regional location	0.22	9.69	1.25**	1.09–1.44	0.21	8.80	1.24**	1.08–1.43	0.21	8.68	1.24**	1.07–1.43
HED					0.08	0.83	1.08	0.91–1.28	-0.14	1.36	0.87	0.68–1.10
Hazardous drinker					-0.08	0.90	0.93	0.79–1.08	-0.12	1.29	0.88	0.71–1.09
No illicit drug use[a]												
Low severity dependency					0.92	38.62	2.52***	1.88–3.38	1.07	31.37	2.93***	2.01–4.27
High severity dependency					1.47	14.59	4.35***	2.04–9.27	1.95	9.28	7.06**	2.01–24.81
HED*Male									0.39	5.57	1.47*	1.07–2.03
Hazardous*Male									0.11	0.54	1.12	0.82–1.53
Low severity dependency*Male									-0.25	0.68	0.78	0.43–1.41
High severity dependency*Male									-0.78	0.94	0.46	0.09–2.22

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Note: OR=Odds Ratio 95%; CI=95% Confidence Interval for odds ratio; HED=heavy episodic drinking

Table 32 Hierarchical logistic regression model predicting experience of recent violence

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Age												
18–25	1.86	55.25	6.40***	3.92–10.44	1.78	46.96	5.96***	3.57–9.92	1.78	47.66	6.03***	3.62–10.04
26–35	1.59	34.59	4.91***	2.89–8.34	1.54	30.23	4.67***	2.70–8.10	1.55	30.52	4.71***	2.72–8.15
36–50	1.20	20.93	3.32***	1.99–5.56	1.18	19.76	3.27***	1.94–5.52	1/19	19.90	3.30***	1.95–5.56
51–65	0.58	4.76	1.78*	1.06–2.99	0.57	4.59	1.77*	1.05–2.97	0.57	4.61	1.77*	1.05–2.98
66+[a]												
Male	-0.11	0.81	0.89	0.69–1.14	-0.07	0.32	0.93	0.72–1.20	-0.15	0.63	0.86	0.59–1.24
Born outside Australia	-0.24	2.32	0.79	0.58–1.07	-0.20	1.57	0.82	0.60–1.12	-0.19	1.48	0.82	0.60–1.13
Not in a current relationship	-0.11	0.67	0.89	0.68–1.17	-0.10	0.54	0.90	0.69–1.18	-0.09	0.45	0.91	0.69–1.19
Highest level of education												
Year 11 or below	-0.30	2.15	0.74	0.49–1.11	-0.33	2.48	0.72	0.48–1.08	-0.33	2.50	0.72	0.48–1.08
Year 12 or equivalent	-0.02	0.02	0.98	0.710–1.35	-0.01	0.00	1.01	0.73–1.39	-0.01	0.00	0.99	0.72–1.34
Vocational qualification	-0.06	0.14	1.06	0.780–1.45	-0.07	0.17	1.07	0.78–1.46	0.06	0.15	1.07	0.78–1.45
Tertiary qualification[a]												
Resides in regional location	0.11	0.50	1.11	0.83–1.50	-0.08	0.30	1.09	0.80–1.47	0.08	0.28	1.09	0.80–1.47
HED					-0.24	1.71	0.78	0.54–1.13	-0.46	3.54	0.63	0.39–1.02
Hazardous drinker					0.30	2.89	1.35	0.95–1.92	0.36	2.53	1.43	0.92–2.23
Illicit drug use (yes)					1.04	33.07	2.84***	1.99–4.05	1.27	31.53	3.55***	2.28–5.53
HED*Male									0.45	1.53	1.56	0.77–3.17
Hazardous*Male									-0.11	0.10	0.89	0.45–1.78
Illicit drug use*Male									-0.57	2.08	0.57	0.26–1.23

*** statistically significant at $p<0.001$

a: reference category

Note: OR=Odds Ratio 95% CI=95% Confidence Interval for odds ratio; HED=heavy episodic drinking

Most recent violent incident

The following presents findings related to respondents' most recent experience of violence.

Of the 2,278 respondents who indicated lifetime violence, 41.8 percent of the most recent incidents were intimate partner violence and 13.1 percent were family violence. Of the incidents that involved an intimate partner, 42.5 percent involved a current and 57.5 percent an ex-partner. In total, 54.9 percent of incidents involved a (current or ex-) partner or other family member. Incidents with individuals other than intimate partners or family members (eg friends, acquaintances, teachers, employers, co-workers) were classified as 'other violence'.

Demographics

Demographic characteristics of respondents who reported IPV, FV and other incident types at the most recent experience are presented in the table below.

Table 33 Sample characteristics according to most recent incident type (n=2,278)

	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
All	41.8 (952)	13.1 (299)	45.1 (1,027)			
Age M (SD)	47.97 (16.67)	44.11 (18.94)	48.13 (18.24)	**	ns	***
Age group (years)						
18–25	16.2 (154)	29.4 (88)	20.0 (205)	***	*	***
26–35	10.3 (98)	9.7 (29)	11.5 (118)	ns	ns	ns
36–50	23.8 (227)	18.4 (55)	16.0 (164)	*	***	ns
51–65	34.3 (327)	27.1 (81)	32.5 (334)	*	ns	ns
66 +	15.3 (146)	15.4 (146)	20.1 (206)	ns	**	ns
% Femalea (yes)	76.0 (720)	65.6 (196)	28.0 (736)	***	***	***
Born in Australia	78.9 (751)	75.6 (226)	75.6 (776)	ns	ns	ns
Aboriginal/Torres Strait	2.5 (24)	2.7 (8)	2.7 (28)	ns	ns	ns
Highest level of education						
Year 11 or below	22.7 (216)	14.4 (43)	14.9 (153)	**	***	ns
Year 12 or equivalent	16.1 (153)	23.7 (71)	17.3 (178)	ns	ns	ns
Vocational qualification	29.9 (285)	26.8 (80)	27.7 (284)	ns	ns	ns
Tertiary qualification	31.3 (298)	35.1 (105)	40.1 (412)	ns	***	ns
Gross annual household income						
$25,000 or less	20.1 (180)	17.1 (44)	12.7 (119)	ns	***	ns
$25,001–$50,000	33.3 (298)	28.8 (74)	29.6 (278)	ns	ns	ns
$50,001–$100,000	29.8 (266)	35.4 (91)	35.6 (334)	ns	**	ns
$101,000 or above	16.8 (150)	18.7 (48)	22.1 (207)	ns	**	ns
In a current relationship	67.2 (640)	72.2 (216)	71.8 (737)	ns	*	ns

Table 33 Sample characteristics according to most recent incident type (n=2,278)						
	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Residential location						
Western Australia	9.2 (87)	10.1 (30)	10.3 (106)	ns	ns	ns
New South Wales	26.2 (249)	25.5 (76)	23.8 (244)	ns	ns	ns
Tasmania	6.2 (59)	4.0 (12)	4.6 (47)	ns	ns	ns
Victoria	20.2 (192)	22.5 (67)	23.7 (243)	ns	*	ns
Northern Territory	1.2 (11)	1.3 (4)	1.9 (19)	ns	ns	ns
South Australia	9.9 (94)	9.1 (27)	11.6 (119)	ns	ns	ns
Australian Capital Territory	1.3 (12)	1.3 (4)	1.3 (13)	ns	ns	ns
Queensland	24.8 (236)	23.8 (71)	20.4 (209)	ns	*	ns
From a regional location (yes)	25.6 (241)	18.9 (55)	23.4 (234)	*	ns	Ns
SEIFA disadvantage quintile[b]						
1 (most disadvantage)	21.7 (206)	18.1 (54)	22.1 (227)	ns	ns	ns
2	23.7 (225)	21.5 (64)	21.6 (221)	ns	ns	ns
3	18.8 (179)	21.1 (63)	18.5 (190)	ns	ns	ns
4	23.3 (212)	21.1 (63)	19.9 (204)	ns	ns	ns
5 (least disadvantage)	13.5 (128)	18.1 (54)	17.9 (183)	*	**	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant (p>0.05)

a: respondents who identified as transgender (n=14) and other (n=3) were excluded from this analysis

b: excludes 5 respondents who declined to provide their postcode

Intimate partner violence vs family violence

Respondents who reported FV at the most recent incident were significantly younger (M=44 years) than those who reported IPV (M=48 years), p<0.01. This age difference was also reflected in the finding that 18 to 25 year olds comprised almost twice the proportion of respondents who reported FV (29.4%) compared with IPV (16.2%, Phi=0.14, p<0.001,). Similarly, significantly greater proportions of older age groups (36–50 and 51–65 age groups) were represented among those reporting IPV compared with FV (Phi=0.06, p<0.05; Phi=0.07, p<0.05).

Significantly more females than males reported either intimate partner violence or family violence. A significantly greater proportion of those who experienced IPV reported their highest level of education was Year 11 or below (22.7%) compared with those who experienced FV (14.4%, p<0.01, Phi=0.09). Finally, a significantly greater proportion of those reporting IPV were from regional locations (25.6%) compared with those reporting FV (18.9%; p<0.05, Phi=0.07). A significantly smaller proportion of those who reported IPV (13.5%) were located in areas of least disadvantage (5th SEIFA quintile) compared with those reporting FV (18.1%; p<0.05, Phi=0.06).

These differences indicate that respondents who experienced an IPV compared with a FV incident were more likely to be older females with a low level of education who lived in regional Australia. The effect sizes indicated that these differences were small, accounting for about five to 14 percent variance in the experience of IPV versus FV.

Intimate partner violence versus other violence

No mean age difference was evident between respondents who reported an IPV incident compared with other violence incident. However, a greater proportion of 36 to 50 year olds reported IPV (23.8%) compared with other violence (16.0%; p<0.001, Phi=0.10); while smaller proportions of 18 to 25 year olds (16.2%; p<0.05, Phi=-0.05) and those aged 66 years and older (15.3%; p<0.01, Phi=-0.06) reported IPV compared with other violence (20.0%; 20.1%, respectively). A significantly greater proportion of respondents who reported other violence were male (72.0%) compared with those who reported IPV (24.0%; p<0.001, Phi=0.48). Sex accounted for 48 percent of the variance associated with the incident type. Respondents who reported IPV were less educated and reported lower household incomes, with a significantly greater proportion of respondents reporting IPV within the lowest educational bracket (Year 11 or below, 22.7% vs 14.9%; p<0.001, Phi=0.10) and household income category ($25,000 or below, 20.1% vs 12.7%; p<0.001, Phi=0.10). Conversely, a significantly greater proportion of respondents who reported other violence were within the highest educational bracket (tertiary, 40.1% vs 31.3%; p<0.001, Phi=-0.09) and household income category ($100,001+, 22.1% vs 16.8%; p<0.01, Phi=-0.07). Significantly fewer Victorians reported IPV compared with other violence (20.2% vs 23.7%; p<0.05, Phi=-0.05), while significantly more Queenslanders reported IPV than other violence (24.8% vs 20.4%, p<0.05, Phi=0.05). The size of these effects, however, was small. Finally, those who reported intimate partner violence were significantly less likely to be in a current relationship than those who reported other violence (67.2% vs 71.8%, p<0.05, Phi=0.05).

Family violence versus other violence

Few significant differences were evident between respondents who reported family violence compared with other violence. Respondents who reported FV were significantly younger (M=44.11 years) than those who reported other violence (M=48.13 years, p<0.001); accordingly 29.4 percent of those who reported FV were aged 18 to 25 years compared with 20.0 percent of those who reported other violence (p<0.001, Phi=0.09). Like IPV, respondents who reported FV were significantly less likely to be male, 34.4 percent of respondents who reported FV compared with 72.0 percent of those who reported other violence were male (p<0.001, Phi=0.33).

Age and sex differences

For intimate partner violence only, a significantly higher proportion of women came from regional locations compared with metropolitan locations (82.0% vs 74.2%, OR=1.59, 95%CI=1.09–2.30). As shown in Figure 11, the proportion of respondents reporting IPV, FV, and other violence that was female, decreased with increasing age group.

Table 34 presents characteristics of the most recent IPV, FV and 'other violence' incidents.

Figure 11 Proportion of respondents reporting IPV, FV, and other violence who were female

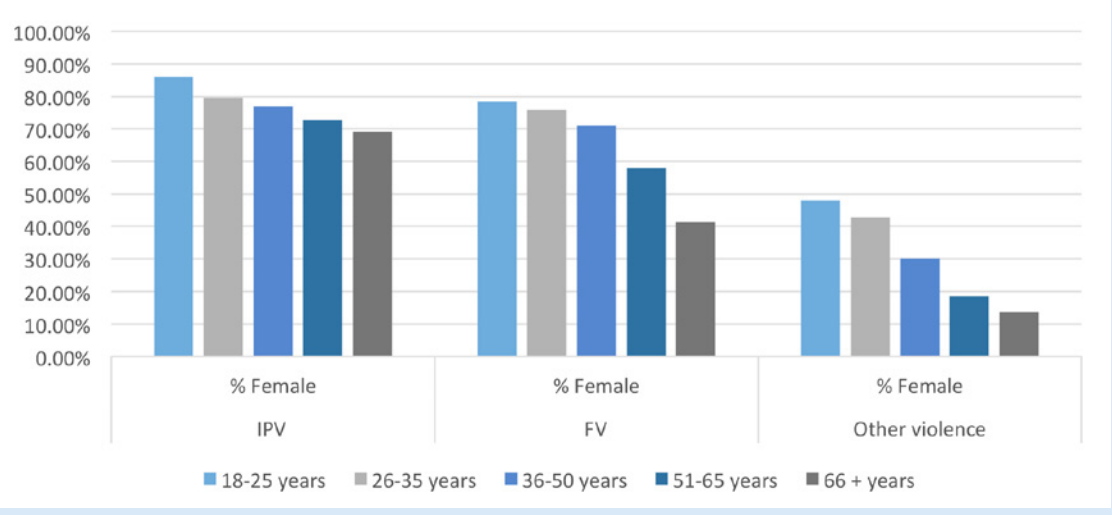


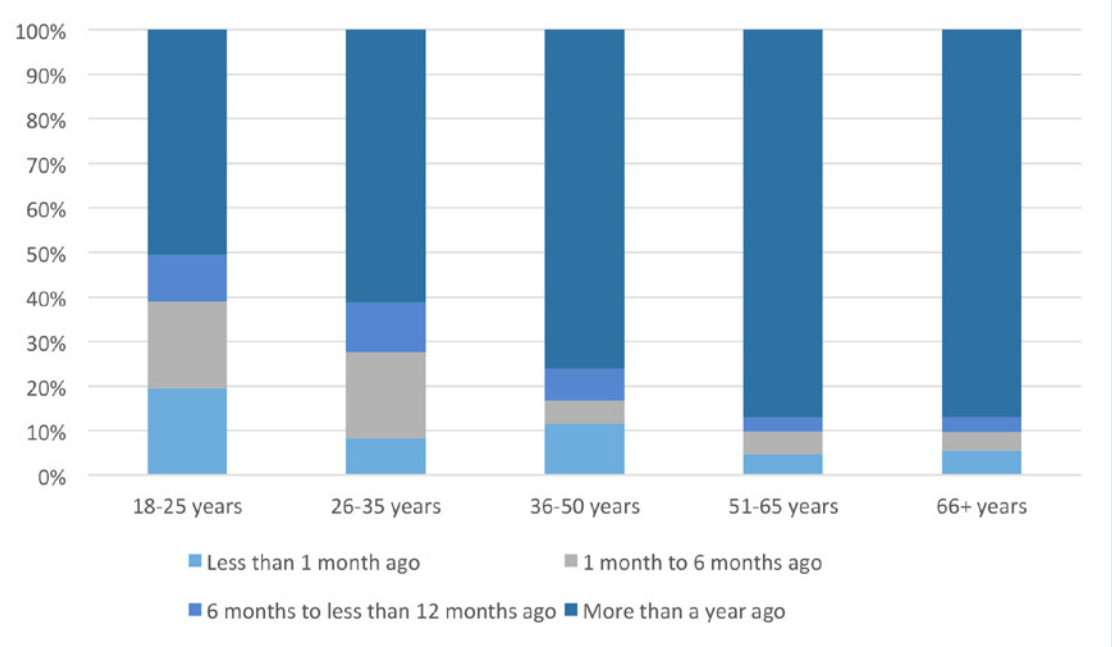
Table 34 Incident characteristics according to most recent incident type (n=2,278)						
				Significance		
	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Time since incident						
Less than 1 month	9.1 (87)	10.4 (31)	4.6 (47)	ns	***	***
1–6 months	8.8 (84)	4.0 (12)	6.3 (65)	**	*	ns
6–12 months	6.1 (58)	3.3 (10)	7.2 (74)	ns	ns	*
1 year or more	75.9 (723)	82.3 (246)	81.9 (841)	*	***	ns
Experienced similar incidents before (yes)	79.9 (761)	75.6 (226)	38.2 (392)	ns	***	***
Involve more than 1 other person (yes)	11.4 (108)	28.8 (86)	38.2 (392)	***	***	**
Location						
My home	75.5 (719)	61.2 (183)	11.2 (115)	***	***	***
Perpetrators home	9.6 (91)	17.7 (53)	2.3 (24)	***	***	***
Another person's home	3.6 (24)	12.4 (37)	5.1 (52)	***	ns	***
Outdoors	3.8 (36)	3.7 (11)	27.1 (278)	ns	***	***
My workplace	0.9 (9)	1.0 (3)	19.6 (201)	ns	***	***
Inside licensed premise	0.6 (6)	0.7 (2)	7.4 (76)	ns	***	***
Outside licensed premise	0.5 (5)	0 (0)	7.4 (76)	ns	***	***
In a private vehicle	3.2 (30)	0.7 (2)	2.9 (30)	*	ns	*
Public transport	0.2 (2)	0.3 (1)	4.3 (44)	ns	***	***
Sporting venue	0.1 (1)	0 (0)	1.9 (19)	ns	***	*
School/university	0.2 (2)	0.3 (1)	4.8 (49)	ns	***	***
Online/over phone	0.7 (7)	1.0 (3)	0.9 (9)	ns	ns	ns
Other	1.1 (10)	1.0 (3)	5.3 (54)	ns	***	***
Type of violence						
Physical	48.8 (465)	46.2 (138)	50.0 (514)	ns	ns	ns
Sexual	10.0 (95)	9.7 (29)	7.5 (77)	ns	ns	ns
Verbal	72.2 (687)	62.2 (186)	43.4 (446)	***	***	***
Intimidation	42.2 (402)	29.1 (87)	27.8 (286)	***	***	ns
Unwanted sexual attention	7.1 (68)	4.3 (13)	6.0 (62)	ns	ns	ns
Psychological/controlling	3.2 (30)	2.0 (6)	0.3 (3)	ns	***	**

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-signifiant

Time since most recent incident

Compared with other violent incidents, IPV and FV were significantly more likely to have occurred in the past month (p<0.001, Phi=0.09; p<0.001, Phi=0.10). For IPV and other incidents, there were significant interactions (age-group by time since incident) with a general trend for an increase in the time since the incident across age group (p<0.001, Phi=0.34; p<0.001, Phi=0.34). Figure 12 shows this effect for IPV. For 18 to 25 year olds, 50 percent of IPV incidents occurred in the past 12 months compared with 13 percent of IPV incidents reported by respondents aged 66 years and older.

Figure 12 Time since most recent IPV incident according to age group (n=2,278)



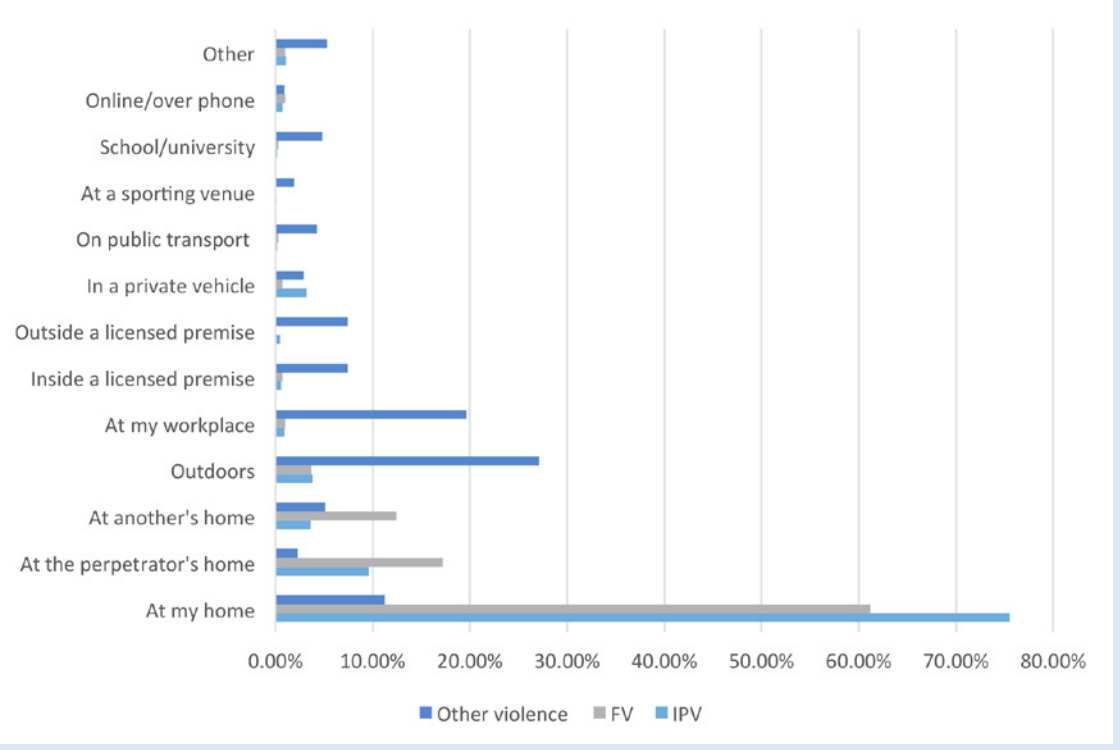
Other person/s

Respondents who reported IPV or FV as the most recent incident were significantly more likely to have previously experienced similar incidents with the same person(s) ($p<0.001$, Phi=0.42; $p<0.001$, Phi=0.31) compared with respondents who reported other violence. Incidents of IPV and FV were significantly less likely to involve more than one other person (other than the respondent) compared with other violent incidents ($p<0.001$, Phi=0.31; $p<0.01$, Phi=0.08). When compared with FV, IPV incidents were significantly less likely to involve more than one other person, with 11.8 percent of IPV and 28.8 percent of FV incidents involving at least two other individuals ($p<0.001$, Phi=-0.20).

Location of most recent incident

Intimate partner violence ($p<0.001$, phi=0.65; $p<0.001$, phi=0.15) and FV ($p<0.001$, phi=0.50; $p<0.001$, phi=0.27) incidents were significantly more likely to occur at the home of respondents or perpetrators compared with 'other violence' incidents. While IPV was more likely to occur at the respondent's home than FV ($p<0.001$, Phi=-0.14), FV was more likely to occur at the home of a perpetrator ($p<0.001$, Phi=0.11) or another person ($p<0.001$, Phi=0.16). In contrast, 'other violence' incidents were significantly more likely to occur at public locations (ps range from <0.05 to 0.001). Figure 13 displays the proportion of IPV, FV and 'other violence' incidents that occurred at each of 13 locations.

Figure 13 Proportion of most recent IPV, FV and other incidents that occurred in 13 locations (n=2,278)



Type of violence at most recent incident

As shown in the bottom of Table 34 and in Figure 14 below, there were similar trends in the type of violence experienced at the most recent incident, regardless of incident type. The most frequently reported behaviours were physical and verbal violence, while sexual violence, unwanted sexual attention, and psychological violence/controlling violence were least frequently reported. No significant differences were evident in the proportion of respondents reporting IPV, FV and 'other violence' incidents, who experienced physical violence, sexual violence, and unwanted sexual attention ($p>0.05$). However, IPV and FV incidents were more likely to involve verbal violence compared with other violence ($p<0.001$, Phi=0.29; $p<0.001$, Phi=0.16). In addition, intimidation was more frequently reported in relation to IPV compared with both FV and other violence ($p<0.001$, Phi=-0.11; $p<0.001$, Phi=0.15). Psychological/controlling behaviours were more frequently reported in relation to IPV and FV compared with other violence ($p<0.001$, Phi=0.11; $p<0.001$, Phi=0.09) incidents.

As shown in Table 35 below, the females who experienced IPV incidents at their most recent incident were significantly more likely than males to report physical violence, sexual violence, intimidation, and unwanted sexual attention. Females who reported FV at their most recent incident were significantly more likely to report sexual violence and significantly less likely to report physical violence.

Figure 14 Type of violence experienced at the most recent IPV, FV and 'other violence' incidents (n=2,278)

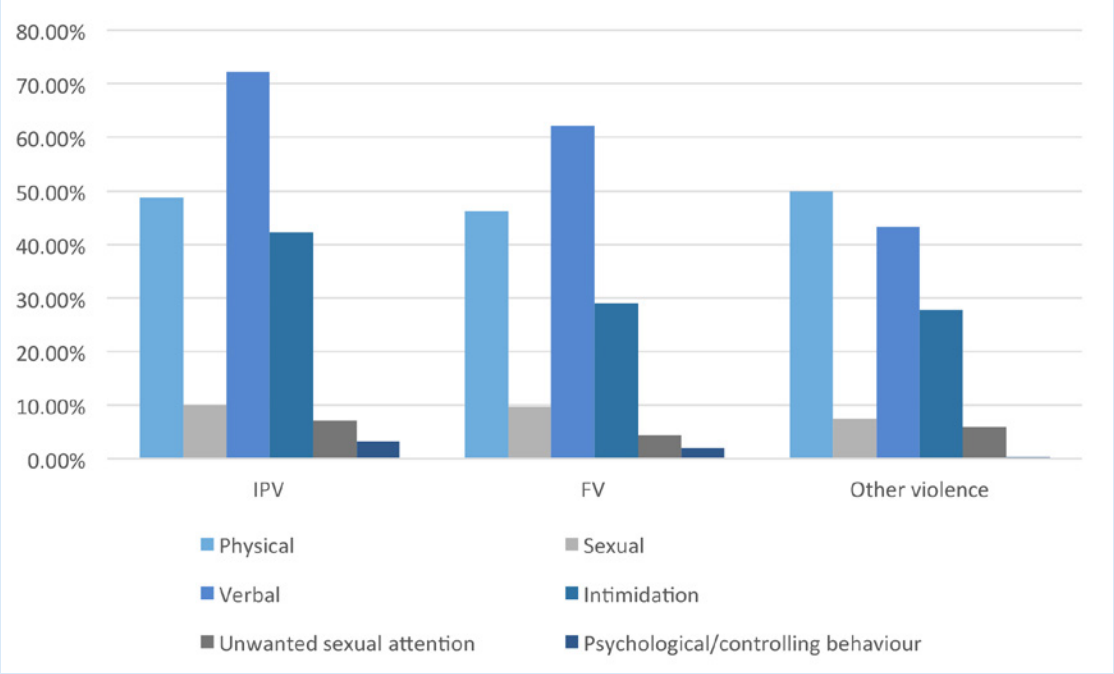


Table 35 Proportion of females and males reporting IPV and FV at the most recent incident by type of violence experienced (n=1,246)

	IPV		FV	
	% of females	% of males	% of females	% of males
Physical	51.1 (368)	41.9 (95)*	41.3 (81)	55.3 (57)*
Sexual	11.1 (80)	4.8 (11)**	12.8 (25)	3.9 (4)*
Verbal aggression	72.9 (525)	70.9 (161)	65.8 (129)	55.3 (57)
Intimidation	49.2 (354)	20.3 (46)***	31.6 (62)	24.3 (25)
Unwanted sexual attention	8.6 (62)	2.2 (5)***	5.6 (11)	1.9 (2)[a]
Psychological/controlling behaviour	3.6 (26)	1.8 (4)	2.6 (5)	1.0 (1)[a]

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

Respondent and other person(s) behaviour

Behaviours of individuals involved in the most recent incident are shown in Table 36. For several reasons researchers chose not to categorise participants as either victims or perpetrators of the most recent incident they experienced. Researchers obtained the reports of experiences of violence only from the respondent, without obtaining descriptions of the same incident from the other person(s) involved to verify the respondent's account. While the survey was anonymous, the highly subjective nature of recounting a violent experience is recognised, especially those relating to FV and IPV. The questions that could be used to categorise victimisation and perpetration refer only to violence of a physical nature (ie 'Did you hit the other person[s]?' and 'Were you hit by the other person[s]?') or verbal (eg 'Did you yell or swear at the other person[s]?' and 'Were you yelled or sworn at by the other person[s]'). They do not capture more covert types of violence or behaviours that cannot be characterised as a specific 'incident' (eg controlling behaviours over extended periods of time). A total of 73 respondents who reported IPV answered 'no' to perpetrating or being the victim of all four of the behaviours listed. The question, 'Who instigated (started) the most recent incident?' was also deemed an unreliable (ie highly subjective) classification tool, with 92.8 percent of respondents indicating the 'other person(s)' instigated the incident, 4.7 percent of respondents indicating they instigated the incident, and 1.1 percent of respondents indicating it was instigated mutually. Researchers have questioned respondents only about their most recent violent experience, and cannot infer that such an incident indicates a pattern of behaviours.

Table 36 Behaviours of individuals involved in the most recent incident (n=2,278)

				Significance level		
	IPV % (n)	FV % (n)	Other % (n)	IPV vs FV	IPV vs other	FV vs other
Nature of violence						
Assault	19.0 (181)	22.7 (68)	29.5 (303)	ns	***	*
Threat	48.3 (460)	47.8 (143)	50.4 (518)	ns	ns	ns
Assault and threat	32.7 (311)	29.4 (88)	20.1 (206)	ns	***	***
Violence instigator[a]						
Respondent	7.2 (65)	2.8 (8)	2.9 (28)	**	***	ns
Other person(s)	88.7 (803)	96.5 (275)	95.4 (922)	***	***	ns
Mutual	4.1 (37)	0.7 (2)	1.7 (16)	**	**	ns
Violent actions						
Victim physical violence	43.1 (210)	42.5 (127)	39.9 (410)	ns	ns	ns
Perpetrate physical violence	10.7 (102)	9.4 (28)	17.8 (183)	ns	***	***
Victim verbal aggression	86.3 (822)	83.6 (250)	75.5 (777)	ns	***	**
Perpetrate verbal aggression	48.5 (462)	33.8 (101)	29.6 (304)	***	***	ns
Retaliate	39.7 (378)	32.8 (98)	35.8 (368)	*	ns	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant

a: 122 respondents reported that they don't know/can't remember who instigated the most recent incident and were excluded from this analysis

Nature of violence

No significant differences were evident in the nature of violence experienced at IPV and FV incidents (p>0.05). 'other violence' incidents were significantly more likely to involve assault (p<0.001, Phi=-0.12; p<0.05, Phi=-0.06), while IPV and FV were more likely to involve assault and threat p<0.001, Phi=0.14; p<0.001, Phi=0.09). About 50 percent of all incidents were characterised as involving threatening behaviour.

Instigator of violence

Significant differences existed across incident types relating to the instigator of violence. Most IPV incidents (88.7%) were instigated by the other individual(s) involved, and this proportion was significantly smaller than for FV (96.5%; $p<0.001$, Phi=0.11) and other violence (95.4%; $p<0.001$; Phi=0.10). Conversely, IPV incidents were more likely to be instigated by the respondent (7.2%) or mutually (4.1%) compared with both FV (2.8%; 0.7%; $p<0.01$, Phi=-0.08; $p<0.01$, Phi=-0.08;) and 'other violence' incidents (2.9%; 1.7%; $p<0.001$, Phi=-0.12; $p<0.001$, Phi=0.07).

Violent actions

No significant differences were evident in the proportion of respondents across incident type hit by other individual(s) during the incident ($p>0.05$). Respondents were more likely to report that they perpetrated physical violence during 'other violence' incidents compared with IPV ($p<0.001$, Phi=0.10) and FV ($p<0.001$, Phi=0.10) incidents. FV ($p<0.01$, Phi=-0.08) and IPV ($p<0.001$, Phi=-0.14) incidents were more likely to involve victimisation of verbal violence compared with 'other violence' incidents. A significantly greater proportion of respondents who reported IPV perpetrated verbal violence during the incident compared with both FV ($p<0.001$, Phi=0.13) and other violence ($p<0.001$, Phi=-0.19) incidents. A significantly greater proportion of respondents of IPV incidents retaliated against provocation or assault compared with those at FV incidents ($p<0.05$, Phi=0.06), but not 'other violence' incidents ($p>0.05$).

Gender

Compared with females, male respondents at FV and 'other violence' incidents were more likely to perpetrate ($p<0.05$, Phi=0.13; $p<0.001$, Phi=0.18), or be a victim of physical violence ($p<0.05$, Phi=0.06; $p<0.001$, Phi=0.18). In contrast, no significant differences were evident in the proportion of males and females who were either perpetrators or victims of physical violence at the most recent IPV incident ($p>0.05$). In addition, regarding IPV, males were more likely to have instigated ($p<0.001$, Phi=-0.18), and less likely to report that the other person(s) instigated ($p<0.001$, Phi=0.17) the incident. Males were also more likely to perpetrate verbal violence at IPV ($p<0.05$, Phi=0.06), but not FV or other violence ($p>0.05$) incidents. Finally, as shown in Table 37, for other violence only, males were more likely to have retaliated to the other person's provocation ($p<0.001$, Phi=0.11).

Table 37 Male and female respondents' reports of violent behaviours at the most recent incident (n=2,278)

	Males % (n)	Females % (n)	Significance
IPV			
Violence instigator[a]			
Respondent	15.6 (33)	4.7 (32)	***
Other person(s)	78.8 (167)	91.7 (631)	***
Mutual	5.7 (12)	67.6 (25)	ns
Were you hit by other person(s)? (yes)	39.6 (90)	44.0 (317)	ns
Did you hit the other person(s)? (yes)	12.3 (28)	10.3 (74)	ns
Were you yelled at or sworn at by the other person(s)? (yes)	83.3 (189)	87.5 (630)	ns
Did you yell or swear at the other person(s)? (yes)	56.8 (129)	46.0 (331)	**
Did you react (retaliate) to the other person's provocation or assault? (yes)	43.2 (98)	38.5 (277)	ns
FV			
Violence instigator[a]			
Respondent[b]	5.3 (5)	1.6 (3)	ns
Other person(s)[b]	0.0 (0)	1.1 (2)	ns
Mutual[b]	94.7 (90)	97.4 (185)	ns
Were you hit by other person(s)? (yes)	52.4 (54)	37.2 (73)	*
Did you hit the other person(s)? (yes)	14.6 (15)	6.6 (13)	*
Were you yelled at or sworn at by the other person(s)? (yes)	85.4 (88)	82.7 (162)	ns
Did you yell or swear at the other person(s)? (yes)	37.9 (39)	31.6 (62)	ns
Did you react (retaliate) to the other person's provocation or assault? (yes)	36.9 (38)	30.6 (60)	ns
Other violence			
Violence instigator[a]			
Respondent	3.2 (22)	2.2 (6)	ns
Other person(s)	95.4 (659)	95.6 (258)	ns
Mutual[b]	1.4 (10)	2.2 (6)	ns
Were you hit by other person(s)? (yes)	45.4 (334)	26.2 (75)	***
Did you hit the other person(s)? (yes)	22.0 (162)	7.0 (20)	***
Were you yelled at or sworn at by the other person(s)? (yes)	77.3 (569)	71.3 (204)	*
Did you yell or swear at the other person(s)? (yes)	30.7 (226)	25.9 (74)	ns
Did you react (retaliate) to the other person's provocation or assault? (yes)	39.0 (287)	27.3 (78)	***

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$. ns=non-significant

a: 122 respondents reported that they don't know/can't remember who instigated the most recent incident and were excluded from this analysis

b: analyses include cells with expected count <5, Fisher's Exact Test is reported

Injuries

Of the 2,278 respondents who reported lifetime violence, 23.4 percent (n=534) received an injury at the most recent incident. Intimate partner violence was significantly more likely to lead to an injury compared with family violence incidents; respondents sustained an injury in 25.6 percent of IPV and 18.7 percent of FV incidents (p<0.05, Phi=0.07). No significant difference was found between IPV and other violence, and FV and other violence in the proportion of respondents reporting an injury (25.6% vs 22.8%; 18.7% vs 22.8%, p>0.05). Table 38 compares the nature of injuries received at IPV, FV and 'other violence' incidents. Overall, respondents reported the lowest incidence of physical injury at FV incidents (17.4%); significantly lower than the proportion reported at IPV (24.6%, p<0.01, Phi=-0.07), but not other violence (20.8%, p>0.05) incidents. A similar proportion of psychological/emotional injuries were sustained at IPV (15.5%) and FV (11.0%) incidents. In contrast, a significantly smaller proportion of other violence (8.1%) than IPV incidents led to psychological/emotional injuries (p<0.001, Phi=0.12). The incidence of penetrative injuries (eg gunshot wound, stab wound), broken teeth, and miscarriage were too low to allow sufficient power to detect differences between IPV, FV, and other violence.

Table 38 Injuries received according to the most recent incident type (n=2,278)

	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
Bruises	21.8 (208)	15.4 (46)	16.0 (164)	*	***	ns
Cuts	8.7 (83)	5.0 (15)	8.5 (87)	*	ns	*
Penetrative injury	1.1 (10)	0.7 (2)	1.8 (18)	ns[b]	ns	ns[b]
Broken teeth	1.1 (10)	0.7 (2)	1.4 (14)	ns[b]	ns	ns[b]
Fractured/broken bones	3.7 (35)	1.7 (5)	4.6 (47)	ns	ns	*
Miscarriage[a]	1.1 (10)	0.0 (0)	0.0 (0.0)	ns[b]	ns[b]	-
Other physical[c]	0.9 (9)	0.7 (2)	1.0 (10)	ns	ns	ns
Psychological/emotional	15.5 (148)	11.0 (33)	8.1 (83)	ns	***	ns

* statistically significant at p<0.05.. *** statistically significant at p<0.001. ns=non-significant

a: women only

b: analyses include cells with expected count <5, Fisher's Exact Test is reported

c: includes concussions, damage to eye sight, hearing

A significantly greater proportion of respondents sought medical attention for an injury received at an 'other violence' incident (59.4%) compared with both IPV (38.1%; p<0.001, Phi=0.21) and FV (25.0%; p<0.001, Phi=0.27) incidents (see Table 39).

Table 39 Injuries received according at IPV and FV incidents by sex (n=1,246)

	IPV		FV	
	% of females (n)	% of males (n)	% of females (n)	% of males (n)
Any injury	27.6 (199)	19.4 (44)*	16.3 (32)	23.3 (24)
Physical injury	26.9 (194)	17.2 (39)**	14.8 (29)	22.3 (23)
Psychological/emotional injury	17.5 (126)	9.7 (22)**	9.7 (19)	13.6 (14)

* statistically significant at p<0.05. ** statistically significant at p<0.01.

Witnesses

One or more individuals witnessed just more than half of all recent incidents (51.5%, n=1,174). Overall, a significantly greater proportion of FV (61.9%) and other violence (64.9%) incidents were witnessed by other person/s compared with IPV incidents (34.7%; p<0.001, Phi=0.24; p<0.001, Phi=-0.29). As shown in Table 40, children were more likely to witness IPV than either FV (p<0.001, Phi=-0.11) or other violence (p<0.001, Phi=0.17) incidents. Conversely, other family members were more likely to witness FV than either IPV (p<0.001, Phi=-0.51) or other violence (p<0.001, Phi=0.47) incidents. Strangers, friends/acquaintances, and work colleagues were more likely to witness 'other violence' incidents than either IPV (p<0.001, Phi=-0.30; p<0.001, Phi=-0.24; p<0.001, Phi=-0.18) or FV (p<0.001, Phi=-0.24; p<0.001, Phi=-0.23; p<0.001, Phi=-0.13) incidents.

For IPV only, a significantly greater proportion of witnessed incidents resulted in an injury (37.0%) compared with incidents not witnessed by at least one other person (19.6%; Phi=-0.19). Of the IPV incidents witnessed by children, an injury was sustained in 37.3 percent of incidents.

Table 40 Witnesses to the most recent incident (n=2,278)

Witness	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
Child/ren	19.4 (185)	10.0 (30)	7.9 (81)	***	***	ns
Other family member/s	6.7 (64)	52.8 (158)	8.7 (89)	***	ns	***
Stranger/s	5.5 (52)	4.3 (13)	28.6 (294)	ns	***	***
Friend/s/acquaintance/s	9.0 (15)	5.0 (15)	27.8 (285)	*	***	***
Work colleague	0.1 (1)	0.0 (0)	7.0 (72)	ns[a]	***	***

* statistically significant at p<0.05. *** statistically significant at p<0.001. ns=non-significant

a: analyses include cells with expected count <5, Fisher's Exact Test is reported

Police involvement

One in five incidents (21.6%, n=492) were reported to police. A significantly greater proportion of other violence (26.9%) than IPV (17.5%, p<0.001, Phi=-0.11) and FV (16.4%, p<0.001, Phi=-0.10) incidents was reported to police. As shown in Table 42 female respondents who experienced IPV were significantly more likely to indicate that they reported the most recent incident to police themselves; conversely, male respondents were more likely to indicate that a family member (which may include an intimate partner) reported the incident to police. For FV, although there were no statistically significantly differences between males and females, a higher proportion of males indicated they reported the incident to the police than females, and a higher proportion of females than males indicated a family member reported the incident to police.

Table 41 shows the proportion of incidents reported by different individuals according to incident type. While the respondent most frequently reported incidents, regardless of incident type, there were a number of significant differences. Respondents were more likely to report IPV than FV (p<0.01, Phi=-0.18) and other violence (p<0.05, Phi=0.09) incidents, while family members were more likely to report FV than IPV (p<0.01, Phi=-0.20) and other violence (p<0.001, Phi=0.31) incidents. Finally, strangers were more likely to report 'other violence' incidents than IPV (p<0.01, Phi=-0.14), but not FV (p>0.05).

As shown in Table 42 female respondents who experienced IPV were significantly more likely to indicate that they reported the most recent incident to police themselves; conversely, male respondents were more likely to indicate that a family member (which may include an intimate partner) reported the incident to police. For FV, although there were no statistically significantly differences between males and females, a higher proportion of male than females indicated they reported the incident to the police, and a higher proportion of females than males indicated a family member reported the incident to police.

Table 41 Person/s responsible for reporting the most recent incident to police (n=492)

Who reported incident	IPV % (n)	FV % (n)	Other violence % (n)	Significance level		
				IPV vs FV	IPV vs other	FV vs other
Respondent	71.3 (119)	51.0 (25)	62.0 (171)	**	*	ns
Family member[a]	15.6 (26)	34.7 (17)	7.2 (20)	**	**	***
Friend	4.2 (7)	0.0 (0)	10.5 (29)	ns[b]	*	*
Stranger	1.8 (2)	2.0 (1)	8.7 (24)	ns[b]	**	ns
Neighbour	3.6 (6)	10.2 (5)	3.6 (10)	ns[b]	ns	*
Someone else	3.6 (6)	2.0 (1)	8.0 (22)	ns[b]	ns	ns[b]

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant

a: includes when incident was reported by partner or family member involved in incident as well as other members of family not involved in the incident

b: analyses include cells with expected count <5, Fisher's Exact Test is reported

Table 42 Person/s responsible for reporting the most recent IPV and FV incident to police by sex (n=490)

Who reported incident	IPV		FV	
	% of females	% of males	% of females	% of males
Respondent	76.9 (100)	51.4 (19)**	47.2 (17)	61.5 (8)
Family member[a]	10.8 (14)	32.4 (12)***	38.9 (14)	23.1 (3)
Friend	3.8 (5)	5.4 (2)[b]	–	–[c]
Stranger	1.5 (2)	2.7 (1)[b]	2.8 (1)	0.0 (0)[a]
Neighbour	3.8 (5)	2.7 (1)[b]	8.3 (3)	15.4 (2)[a]
Someone else	3.1 (4)	5.4 (2)[b]	2.8 (1)	0.0 (0)[a]

** statistically significant at p<0.01. *** statistically significant at p<0.001

ns=non-significant.

a: includes when incident was reported by partner or family member involved in incident as well as other members of family not involved in the incident

b: analyses include cells with expected count <5, Fisher's Exact Test is reported

c: zero respondents who reported FV at the most recent incident indicated it was reported by a friend, thus no analysis could be performed

Police actions

Table 43 shows the actions police took at police-reported incidents (n=492). Police actions differed by incident type. For reported IPV incidents, police most frequently issued a police order (59.9%), removed someone (47.9%), and provided information about violence (44.9%). The most frequent police actions at FV incidents were providing information about violence (57.1%), referring support services (46.9%), and issuing a police order (49.0%). Conversely, in relation to reported 'other violence' incidents, police most frequently arrested (34.8%) and charged (37.7%) someone. Compared with other violent incidents, police were significantly more likely to issue a police order, refer to support services, provide information about violence, and organise emergency/safe accommodation following IPV (p<0.001, Phi=0.45; p<0.001, Phi=0.26; p<0.001, Phi=0.18; p<0.001, Phi=0.26) and FV (p<0.001, Phi=0.29; p<0.001, Phi=0.30; p<0.001, Phi=0.23; p<0.01, Phi=0.16) incidents. Compared with family violence, intimate partner violence incidents were more likely to involve someone being arrested (p<0.05, Phi=-0.16), removed (p<0.05, Phi=-0.16), or detained (p<0.05, Phi=-0.16), but not charged (p>0.05). Police were also more likely to attend the scene but 'take no action' for FV compared with IPV (p<0.05, Phi=0.17).

Of incidents reported to police, 8.8 percent (n=84) of IPV, 7.7 percent (n=23) of FV, and 10.6 percent (n=109) of 'other violence' incidents were subject to a court hearing (p>0.05).

Table 43 Police action(s) at most recent incidents reported to police (n=492)

Police action[b]	IPV % (n)	FV % (n)	Other violence % (n)	Significance level		
				IPV vs FV	IPV vs other	FV vs other
Someone was arrested	35.9 (60)	18.4 (9)	34.8 (96)	*	ns	*
Someone was removed	47.9 (80)	28.6 (14)	30.1 (83)	*	***	ns
Someone was detained	31.1 (52)	14.3 (7)	29.0 (80)	*	ns	*
Someone was charged	35.9 (60)	22.4 (11)	37.7 (104)	ns	ns	*
Issue of police order	59.9 (95)	46.9 (23)	14.5 (40)	ns	***	***
Referral to support services	37.7 (63)	49.0 (24)	14.9 (41)	ns	***	***
Provision of information about violence	44.9 (75)	57.1 (28)	27.2 (75)	ns	***	***
Organisation of emergency/safe accommodation	20.4 (34)	14.3 (7)	4.0 (11)	ns	***	**[c]
Attended scene, no action was taken	24.6 (41)	42.9 (21)	23.6 (65)	*	ns	**
Attended scene, perceived incident as something that 'just happened'	19.8 (33)	28.6 (14)	16.3 (45)	ns	ns	*
Other action (eg formal/non formal warning)	10.2 (17)	2.0 (1)	12.3 (34)	nsc	ns	*

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant

a: includes when incident was reported by partner or family member involved in incident as well as other members of family not involved in the incident

b: answer options 'no' and 'don't know' were collapsed for analyses

c: analyses include cells with expected count <5, Fisher's Exact Test is reported

Non-reported incidents

The most frequently reported reason for not reporting an incident to police was: 'Did not regard as a serious offence' (46.4%, n=829), followed by: 'I felt I could deal with it myself' (40.9%, n=730). Table 44 below presents the reasons incidents were not reported to police. A significantly greater proportion of IPV incidents were not reported due to shame/embarrassment, not wanting to ask for help, and respondents believing they could deal with it themselves, compared with FV (p<0.01, Phi=-0.09; p<0.001, Phi=-0.10; p<0.001, Phi=-0.13). Cultural reasons and being too young at the time of incident were reasons more frequently cited for not reporting FV compared with IPV (p<0.001, Phi=0.10; p<0.001, Phi=0.22). Compared with other violence, a significantly greater proportion of IPV (p<0.001, Phi=0.19; p<0.001, Phi=0.15; p<0.001, Phi=0.15; p<0.01, Phi=0.08; p<0.001, Phi=0.16) and FV (p<0.01, Phi=0.08; p<0.001, Phi=0.16; p<0.05, Phi=0.07; p<0.001, Phi=0.12) incidents were not reported due to shame/embarrassment, not wanting the other person/s arrested, not knowing what to do, and fear of the other individual/negative consequences.

Table 44 Reasons most recent incidents were not reported to police (n=1,786)

Reason	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
Shame/embarrassment	27.1 (213)	18.4 (46)	12.0 (90)	**	***	**
Did not want other person/s arrested	16.9 (133)	18.0 (45)	6.9 (52)	ns	***	***
Did not regard it as a serious offence	45.4 (356)	43.2 (108)	48.6 (365)	ns	ns	ns
Did not think the police could do anything	19.7 (155)	21.1 (53)	23.0 (173)	ns	ns	ns
Did not think the police would do anything	22.0 (173)	20.8 (52)	25.0 (188)	ns	ns	ns
Did not think I would be believed	9.4 (74)	7.6 (19)	5.7 (43)	ns	**	ns
Did not know what to do	14.5 (114)	14.0 (35)	9.3 (70)	ns	**	*
Fear of legal processes	8.4 (66)	5.2 (13)	4.8 (36)	ns	**	ns
Cultural reasons	1.9 (15)	6.0 (15)	3.2 (24)	***	ns	*
Language reasons	0.5 (4)	1.2 (3)	1.1 (8)	ns[a]	ns	ns[a]
Did not want to ask for help	15.5 (122)	7.6 (19)	6.4 (48)	***	***	ns
Felt I could deal with it myself	47.9 (376)	32.8 (82)	36.2 (272)	***	***	ns
Fear of the other person/s/other negative consequences	17.7 (139)	15.6 (39)	7.3 (55)	ns	***	***
Reported to other body	0.0 (0)	0.8 (2)	2.0 (15)	ns[a]	***	ns[a]
I was a child/too young	0.0 (0)	6.4 (16)	1.9 (14)	***[a]	***	***
Other	2.8 (22)	4.7 (35)	3.2 (8)	ns	ns	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant

a: analyses include cells with expected count <5, Fisher's Exact Test is reported

Person and incident characteristics by police involvement

Respondent and incident characteristics of incidents that were reported to police (21.6%, n=492) compared with those that were not (78.4%, n=1786) are presented in Table 45 and Table 46.

A few significant differences were evident by demographic characteristics of respondents (age, location, and disadvantage) and police involvement in the most recent incident. A significantly lower proportion of 18 to 25 year olds reported 'other violence' incidents to police, and a significantly lower proportion of 66-plus year olds reported IPV incidents to police. No significant differences existed between the respondents' location (regional vs metropolitan) and whether an incident was reported to police across each violence type. A significantly lower proportion of IPV incidents were reported to police where respondents lived in the fifth (least disadvantaged) SEIFA quintile.

For 'other violence' incidents only, respondents were less likely to have experienced a similar incident in the past with the same person(s) when the incident was reported to police than when the incident was not reported to police. Across each violence type a significantly higher proportion of incidents that were reported to the police involved more than one other person (ie three or more people) than incidents not reported to the police. Further, across each violence type a significantly higher proportion of incidents reported to police were witnessed by children compared with incidents not reported to police.

Whether the incident was reported to police was not significantly associated with location where IPV incidents took place. For other violence, a higher proportion of incidents that were reported to the police occurred within the respondents' home than incidents that were not reported to police, and for FV a higher proportion of incidents that were reported to police took place outside than incidents not reported to the police.

Intimate partner violence and 'other violence' incidents that were reported to the police were 1.45 (95%CI=1.03–2.05) and 1.46 (95%CI=1.10–1.95) times, respectively, more likely to involve alcohol and 1.85 (95%CI=1.19–2.89) and 3.76 (95%CI=2.37–5.95) times, respectively, more likely to involve drugs than incidents that were not reported to police. Family violence incidents reported to police were not more likely to involve alcohol, but were significantly more likely to involve drugs (OR=3.05; 95%CI=1.41–6.63).

Regarding the type of violence, IPV incidents reported to police were significantly more likely to involve either physical violence or intimidation, and the respondent was more likely to report any injuries, physical injuries, or psychological injuries than incidents not reported to police. Family violence incidents reported to the police were significantly more likely to involve intimidation and the respondent was more likely to report any or physical injuries. 'Other violence' incidents were significantly more likely to involve physical violence, and the respondent was more likely to report any injuries, physical injuries, or psychological injuries, than incidents not reported to police. 'Other violence' incidents reported to police were significantly less likely to involve either verbal aggression or unwanted sexual attention than incidents not reported to the police.

Table 45 Respondent and incident characteristics according to police involvement at most recent incident (n=2,278)

	IPV Police involved		FV Police involved		Other violence Police involved	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Age group (years)						
18–25	16.6 (130)	14.4 (24)	28.4 (71)	34.7 (17)	21.8 (164)	14.9 (41)*
25–35	9.6 (75)	13.8 (23)	10.4 (26)	6.1 (3)	11.3 (85)	12.0 (33)
36–50	22.9 (180)	28.1 (47)	18.0 (45)	20.4 (10)	16.0 (120)	15.9 (44)
51–65	34.4 (270)	34.1 (57)	27.2 (68)	26.5 (13)	30.9 (232)	37.0 (102)
66+	16.6 (130)	9.6 (16)*	16.0 (40)	12.2 (6)	20.0 (150)	20.3 (56)
From a regional location[cd]	25.0 (194)	28.5 (47)	17.4 (42)	26.5 (13)	24.4 (179)	20.6 (55)
SEIFA disadvantage quintile[d]						
1 (most disadvantage)	20.8 (163)	25.7 (43)	16.5 (41)	26.5 (13)	21.8 (163)	23.2 (64)
2	24.3 (19)	21.0 (35)	20.9 (52)	24.5 (12)	22.2 (166)	19.9 (55)
3	17.8 (139)	24.0 (40)	22.1 (55)	16.3 (8)	17.8 (133)	20.7 (57)
4	22.6 (177)	21.0 (35)	21.7 (54)	18.4 (9)	19.9 (149)	19.9 (55)
5 (least disadvantage)	14.6 (114)	8.4 (14)*	18.9 (47)	14.3 (7)	18.4 (138)	16.3 (45)
Experienced incidents with same person(s) before	80.4 (631)	77.8 (130)	76.4 (191)	71.4 (35)	40.9 (307)	30.8 (85)**
Involved more than 1 other person(s)	8.8 (69)	23.4 (39)***	23.9 (59)	55.1 (27)***	32.9 (247)	52.5 (145)***
Child/ren witnessed	16.1 (126)	35.3 (59)***	7.6 (19)	22.4 (11)***	6.1 (46)	12.7 (35)***
Other family witnessed	5.9 (46)	10.8 (18)*	52.8 (132)	53.1 (26)	7.3 (55)	12.3 (34)*
Location						
Respondent home	76.3 (599)	71.9 (120)	61.2 (153)	61.2 (30)	9.3 (70)	16.3 (45)***
Perpetrator home	9.4 (74)	10.2 (17)	18.8 (47)	12.2 (6)	2.5 (19)	1.8 (5)
Other person home	3.3 (26)	4.8 (8)	12.4 (31)	12.2 (6)	5.3 (40)	4.3 (12)
Outdoors	3.4 (27)	5.4 (9)	2.4 (6)	10.2 (5)[a]*	26.0 (195)	30.1 (83)
Workplace	0.8 (6)	1.8 (3)[a]	1.2 (3)	0.0 (0)[a]	20.5 (154)	17.0 (47)
Inside licensed premises	0.4 (3)	1.8 (3)[a]	0.8 (2)	0.0 (0)[a]	8.3 (62)	5.1 (14)
Outside licensed premises	0.5 (4)	0.6 (1)[a]	0 (0)	0 (0)[b]	9.4 (26)	6.7 (50)
Private vehicle	3.4 (27)	1.8 (3)	0.4 (1)	2.0 (1)[a]	2.5 (19)	4.0 (11)
Public transport	0.1 (1)	0.6 (1)[a]	0.4 (1)	0.0 (0)[a]	2.9 (8)	4.8 (36)
Sporting venue	0.1 (1)	0.0 (0)[a]	0.0 (0)	0.0 (0)[b]	1.7 (13)	2.2 (6)
School/university	0.3 (2)	0.0 (0)[a]	0.4 (1)	0.0 (0)[a]	6.1 (46)	1.1 (3)
Online/over phone	0.9 (7)	0.0 (0)[a]	0.8 (2)	2.0 (1)[a]	1.1 (8)	0.4 (1)[a]

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

b: cross-tabulation could not be performed as no cases within 'yes'

c: versus a metropolitan location

d: n=2273

Table 46 Type of violence experienced, injuries received, and substance involvement according to police involvement at the most recent incident (n=2,278)

	IPV Police involved		FV Police involved		Other violence Police involved	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Incident involved alcohol	32.1 (252)	40.7 (68)*	28.8 (72)	32.7 (16)	30.5 (229)	39.1 (108)**
Incident involved drugs	11.3 (89)	19.2 (32)**	9.6 (24)	24.5 (12)**	4.9 (37)	16.3 (45)***
Violence type						
Physical	43.4 (341)	74.3 (124)***	45.6 (114)	49.0 (24)	69.9 (193)	42.7 (321)***
Sexual	9.8 (77)	10.8 (18)	8.8 (22)	14.3 (7)a	7.3 (55)	8.0 (22)
Verbal aggression	73.2 (575)	67.1 (112)	62.0 (155)	63.3 (31)	47.8 (359)	31.5 (87)***
Intimidation	40.6 (319)	49.7 (83)*	26.8 (67)	40.8 (20)*	28.2 (212)	26.8 (74)
Unwanted sexual attention	7.1 (56)	7.2 (12)	4.8 (12)	2.0 (1)[a]	6.9 (52)	3.6 (10)*
Psychological/emotional	3.2 (25)	3.0 (5)	2.4 (6)	0.0 (0)[a]	0.3 (2)	0.4 (1)[a]
Injury type						
Any	19.5 (153)	54.5 (91)***	15.2 (38)	36.7 (18)***	14.8 (111)	44.6 (123)***
Physical	18.7 (147)	52.1 (87)***	13.6 (34)	36.7 (18)***	12.9 (97)	42.4 (117)***
Psychological/emotional	11.0 (86)	37.1 (62)***	9.6 (24)	18.4 (9)	5.3 (40)	15.6 (43)***

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

Help-seeking behaviours

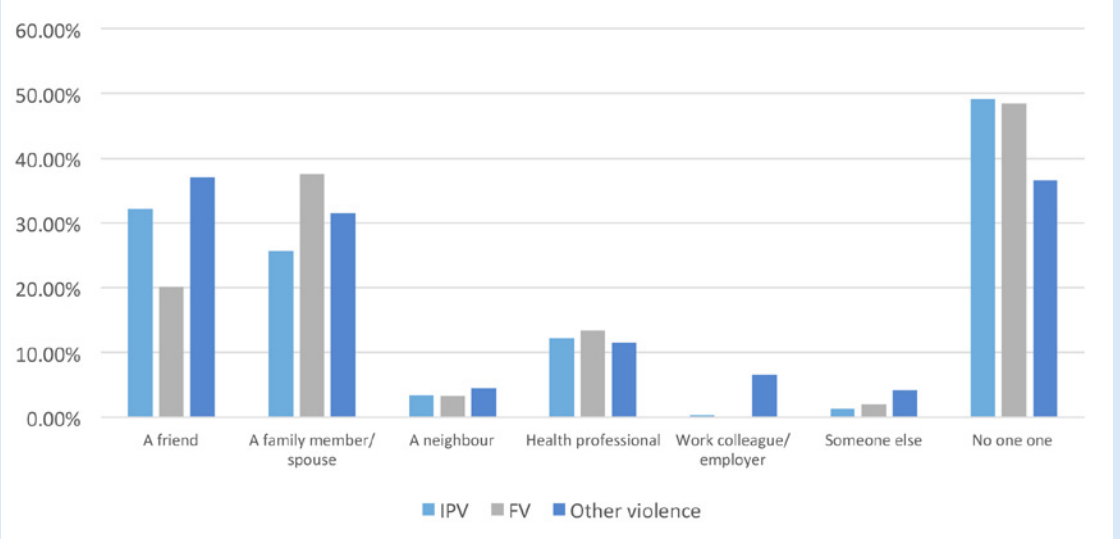
Reporting violence

Of the most recent incidents, 988 (43.4%) were reported to someone other than police. As shown in Figure 15, IPV incidents were significantly more likely than FV incidents to have been reported to a friend (p<0.001, Phi=-0.11), and FV were more likely than IPV to have been reported to another family member (p<0.001, Phi=-0.11). 'other violence' incidents were more likely to be reported to a friend (p<0.05, Phi=-0.05; p<0.001, Phi=-0.15) or work colleague/employer (p<0.001, Phi=-0.17; p<0.001, Phi=-0.12) than IPV and FV, and more likely to be reported to a family member than IPV (p<0.01, Phi=-0.06).

Intimate partner violence and family violence were significantly more likely to have been reported to no-one (else) than 'other violence' incidents (p<0.001, Phi=0.13; p<0.001, Phi=0.10). The effect size of the difference in reporting to no-one else increased when excluding participants who reported the most recent incident to police from this group, with 32.3 percent of other violence, compared with 46.5 percent of FV and 46.1 percent of IPV incidents reported to no-one at all (p<0.001, Phi=0.14; p<0.001, Phi=0.12).

A significantly higher proportion of males who experienced IPV and FV told 'no-one' about the most recent incident (58.6%; 60.2%) compared with females (46.0%; p<0.001, Phi=-0.11; 42.3%, p<0.01, Phi=-0.17). No significant difference was evident in the proportion of males and females who told a friend, neighbour, health professional, or a work colleague/employer, but a higher proportion of females who experienced IPV (27.8 vs 19.4%) or FV, told a family member (43.4% vs 26.2%).

Figure 15 Person/s to whom the respondent reported the most recent IPV, FV and other incident (n=988)



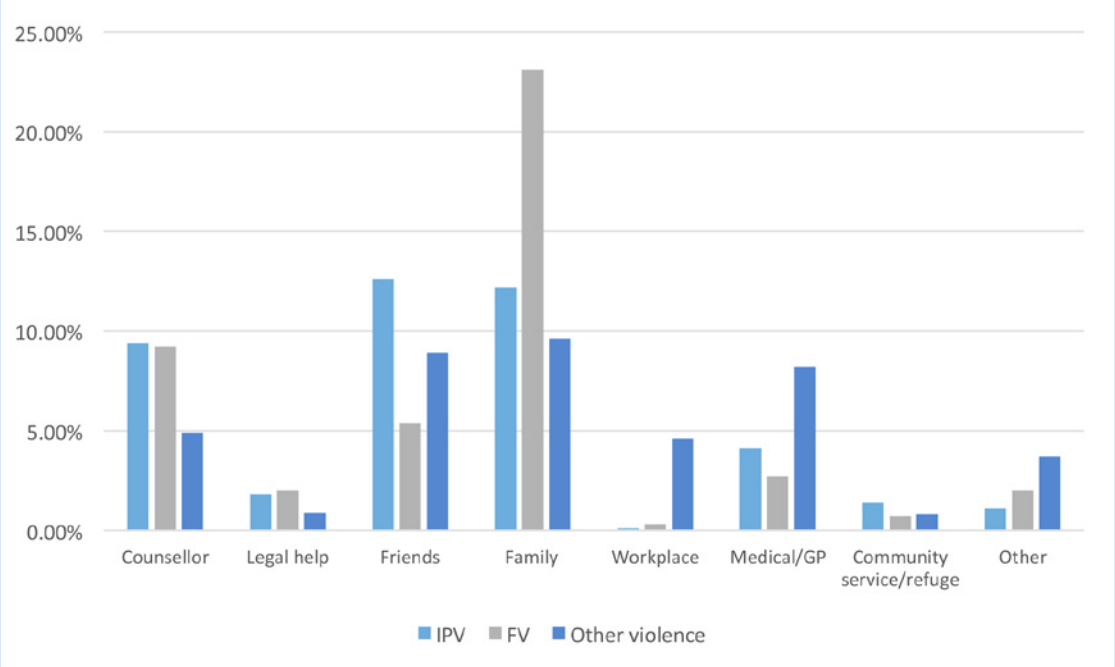
Help-seeking

A little over a third (37.6%, n=849) of respondents sought help from someone following the most recent incident—see Figure 16. An open-ended question asked respondents: 'Who did you seek help from after the most recent incident?' Responses were coded as: 'psychologist or counsellor', 'legal help', 'friends (including neighbours)', 'family', 'workplace', 'medical/GP', 'community service or refuge', 'other' and 'none'. Twenty-three respondents did not provide answers that could be coded into a category, or indicated they were unsure or did not remember if they sought help from anyone. They were coded as missing data. The total analytic sample for this question was n=2,255. For several reasons researchers chose not to categorise participants as either victims or perpetrators of the most recent incident they experienced. Researchers obtained only reports of experiences of violence from the respondent, without obtaining descriptions of the same incident with the other person(s) involved to verify the respondent's account. While the survey was anonymous, the highly subjective nature of recounting a violent experience is recognised, especially those relating to FV and IPV. The questions that could be used to categorise victimisation and perpetration, only refer to violence of a physical nature (ie 'Did you hit the other person[s]?' and 'Were you hit by the other person[s]?') or verbal nature (eg 'Did you yell or swear at the other person[s]?' and 'Were you yelled or sworn at by the other person[s]'). They do not capture more covert types of violence or behaviours that cannot be characterised as a specific 'incident' (eg controlling behaviours over extended periods of time). Seventy-three respondents who reported IPV answered 'no' to perpetrating or being the victim of all four of the behaviours listed. The question—'Who instigated (started) the most recent incident?'—was also deemed an unreliable (ie highly subjective) classification tool, with 92.8 percent of respondents indicating the 'other person(s)' instigated the incident, 4.7 percent of respondents indicating they instigated the incident, and 1.1 percent of respondents indicating it was instigated mutually. Researchers have questioned respondents only about their most recent violent experience, and cannot infer that such an incident indicates a pattern of behaviours.

No significant differences are evident between IPV and FV incidents regarding seeking help from a psychologist/counsellor, legal help, workplace, medical/GP, or community service or refuge (ps >0.05). Only one respondent who reported IPV and one respondent who reported FV sought help from within the workplace. Respondents were more likely to seek help from friends following IPV ($p<0.001$, Phi=-0.10), and family following FV ($p<0.001$, Phi=0.13). Compared with other violence, these IPV or FV respondents were more likely to seek help from a counsellor or psychologist ($p<0.001$, Phi=0.09; $p<0.01$, Phi=0.07), family for FV only ($p<0.001$, Phi=0.17), friends for IPV only ($p<0.01$, Phi=0.06) but less likely to seek help from the workplace ($p<0.001$, Phi=-0.15; $p<0.001$, Phi=-0.09) or a medical service/GP ($p<0.001$, Phi=-0.08; $p<0.001$, Phi=-0.09).

No significant differences existed between intimate partner violence, family violence and other violence in the proportion of respondents who did not seek help from anyone, with 62.0 percent, 58.6 percent, and 63.7 percent of respondents indicating they sought help from no-one, respectively (ps>0.05). Compared with females, males who reported IPV (71.2% versus 59.1%; p<0.001, Phi=-11) and FV (72.5% vs 51.3%, p<0.001, Phi=-0.20) were significantly more likely to report that they sought help from no-one. Compared with females, males who reported FV were significantly less likely to seek help from a psychologist/counsellor (11.9% vs 3.9%, p<0.05, Phi=0.13) and family (29.5% vs 10.8%, p<0.001, Phi=0.20). Compared with females, males who reported IPV were significantly less likely to seek help from friends (14.1% vs 7.5%, p<0.01, Phi=0.08) and family (13.9% vs 7.1%, p<0.01, Phi=0.09), see Figure 16 below.

Figure 16 Support services accessed after the most recent incident (n=849)

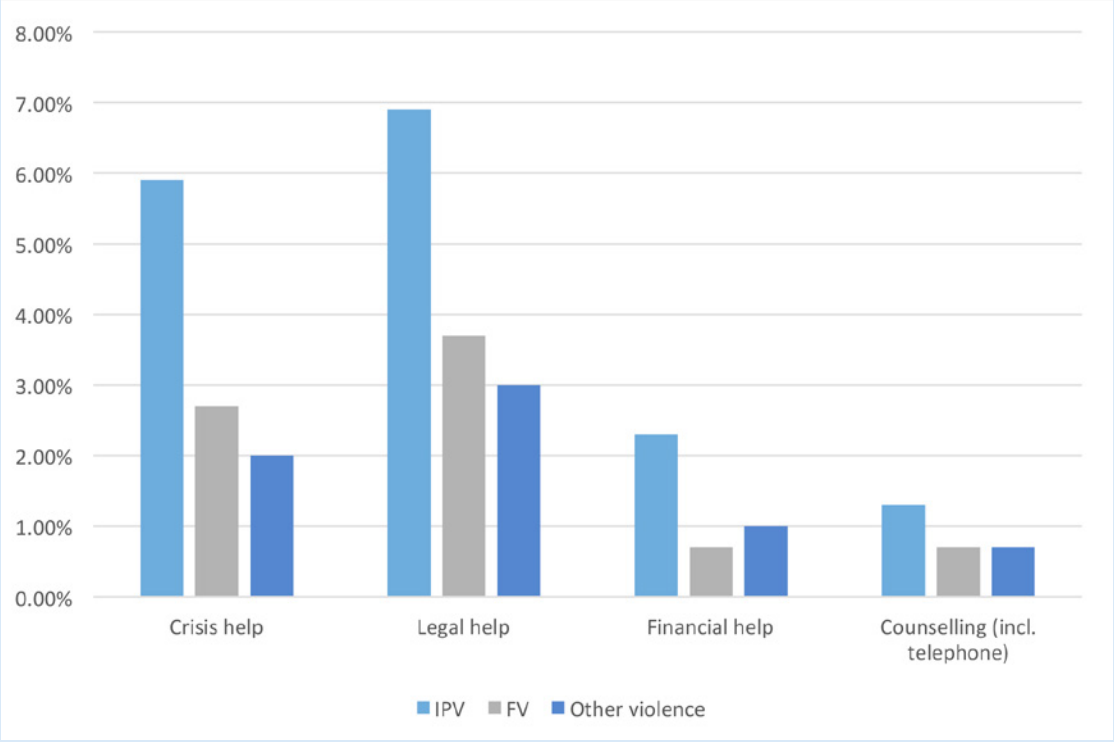


Support services

Few respondents (9.6%, n=219) accessed a support service following the most recent incident (see Figure 17). Response options were: 'none', 'crisis help', 'legal help' 'financial help' and 'any other support service including telephone helpline'. Responses indicating a telephone/website helpline or counselling service (eg lifeline, AA) were coded as 'counselling (including telephone)'. Responses that could not be coded into a category were coded as 'other' but were omitted from the graph/analyses due to too few cases (n=4). Not included in the graph was 'none' as this was the overwhelming response from respondents (n=2,059, 90%). This would have reduced the interpretability of the graph. Respondents were more likely to seek 'crisis' (p<0.05, Phi=-0.06; p<0.001, Phi=0.10) and legal (p<0.05, Phi=-0.06; p<0.001, Phi=0.09) support following an IPV incident than after FV or 'other violence' incidents, and more likely to use 'financial help' (p<0.05, Phi=0.05) following IPV rather than 'other violence' incidents. No significant differences were evident in the type of support services accessed following FV and 'other violence' incidents (ps >0.05).

No significant differences existed between males and females who experienced IPV and FV at the most recent incident, and the proportion who reported seeking a help service of any kind (legal help, crisis help, financial help, counselling). For family violence in particular, the number of respondents who reported seeking help at a support service was very low (n=21, 7.0%).

Figure 17 Types of support services accessed in relation to the most recent IPV, FV and other violence incident (n=2,278)



Summary

Altogether, 64.8 percent (n=1,471) of respondents engaged in help-seeking behaviour (including reporting to the police) following the most recent incident. A smaller proportion of respondents sought help following IPV (59.1%) and FV (60.2%) than 'other violence' incidents (71.4%). This difference was significant, p<0.001, Phi=-0.13; p<0.001, Phi=-0.10. Females who reported IPV (62.4% vs 49.1%, p<0.001, Phi=0.11) and FV (67.9% vs 45.6%, p<0.001, Phi=0.22) were significantly more likely than males to engage in any help-seeking behaviour following the most recent incident.

Alcohol use

Overall, alcohol was consumed (by one or more individuals) at 32.7 percent (n=745) of incidents. No significant differences were evident between incident type and alcohol involvement; alcohol was consumed at 33.6 percent of IPV, 29.4 percent of FV, and 32.8 percent of 'other violence' incidents.

Alcohol was consumed by the respondent at 11.9 percent of incidents, by other person(s) at 28 percent of incidents, and by respondent and other person(s) at 7.2 percent of incidents (see Table 47). Respondents were less likely to consume alcohol at IPV than at 'other violence' (p<0.001, Phi=-0.09) incidents, and more likely to consume alcohol at IPV than at FV (p<0.001, Phi=-0.10) incidents. No significant differences existed between IPV and FV regarding alcohol consumption by other person(s); however, other person(s) were more likely to consume alcohol at IPV incidents than at 'other violence' incidents (p<0.05, Phi=0.05). Given the significantly greater proportion of those who reported other violent incidents (16.8%) that did not know about the other person's alcohol use compared those who reported IPV (2.4%) and FV (6.4%), the proportion of alcohol-related other incidents might be underestimated. Given this question asks about perception of the other person's alcohol use, it is also plausible that these figures might also overestimate the other person's use of alcohol. Compared with family violence, both respondent and other person(s) were more likely to consume alcohol at IPV (p<0.001, Phi=-0.11) and other violence (p<0.001, Phi=-0.13) incidents.

Table 47 Alcohol use at the most recent incident (n=2,278)

Alcohol Involvement	IPV % (n)	FV % (n)	Other violence % (n)	Significance level		
				IPV vs FV	IPV vs other	FV vs other
Respondent[b] (any)	10.2 (97)	3.3 (10)	16.1 (165)	***	***	***
I was drinking but not drunk	6.7 (64)	2.0 (6)	11.4 (117)	**	***	***
I was drunk	3.2 (30)	0.3 (1)	4.3 (44)	**	ns	***
I believe alcohol was added to my drink without my consent	0.5 (5)	1.0 (3)	0.5 (5)	ns[a]	ns[a]	ns[a]
Other person[c] (any)	30.5 (290)	27.1 (81)	25.9 (266)	ns	*	ns
The other person(s) had been drinking but wasn't drunk	10.8 (103)	9.4 (28)	8.1 (83)	ns	*	ns
The other person(s) was drunk	19.6 (187)	17.7 (53)	18.0 (185)	ns	ns	ns
Both consumed alcohol	7.0 (67)	1.0 (3)	9.2 (94)	***	ns	***
Either consumed alcohol	33.6 (320)	29.4 (88)	32.8 (337)	ns	ns	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant

a: analyses include cells with expected count <5, Fisher's Exact Test is reported

b: three respondents indicated that they were drunk and that they believe alcohol was added to their drink without their consent

c: two respondents indicated that the other person(s) were both 'drinking but not drunk' and 'drunk' and involved multiple individuals other than the respondent

Alcohol use demographic differences

No significant differences were evident in mean age between respondents who reported alcohol consumption at the most recent incident (M=46 years, SD=17.7 years) and those who did not (M=48 years, SD=17.74 years, p>0.05). A significantly greater proportion of male respondents (16.0%, n=171) and male other person(s) (30.0%, n=540) consumed alcohol compared with female respondents (8.2%, n=99) and female other person(s) (20.5%, n=71), respectively (p<0.001). This was among (most recent) incidents involving either males or females (not both), n=2,1502

Comparing incident types revealed that these differences were statistically significant only for IPV incidents. Specifically, for IPV-only male respondents (16.3%, n=37) and male other person(s) (33.9%, n=250) were significantly more likely to consume alcohol than female respondents (8.2%, n=59) and female other person(s) (19.1%, n=36), respectively (p<0.001).

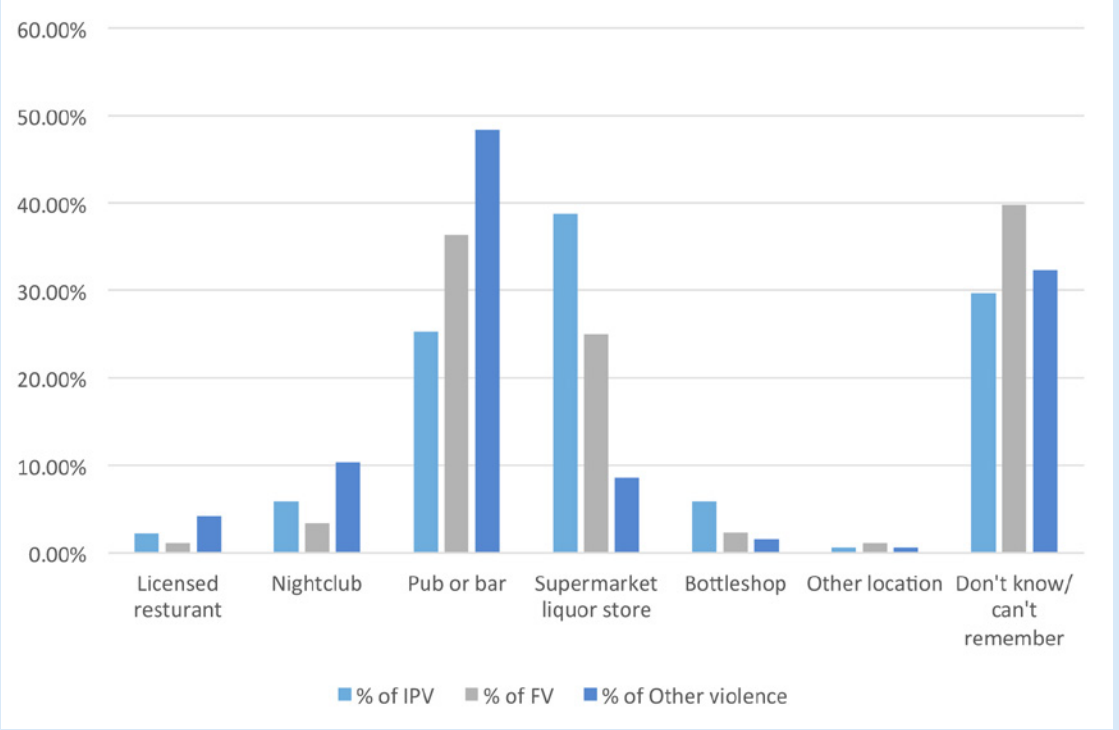
Place of alcohol purchase and consumption

Respondents who reported alcohol consumption at the most recent incident (n=745) were asked to indicate where the alcohol was purchased and consumed, and the distance of the place of from the location of the incident and the respondent's home.

Place of purchase

Figure 18 shows the place of purchase of alcohol consumed at the most recent incident. Alcohol consumed at FV and 'other' incidents, was most frequently purchased from a pub or bar (36.4% and 48.1%, respectively). Alcohol involved in IPV incidents was significantly more likely to be bought at a supermarket liquor store (37.2%), compared with alcohol involved in FV (25.0%, n=22; p<0.05, Phi=-0.10) and 'other violence' (8.6%, n=29; p<0.001, Phi=0.34) incidents.

Figure 18 Alcohol place of purchase (n=745)

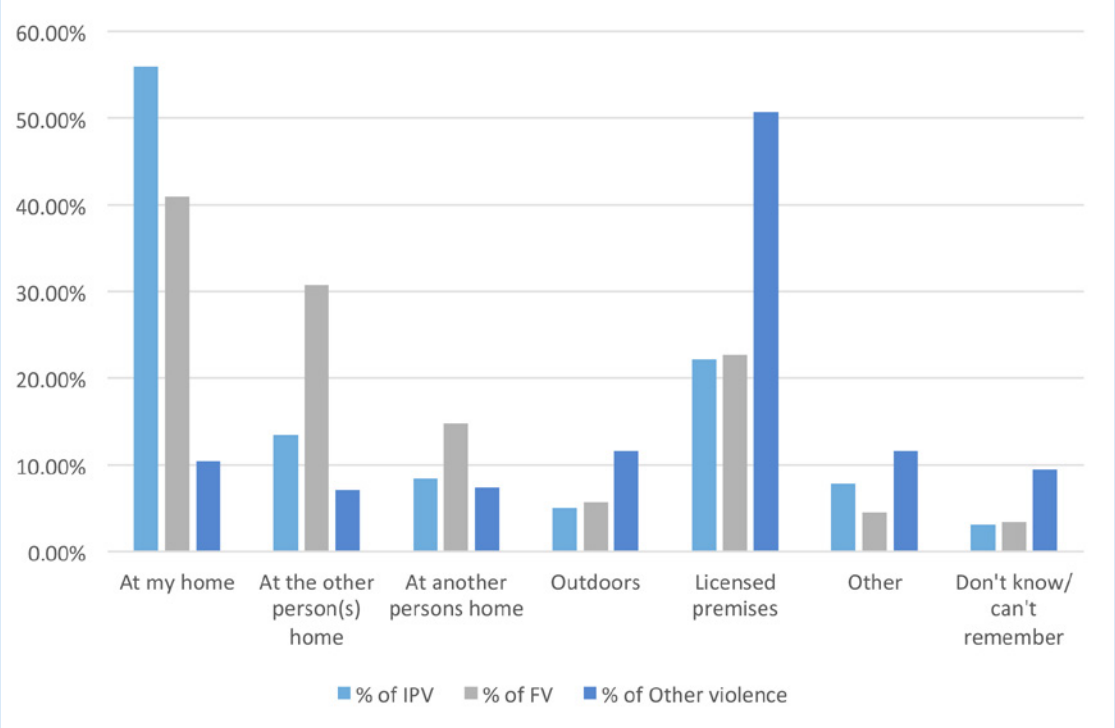


Alcohol place of consumption

Significant differences were evident in the place of alcohol consumption across incident types (see Figure 19). Alcohol involved in IPV and FV incidents was most frequently consumed at the respondent's home, with 55.9 percent and 40.9 percent of respondents who reported an alcohol-related incident indicating this location, respectively, compared with 10.4 percent of respondents who reported an alcohol-related other violence incident ($p<0.001$, Phi=0.49; $p<0.001$, Phi=0.33). The proportion of respondents who reported drinking at home was significantly higher for IPV compared with FV ($p<0.05$, Phi=-0.12); while the proportion of respondents who reported alcohol was consumed at 'the other person(s) home' was significantly higher for FV (30.7%) compared with IPV (13.4%; $p<0.001$, Phi=0.19). No other significant differences were evident in the location of drinking for intimate partner violence compared with family violence.

Alcohol involved in 'other violence' incidents was most frequently consumed at licensed premises, followed by outdoors.

Figure 19 Place of consumption of alcohol involved in most recent incident* (n=745)

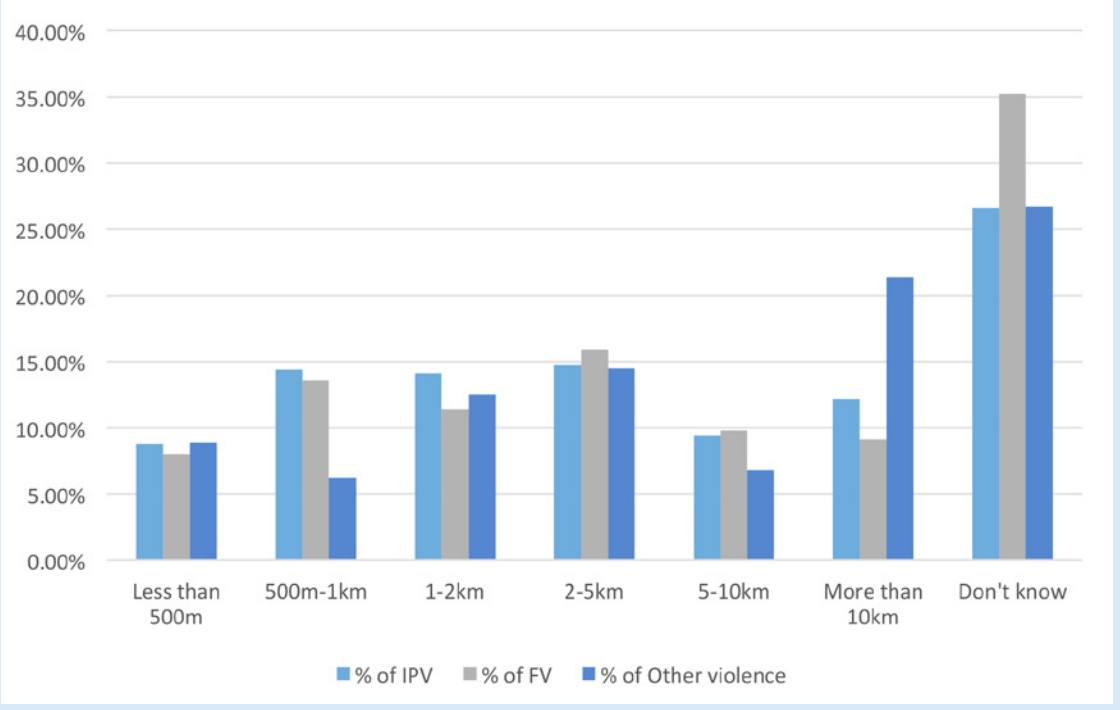


* locations that accounted for less than 5 percent of the data (ie other [1.2%], private vehicle [2.8%], sporting venue [1.7%], my workplace [1.6%], in an institution [0.5%], on public transport [1.5%] were combined to create the 'other' category.

Distance from respondent's home

Alcohol consumed at IPV and FV incidents was significantly most likely to be purchased 500 metres to one kilometre from the respondent's home (see Figure 20). In contrast, alcohol consumed at 'other violence' incidents was most often bought from a location more than 10 kilometres from the respondent's home. This excludes respondents who indicated that they 'did not know' the distance (n=206).

Figure 20 Alcohol place of purchase: distance from respondent home (n=745)

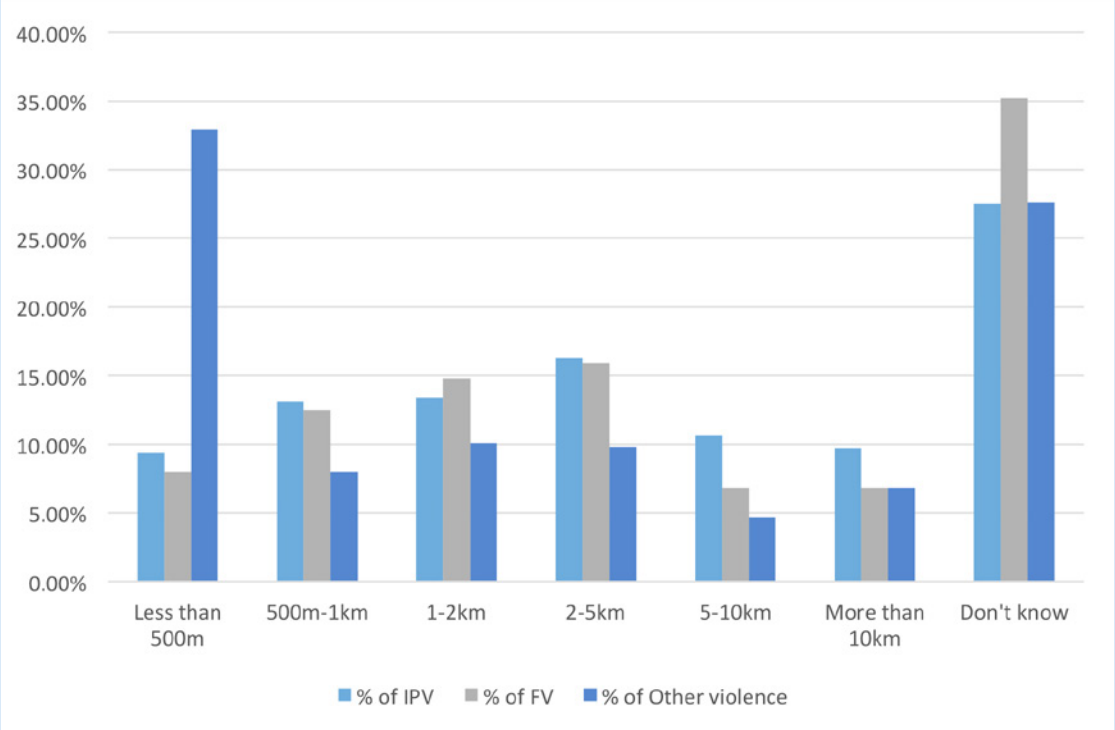


Distance from incident location

Consistent with the differences found in relation to place of alcohol purchase and consumption, there were differences in the distance of place of purchase from incident location across incidents. Compared with IPV and FV, alcohol involved in 'other violence' incidents was most often purchased 500 metres or less from the incident location. This is consistent with the finding that alcohol involved in 'other violence' incidents was often purchased at pubs/clubs and licensed premises.

Similar trends were also found in relation to the distance of place of purchase from respondent's home and location of IPV and FV incidents. In cases of alcohol-related IPV and FV incidents, alcohol was predominantly consumed at the respondent's home. Most of these incidents also took place here. The distance between place of alcohol purchase and incident location was not significantly different for IPV and FV incidents (ps>0.05), see Figure 21 below.

Figure 21 Alcohol place of purchase: distance from incident location (n=745)



Figures 22 and 23 show the frequency of IPV and 'other violence' incidents within each distance range from the place of purchase to where the incident took place. This graph was not produced for FV incidents, as there were too few cases within each cell to allow meaningful interpretation.

Across each distance range, alcohol consumed at IPV incidents was most frequently bought from a supermarket liquor store followed by a pub or bar. For other violence, across each distance range, alcohol consumed was most frequently purchased at a pub or bar. Regardless of the distance, respondents who experienced IPV were most likely to have purchased the alcohol from a supermarket liquor store, and respondents who experienced other violence were most likely to have purchased the alcohol from a pub or bar.

Figure 22 Frequencies of distance from purchase location to where incident took place—IPV (n=282)

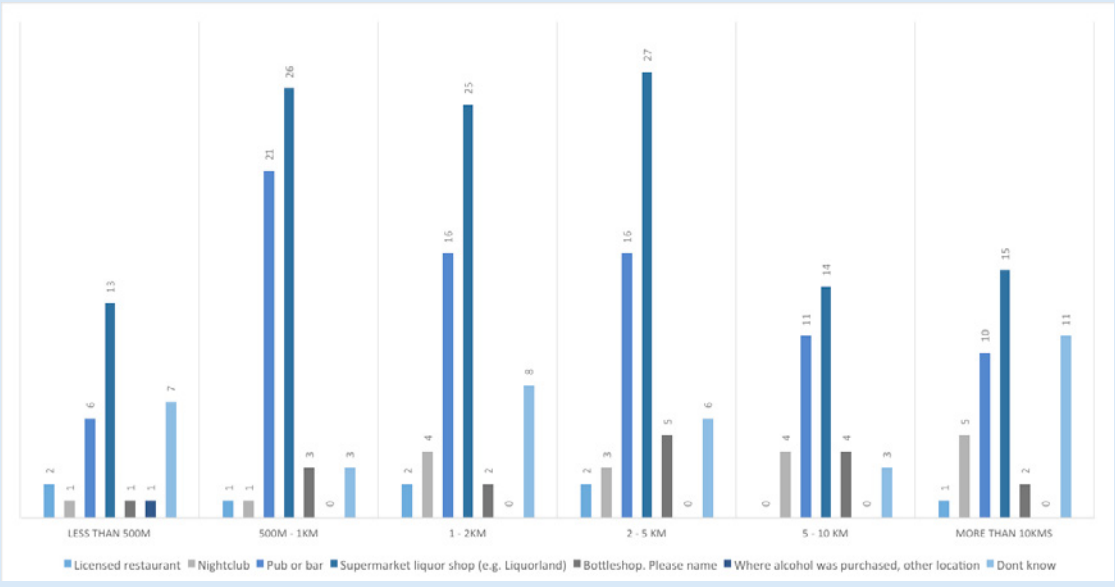
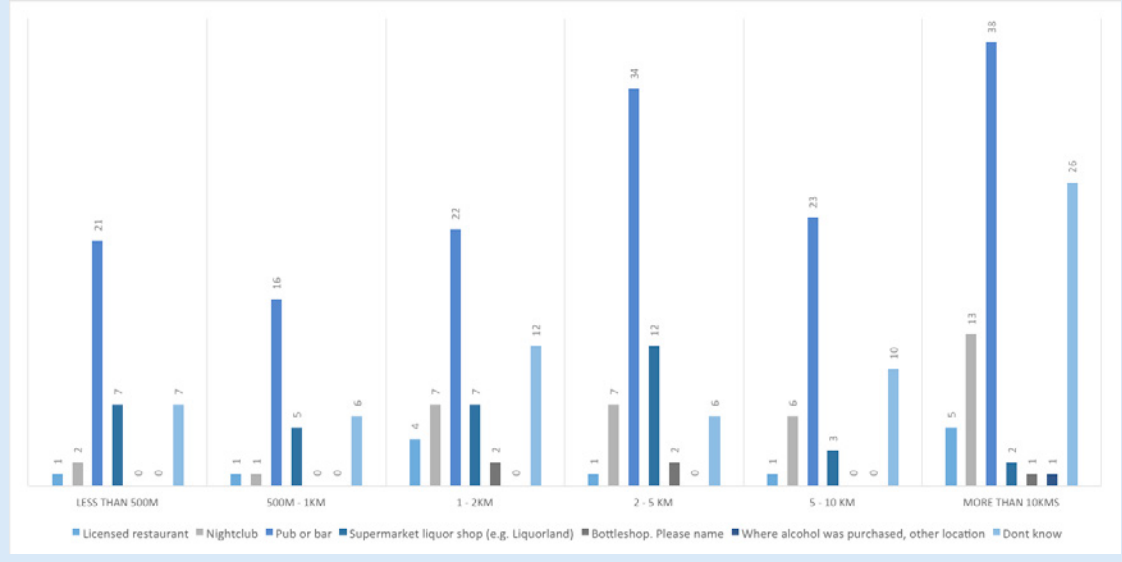


Figure 23 Frequencies of distance from purchase location to where incident took place—other violence (n=312)



Drug use

Overall, drugs were used (by one or more individuals) in 10.5 percent (n=239) of most recent incidents, including 12.7 percent of intimate partner violence, 12.0 percent of family violence, and 8.0 percent of 'other violence' incidents. While no significant difference was evident in drug use between IPV and FV incidents ($p>0.05$), drugs were more likely to be used at either IPV or FV compared with 'other violence' incidents ($p<0.05$–001).

Table 48 shows the nature of drug use according to incident type. Drugs were used by the respondent in 2.3 percent of incidents, by other person(s) in 9.1 percent of incidents, and both respondent and other person(s) in one percent of incidents. No significant differences existed between FV and IPV in drug use by either respondent or the other person(s) (ps>0.05).

Compared with 'other violence' incidents, both IPV and FV were significantly more likely to involve the other person(s) using (any) drugs, and for respondents to have used drugs without being heavily affected by drugs. The smaller proportion of 'other violence' incidents with indicated drug use may be due to the greater proportion of 'other violence' incidents in which the other person/s drug use was unknown (36.6%), compared with 6.1 percent of IPV and 12.0 percent of FV ($p<0.001$). Thus, although a significantly greater proportion of IPV and FV incidents involved drug use of the other person(s) compared with other violence, it may be that drug use of other person(s) involved in 'other violence' incidents were not known.

Table 48 Drug use at the most recent incident (n=2,278)

How other drugs were involved	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
Respondent[b] (any)	2.7 (26)	2.0 (6)	2.0 (21)	ns	ns	ns
I had been taking drugs but wasn't heavily affected	2.0 (19)	2.0 (6)	0.6 (6)	ns	**	*[a]
I was heavily affected by drugs	0.5 (5)	0.0 (0)	0.6 (6)	ns[a]	ns	ns[a]
I believe drugs were added to my drink without my consent	0.4 (4)	0.0 (0)	1.0 (10)	nsa	ns	ns[a]
Other person (any)	11.6 (110)	10.7 (32)	6.4 (66)	ns	***	*
The other person(s) had been taking drugs but weren't heavily affected	6.8 (65)	5.4 (16)	2.1 (22)	ns	***	**
The other person(s) were heavily affected by drugs	4.7 (45)	5.4 (16)	4.3 (44)	ns	ns	ns
Both consumed other drugs	1.6 (15)	0.7 (2)	0.5 (5)	ns[a]	*	ns[a]
Either consumed other drugs	12.7 (121)	12.0 (36)	8.0 (82)	ns	***	*

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001. ns=non-significant

a: analyses include cells with expected count <5, Fisher's' Exact Test is reported

b: three respondents indicated that they were heavily affected by other drugs and that they believe drugs were added to their drink without their consent

Drug use—demographic differences

Respondents who used drugs at IPV (M=40.8 years, SD=15.2 years) and other violent incidents (M=44.8 years, SD=17.6 years) were significantly younger than those who did not (IPV: M=49 years, SD=16.6 years, p<0.001; other violence: M=48.5 years, SD=18.3 years, p<0.05). No significant differences were evident in the overall proportion of male and female respondents who used drugs at the most recent incident (1.7%, n=18, 2.8%, n=34, respectively, p>0.05), or the proportion of male and female other person(s) who used drugs at the most recent incident27F (9.5%, n=172, 6.3%, n=22, p>0.05). This was among (most recent) incidents involving males or females (not both) n=2,150.

Significant differences were evident in the gender of respondent and other person(s) who used drugs across incident type. In relation to 'other violence' incidents, a greater proportion of female (3.5%) compared with male respondents (1.4%) used drugs at the most recent incident (p<0.05, Phi=0.07). For IPV only, a significantly greater proportion of male other person(s) (12.9%, n=95) used drugs compared with female other person(s) (6.9%, n=13) (p<0.05, Phi=-0.07). This interaction is shown in Figures 24 and 25.

Figure 24 Proportion of males and female respondents who used drugs at the most recent incident (n=2,150)

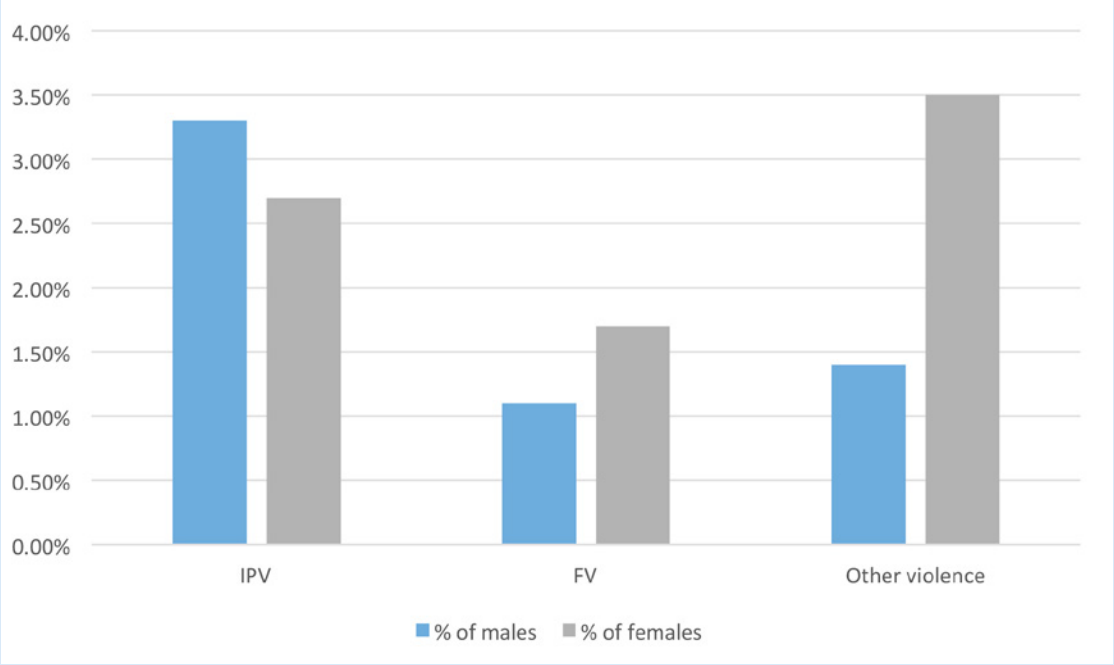
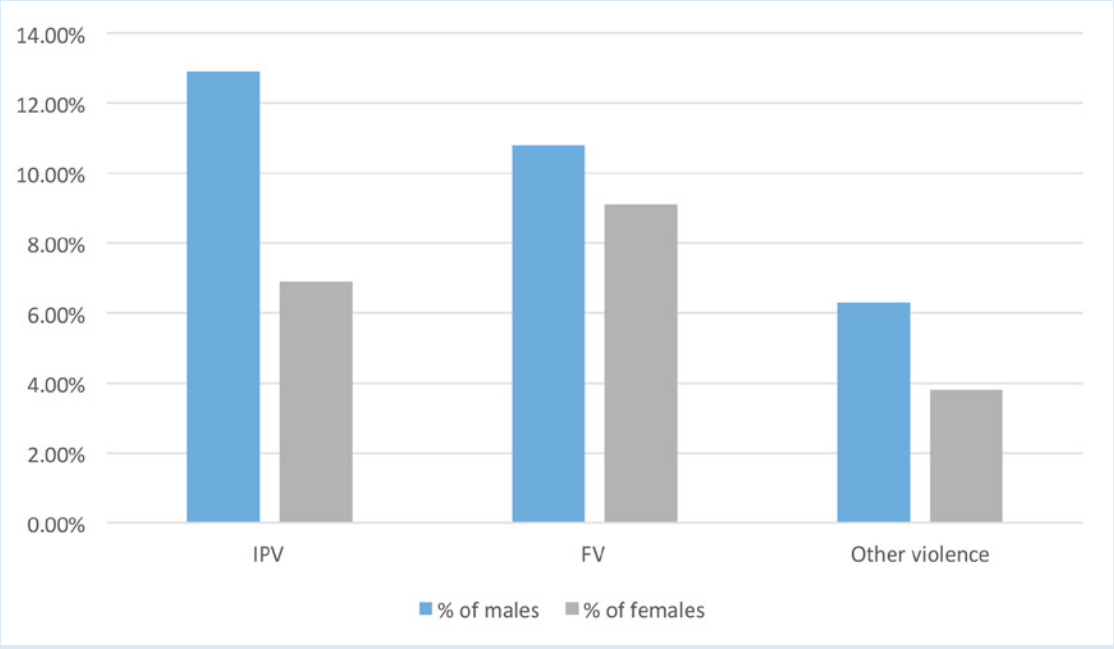


Figure 25 Proportion of males and female 'other person(s)' who used drugs at the most recent incident (n=2,150)



Incident characteristics—impact of alcohol and drug use

Respondent and incident characteristics according to alcohol use at the most recent incident are shown in Table 49 and, according to drug use at the most recent incident, in Table 50.

Significant differences existed across age groups in the likelihood of substance use at IPV incidents. Specifically, 18 to 25 year olds were significantly less likely to experience an alcohol-related and more likely to experience a drug-related IPV incident. Those aged from 26 to 35 years were more likely to experience alcohol- and drug-related than unrelated IPV incidents. Respondents in the two oldest age categories were least likely to experience a drug-related IPV incident. Drug-related IPV incidents were more likely than other types to be witnessed by either family or children.

A significantly greater proportion of respondents involved in alcohol-related other incidents were from a regional location than respondents not involved in alcohol-related other incidents. A significantly greater proportion of respondents involved in drug-related IPV incidents were from a regional location than IPV incidents that were not drug-related. Generally, the proportion of respondents within the most disadvantaged and least disadvantaged quintiles was higher and lower, respectively, for alcohol- and drug-related incidents compared with non-alcohol- and drug-related incidents. However, there were few significant differences by level of relative disadvantage. A significantly lower proportion of respondents reporting alcohol-related IPV lived in the fifth (least disadvantaged) disadvantage quintile compared with those who did not report an alcohol-related IPV incident, and a significantly higher proportion of respondents reporting alcohol-related other violence incident lived in the second disadvantage quintile compared with those who did not report an alcohol-related other violence incident.

Drug-related 'other violence' incidents most often occurred at the respondent's home and least often at school/university. In contrast, alcohol-related other incidents most often occurred at another person's home or at licensed premises, and least often outdoors, at the respondent's home, at a school/university or online/telephone.

A significantly greater proportion of alcohol-related than unrelated other incidents involved only one other person with whom the respondent had not previously experienced similar incidents.

Characteristics of the most recent FV incident did not differ by substance use.

Table 49 Respondent and incident characteristics according to alcohol use at most recent incident (n=2,278)

	IPV Alcohol use		FV Alcohol use		Other violence Alcohol use	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Age group (years)						
18–25	18.5 (117)	11.6 (37)**	31.8 (67)	23.9 (21)	20.0 (138)	19.9 (67)
25–35	8.7 (55)	13.4 (43)*	11.8 (25)	4.5 (4)	11.2 (77)	12.2 (41)
36–50	25.5 (161)	20.6 (66)	17.5 (37)	20.5 (18)	16.8 (116)	14.2 (48)
51–65	32.8 (207)	37.5 (120)	24.2 (51)	34.1 (30)	31.0 (214)	35.6 (120)
66+	14.6 (92)	16.9 (54)	14.7 (31)	17.0 (15)	21.0 (145)	18.1 (61)
From a regional locationcd	23.9 (149)	29.1 (92)	16.7 (34)	24.1 (21)	20.5 (138)	29.3 (96)**
SEIFA disadvantage quintile[d]						
1 (most disadvantage)	20.2 (127)	24.7 (79)	16.1 (34)	23.0 (20)	20.8 (143)	24.9 (84)
2	22.9 (144)	25.3 (81)	19.9 (42)	25.3 (22)	19.9 (137)	24.9 (84)
3	20.5 (129)	15.6 (50)	22.3 (47)	18.4 (16)	19.0 (131)	17.5 (59)
4	21.3 (134)	24.4 (78)	22.7 (48)	17.2 (15)	20.8 (143)	18.1 (61)
5 (least disadvantage)	15.2 (96)	10.0 (32)*	19.0 (40)	16.1 (14)	19.5 (143)	14.5 (49)
Experienced incidents with same person(s) before	80.1 (506)	79.7 (255)	78.2 (165)	69.3 (61)	42.5 (293)	29.4 (99)***
Involved more than 1 other person(s)	10.3 (65)	13.4 (43)	27.5 (58)	31.8 (28)	34.6 (239)	45.4 (153)***
Child/ren witnessed	19.6 (124)	19.1 (61)	10.4 (22)	9.1 (8)	9.0 (62)	5.6 (19)
Other family witnessed	6.5 (41)	7.2 (23)	49.8 (105)	60.2 (53)	8.8 (61)	8.3 (28)
Location						
Respondent home	75.3 (476)	75.9 (243)	61.1 (129)	61.4 (54)	11.4 (79)	10.7 (36)
Perpetrator home	9.7 (61)	9.4 (30)	16.1 (34)	21.6 (19)	2.0 (14)	3.0 (10)
Other person home	3.3 (21)	4.1 (13)	12.8 (27)	11.4 (10)	4.1 (28)	7.1 (24)*
Outdoors	4.1 (26)	3.1 (10)	4.7 (10)	1.1 (1)[a]	29.1 (201)	22.8 (77)*
Workplace	1.1 (7)	0.6 (2)[a]	0.9 (2)	1.1 (1)[a]	25.2 (174)	8.0 (27)***
Inside licensed premises	0.5 (3)	0.9 (3)[a]	0.5 (1)	1.1 (1)[a]	2.0 (14)	18.4 (62)***
Outside licensed premises	0.3 (2)	0.9 (3)[a]	0.0(0)	0.0(0)[b]	1.3 (9)	19.9 (67)***
Private vehicle	3.0 (19)	3.4 (11)	0.5 (1)	1.1 (1)[a]	3.3 (23)	2.1 (7)
Public transport	0.3 (2)	0.0 (0)[a]	0.5 (1)	0.0 (0)[a]	4.5 (31)	3.9 (13)
Sporting venue	0.2 (1)	0.0 (0)[a]	0.0(0)	0.0(0)[b]	1.9 (13)	1.8 (6)
School	0.2 (1)	0.3 (1)[a]	0.5 (1)	0.0 (0)[a]	7.1 (49)	0.0 (0)***
Online/over phone	0.8 (5)	0.6 (2)[a]	1.4 (3)	0.0 (0)[a]	1.3 (9)	0.0 (0)[a]*

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

b: cross-tabulation could not be performed as no cases within 'yes'

c: versus a metropolitan location

d: n=2,273

Table 50 Respondent and incident characteristics according to drug use at most recent incident (n=2,278)

	Intimate partner violence Drug use		Family violence Drug use		Other violence Drug use	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Age group (years)						
18–25	15.0 (125)	24.0 (29)*	28.1 (74)	38.9 (14)	19.6 (185)	24.4 (20)
26–35	9.4 (78)	16.5 (20)*	10.3 (27)	5.6 (2)a	11.0 (104)	17.1 (14)
36–50	22.9 (190)	30.6 (37)	19.4 (51)	11.1 (4)	16.1 (152)	14.6 (12)
51–65	36.0 (299)	23.1 (28)**	27.0 (71)	27.8 (10)	32.8 (310)	29.3 (24)
66 +	16.7 (139)	5.8 (7)**	15.2 (40)	16.7 (6)	20.5 (194)	14.6 (12)
From a regional location[cd]	24.3 (199)	35.0 (42)*	18.8 (48)	19.4 (7)	22.8 (210)	30.0 (24)
SEIFA disadvantage quintile[d]						
1 (most disadvantage)	22.0 (182)	19.8 (24)	18.7 (49)	13.9 (5)	22.3 (210)	20.7 (17)
2	22.9 (190)	28.9 (35)	21.0 (55)	25.0 (9)	20.8 (196)	30.5 (25)*
3	18.7 (155)	19.8 (24)	20.6 (54)	25.0 (9)	18.6 (175)	18.3 (15)
4	22.7 (188)	19.8 (24)	22.1 (58)	13.9 (5)	20.4 (192)	14.6 (12)
5 (least disadvantage)	13.8 (114)	11.6 (14)	17.6 (46)	22.2 (8)	18.0 (170)	15.9 (13)
Experienced incidents with same person(s) before	79.8 (663)	81.0 (98)	75.3 (198)	77.8 (28)	37.9 (358)	41.5 (34)
Involved more than 1 other person(s)	10.6 (88)	16.5 (20)	27.4 (72)	38.9 (14)	37.0 (350)	51.2 (42)*
Child/ren witnessed	18.1 (150)	28.9 (35)**	9.5 (25)	13.9 (5)[a]	8.0 (76)	6.1 (5)
Other family witnessed	6.0 (50)	11.6 (14)*	51.3 (135)	63.9 (23)	8.4 (79)	12.2 (10)
Location						
Respondent home	75.6 (628)	75.2 (91)	61.2 (161)	61.1 (22)	10.2 (96)	23.2 (19)***
Perpetrator home	9.0 (75)	13.2 (16)	17.5 (46)	19.4 (7)	2.1 (20)	4.9 (4)[a]
Other person home	4.0 (33)	0.8 (1)[a]	12.2 (32)	13.9 (5)[a]	5.0 (47)	6.1 (5)[a]
Outdoors	3.5 (29)	5.8 (7)[a]	4.2 (11)	0.0 (0)[a]	27.1 (256)	26.8 (22)
Workplace	1.0 (8)	0.8 (1)[a]	0.8 (2)	2.8 (1)[a]	19.9 (188)	15.9 (13)
Inside licensed premises	0.6 (5)	0.8 (1)[a]	0.8 (2)	0.0 (0)[a]	7.4 (70)	7.3 (6)
Outside licensed premises	0.6 (5)	0.0 (0)[a]	0.0(0)	0.0(0)b	7.5 (71)	6.1 (5)
Private vehicle	3.4 (28)	1.7 (2)[a]	0.8 (2)	0.0 (0)[a]	2.8 (26)	4.9 (4)[a]
Public transport	0.2 (2)	0.0 (0)[a]	0.0 (0)	2.8 (1)[a]	4.6 (43)	1.2 (1)[a]
Sporting venue	0.1 (1)	0.0 (0)[a]	0.0(0)	0.0(0)[b]	2.0 (19)	0.0 (0)[a]
School	0.1 (1)	0.8 (1)[a]	0.4 (1)	0.0 (0)[a]	5.2 (49)	0.0 (0)[a]*

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

b: cross-tabulation could not be performed as no cases within 'yes'

c: versus a metropolitan location

d: n=2,273

Table 51 shows the type of violence and injuries received at alcohol-related and unrelated incidents, while Table 52 shows this for drug-related and unrelated incidents. Physical violence occurred most often at alcohol- or drug-related IPV incidents, while psychological/emotional violence occurred least often at alcohol-related incidents and intimidation occurred most often at drug-related incidents. In relation to FV incidents, verbal aggression was most likely to occur at drug-related incidents. 'Other violence' incidents where alcohol was used were more likely to involve physical violence, and less likely to involve verbal aggression or intimidation. Drug-related compared with unrelated other incidents were significantly more likely to involve sexual violence.

Injuries received

An injury was most likely to occur at either alcohol or drug-related IPV and 'other violence' incidents. Alcohol use significantly increased the likelihood of psychological/emotional injury at IPV incidents, while drug use increased the likelihood of psychological/emotional injury at IPV and 'other violence' incidents.

Table 51 Type of violence experienced and injuries received according to alcohol use at the most recent incident (n=2,278)

	IPV Alcohol use		FV Alcohol use		Other violence Alcohol use	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Violence type						
Physical	44.6 (282)	57.2 (183)***	43.6 (92)	52.3 (46)	41.4 (286)	67.7 (228)***
Sexual	10.0 (63)	10.0 (32)	8.5 (18)	12.5 (11)	8.1 (21)	6.2 (21)
Verbal aggression	73.1 (462)	70.3 (225)	61.1 (129)	64.8 (57)	47.8 (330)	34.4 (116)***
Intimidation	41.3 (261)	44.1 (141)	30.3 (64)	26.1 (23)	30.4 (210)	22.6 (76)**
Unwanted sexual attention	7.3 (46)	6.9 (22)	3.8 (8)	5.7 (5)[a]	6.4 (44)	5.3 (18)
Psychological/emotional	4.3 (27)	0.9 (3)**	2.8 (6)	0.0 (0)[a]	0.4 (3)	0.0 (0)[a]
Injury type						
Any	20.9 (132)	35.0 (112)***	19.9 (42)	15.9 (14)	19.3 (133)	30.0 (101)***
Physical	19.6 (124)	34.4 (110)***	19.4 (41)	12.5 (11)	16.7 (115)	29.4 (99)***
Psychological/emotional	13.0 (82)	20.6 (66)**	10.9 (23)	11.4 (10)	8.3 (57)	7.7 (26)

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

Table 52 Type of violence experienced and injuries received according to drug use at the most recent incident (n=2,278)

	IPV Drug use		FV Drug use		Other violence Drug use	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Violence type						
Physical	47.3 (393)	59.5 (72)*	45.6 (120)	50.0 (18)	49.4 (467)	57.3 (47)
Sexual	9.4 (78)	14.0 (17)	9.9 (26)	8.3 (3)[a]	6.6 (62)	18.3 (15)***
Verbal aggression	72.3 (601)	71.1 (86)	60.1 (158)	77.8 (28)*	43.1 (407)	47.6 (39)
Intimidation	40.9 (340)	51.2 (62)*	29.7 (78)	25.0 (9)	27.8 (263)	28.0 (23)
Unwanted sexual attention	6.7 (56)	9.9 (12)	4.2 (11)	5.6 (2)[a]	5.9 (56)	7.3 (5)[a]
Psychological/emotional	3.0 (25)	4.1 (5)	1.9 (5)	2.8 (1)[a]	0.3 (3)	0.0 (0)[a]
Injury type						
Any	23.1 (192)	43.0 (52)***	18.3 (48)	22.2 (8)	21.2 (200)	41.5 (34)***
Physical	21.9 (182)	43.0 (52)***	16.7 (44)	22.2 (8)	19.3 (182)	39.0 (32)***
Psychological/emotional	13.8 (115)	27.3 (33)***	11.4 (20)	8.3 (3)	7.0 (66)	20.7 (17)***

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$.

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

Police involvement

Police were more likely to be involved in alcohol- and drug-related than unrelated incidents (see Tables 53 and 54).

Either alcohol or drug use at IPV incidents did not significantly impact police actions at the most recent incident nor the likelihood that the matter would be heard at court.

Police were more likely to remove someone from a family violence incident and the matter was more likely to be subject to a court hearing when drugs had been used.

In relation to 'other violence' incidents, police most often detained and charged someone at either alcohol or drug-related incidents, and more often provided a referral to support service/s and provided information about violence at drug-related incidents, compared with incidents where substances were not used. Both alcohol- and drug-related incidents were subject to a court hearing more often than substance-unrelated incidents.

Table 53 Police involvement and actions at most recent incident according to alcohol use (n=2,278)

	IPV Alcohol use		FV Alcohol use		Other violence Alcohol use	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Police involved (yes)	15.7 (99)	21.3 (68)*	15.6 (33)	18.2 (16)	24.3 (168)	32.0 (108)**
Police actions						
Arrested person/s	31.3 (31)	42.6 (29)	18.2 (6)	18.8 (3)[a]	30.4 (51)	41.7 (45)
Removed person/s	44.4 (44)	52.9 (36)	24.2 (8)	37.5 (6)[a]	23.2 (39)	40.7 (44)**
Detained person/s	27.3 (27)	36.8 (25)	12.1 (4)	18.8 (3)[a]	22.6 (38)	38.9 (42)**
Charged person/s	33.3 (33)	39.7 (27)	24.2 (8)	18.8 (3)[a]	32.7 (55)	45.4 (49)*
Police order	57.6 (57)	55.9 (38)	48.5 (16)	43.8 (7)	12.5 (21)	17.6 (19)
Referred to support services	41.4 (41)	32.4 (22)	45.5 (15)	56.3 (9)[a]	16.7 (28)	12.0 (13)
Provided Information	45.5 (45)	44.1 (30)	54.5 (18)	62.5 (10)	26.2 (44)	28.7 (31)
Organised emergency accommodation	17.2 (17)	25.0 (17)	12.1 (4)	18.8 (3)[a]	3.6 (6)	4.6 (5)[a]
Attended scene, no action taken	27.3 (27)	20.6 (14)	42.4 (14)	43.8 (7)	23.2 (39)	24.1 (26)
Attended the scene, perceived as something that 'just happened'	18.2 (18)	22.1 (150	24.2 (8)	37.5 (6)[a]	14.9 (25)	18.5 (20)
Matter subject to court hearing (yes)	8.1 (51)	10.9 (35)	7.6 (16)	8.0 (7)	9.4 (65)	13.6 (46)*

* statistically significant at p<0.05. ** statistically significant at p<0.01.

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported

Table 54 Police involvement and actions at most recent incident according to drug use (n=2,278)

	IPV Other drug use		FV Other drug use		Other violence Other drug use	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Police involved (yes)	16.2 (135)	26.4 (32)**	14.1 (37)	33.3 (12)**	24.4 (231)	54.9 (45)***
Police actions						
Arrested person/s	36.3 (49)	34.4 (11)	13.5 (5)	33.3 (4)[a]	29.9 (69)	60.0 (27)***
Removed person/s	46.7 (63)	53.1 (17)	18.9 (7)	58.3 (7)[a]*	27.7 (64)	42.2 (19)
Detained person/s	31.9 (43)	28.1 (9)	10.8 (4)	25.0 (3)[a]	26.4 (61)	42.2 (19)*
Charged person/s	35.6 (48)	37.5 (12)	16.2 (6)	41.7 (5)[a]	33.3 (77)	60.0 (27)***
Police order	57.0 (77)	56.3 (18)	40.5 (15)	66.7 (8)	13.4 (31)	20.0 (9)
Referred to support services	39.3 (53)	31.3 (10)	43.2 (16)	66.7 (8)	13.0 (30)	24.4 (11)*
Provided information	46.7 (63)	37.5 (12)	51.4 (19)	75.0 (9)	24.7 (57)	40.0 (18)*
Organised emergency accommodation	19.3 (26)	25.0 (8)	18.9 (7)	0.0 (0)[a]	3.0 (7)	8.9 (4)
Attended scene, no action taken	24.4 (33)	25.0 (8)	45.9 (17)	33.3 (4)	23.4 (54)	24.4 (11)
Attended the scene, perceived as something that 'just happened'	17.8 (24)	28.1 (9)	29.7 (11)	25.0 (0)[a]	17.3 (40)	11.1 (5)
Matter subject to court hearing (yes)	8.8 (73)	10.7 (13)	6.1 (16)	19.4 (7)a*	8.8 (83)	34.1 (28)***

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis contains cells with expected count <5, Fisher's Exact Test is reported.

Alcohol and other drug use

Among substance-related incidents (n=898), 69.3 percent involved only alcohol, 17.0 percent only drugs, and 13.7 percent alcohol and drugs. Drugs were more likely to be used at either intimate partner violence or family violence incidents compared with 'other violence' incidents. Substance use (alcohol, drugs or both) at FV or IPV incidents was not related to the type of violence experienced ($p>0.05$). Drug use, compared with alcohol use, at 'other violence' incidents increased the likelihood of sexual violence ($p<0.001$). Compared with other violence (4.7%), IPV (8.3%) and FV (8.7%) were more likely to involve drugs only ($p<0.01$, Phi=0.08; $p<0.05$, Phi=0.08); however, there were no differences between IPV, FV, and other violence regarding the incident involving alcohol and drugs, alcohol only, or neither alcohol nor drugs ($p >0.05$).

The following section compares the likelihood of physical violence, sexual violence, verbal aggression, intimidation and unwanted sexual attention at the most recent incident across incidents involving alcohol only, drugs only, and alcohol and drugs. As shown in Table 55, for IPV and FV no significant differences were evident in the proportion of incidents involving alcohol only, drugs only, and alcohol and drugs that also involved physical violence, sexual violence, verbal aggression, intimidation and unwanted sexual attention ($p >0.05$). For other violence only, a higher proportion of drugs-only incidents involved sexual violence (18.8%) compared with incidents involving alcohol only (4.2%; $p<0.001$, Phi=0.21), and a higher proportion of drug and alcohol incidents involved sexual violence (17.6%; $p<0.001$, Phi=0.20), verbal aggression (52.9%; $p<0.01$, Phi=0.16), and intimidation (33.3%; $p<0.05$, Phi=0.11) compared with incidents involving alcohol only (4.2%, 31.1% and 20.6%, respectively). No significant differences existed in the proportion of incidents involving drugs only compared with drugs and alcohol across all violence types ($p>0.05$).

Table 55 Type of violence experienced at the most recent incident according to substance use (n=898)

Violence type	Alcohol % (n)	Drugs % (n)	Alcohol and drugs % (n)	Significance		
				Alcohol vs drugs	Alcohol vs alcohol and drugs	Drugs vs alcohol and drugs
All incidents						
Physical violence	61.6 (383)	56.9 (87)	60.2 (74)	ns	ns	ns
Sexual violence	7.1 (44)	13.1 (20)	16.3 (20)	*	***	ns
Verbal aggression	51.9 (323)	64.1 (98)	61.0 (75)	**	ns	ns
Intimidation	31.2 (194)	39.2 (60)	37.4 (46)	ns	ns	ns
Unwanted sexual attention	5.9 (37)	7.8 (12)	6.5 (8)	ns	ns	ns
IPV						
Physical violence	55.7 (147)	58.2 (46)	64.3 (36)	ns	ns	ns
Sexual violence	54.8 (23)	23.8 (10)	21.4 (9)	ns	ns	ns
Verbal aggression	72.0 (190)	75.9 (60)	62.5 (35)	ns	ns	ns
Intimidation	43.6 (115)	51.9 (41)	46.4 (26)	ns	ns	ns
Unwanted sexual attention	6.4 (17)	8.9 (7)	8.9 (5)	ns	ns[a]	ns[a]
FV						
Physical violence	52.8 (38)	50.0 (13)	50.0 (8)	ns	ns	ns
Sexual violence	12.5 (9)	3.8 (1)	12.5 (2)	ns[a]	ns[a]	ns[a]
Verbal aggression	61.1 (44)	73.1 (19)	81.3 (13)	ns	ns	ns[a]
Intimidation	27.8 (20)	26.9 (7)	18.8 (3)	ns	ns[a]	ns[a]
Unwanted sexual attention	5.6 (4)	3.8 (1)	6.3 (1)	ns[a]	ns[a]	ns[a]
Other violence						
Physical violence	69.2 (198)	58.3 (28)	58.8 (30)	ns	ns	ns
Sexual violence	4.2 (12)	18.8 (9)	17.6 (9)	***[a]	***[a]	ns
Verbal aggression	31.1 (89)	39.6 (19)	52.9 (27)	ns	**	ns
Intimidation	20.6 (59)	25.0 (12)	33.3 (17)	ns	*	ns
Unwanted sexual attention	5.6 (16)	8.3 (4)	3.9 (2)	ns[a]	ns[a]	ns[a]

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: analyses include cells with expected count <5, Fisher's Exact Test is reported

Usual substance use—impact on most recent incident

The following presents findings related to the association that past 12-month alcohol use had with the most recent incident. Analyses relating to partner alcohol use (separately and with respondent) were restricted to respondents who had ever been in a relationship (n=4,735). This corresponds to 45.9 percent of respondents who experienced lifetime violence. Respondents completed the AUDIT-C (a three question screen for alcohol misuse) questions referenced to the drinking behaviour of their current or (if they did not have a current partner) most recent partner and drinking behaviour when drinking together. For questions relating to partner alcohol use respondents could indicate that they did not know or could not remember their partners' alcohol use, thus AUDIT-C scores were only calculated when all three of the scale items were complete (n=4,048 for AUDIT-C, n=4,425 for AUDIT-3). Findings related to respondent alcohol use are presented first, followed by those related to partner alcohol use. Lastly, findings related to when the respondent and partner use alcohol together.

Respondent alcohol use

Compared with other violence, fewer respondents who reported IPV (p<0.001, Phi=-0.07) or FV (p<0.001, Phi=-0.15) engaged in heavy episodic drinking, and consumed a lower mean number of standard drinks per typical occasion (p<0.05; p<0.001)—see Table 56. No significant differences were evident in the proportion of hazardous drinkers who reported either IPV or 'other violence' incidents; however, a significantly greater proportion of those who reported IPV or 'other violence' incidents were hazardous drinkers compared with FV (p<0.01, Phi=-0.09; p<0.001, Phi=-0.11).

Table 56 Usual alcohol use patterns according to type and time since most recent incident (n=2,278)

	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
All incidents (n=2,278)						
HED (yes)	37.8 (360)	27.8 (83)	45.0 (462)	**	***	***
Typical standard drinks (M [SD])a	2.31 (2.66)	1.72 (2.00)	2.60 (2.95)	***	*	***
Hazardous alcohol use (yes)	44.1 (420)	34.1 (102)	47.1 (484)	***	ns	***
Incidents in the past 12 months (n=468)						
HED (yes)	45.9 (105)	34.0 (18)	47.8 (89)	ns	ns	ns
Typical standard drinks (M [SD])[a]	2.81 (3.81)	1.77 (2.43)	2.57 (3.89)	*	ns	*
Hazardous alcohol use (yes)	47.6 (109)	39.6 (21)	44.6 (83)	ns	ns	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: Mann-Whitney-U Test (non-parametric)

Note: HED=heavy episodic drinking (consumption of 6 or more drinks on one occasion at least once in the past 12 months)

Gender differences

Gender differences in alcohol use patterns in the past 12 months, according to type of violence experienced at the most recent incident, are presented in Table 57. Regardless of incident type, a significantly greater proportion of males engaged in each drinking behaviour (and reported a higher mean number of typical standard drinks) than females. Compared with females who reported a FV incident, females who reported IPV or 'other violence' incidents were most likely to engage in heavy episodic drinking (p<0.01, Phi=-0.10; p<0.001, Phi=-0.15), to drink at a hazardous level (p<0.01, Phi=-0.10; p<0.01, Phi=-0.12), and to report a higher mean number of standard drinks per typical occasion (p<0.01).

Males who reported an 'other violence' incident, consumed a significantly higher mean number of standard drinks per typical occasion compared with those who reported a family violence incident (p<0.05). Males who reported an IPV incident were most likely to report heavy episodic drinking (p<0.01, Phi=-0.14) and to consume a higher mean number of standard drinks per typical occasion than those reporting FV (p<0.001).

Table 57 Past 12 month alcohol use patterns of male and female respondents according to most recent incident type (n=2,268)

	% of males (n)	% of females (n)	Statistic
All incidents			
HED	49.2 (525)	31.2 (375)	X^2=76.91***
Typical standard drinks (M [SD])	2.88 (3.14)	1.90 (2.23)	*U*=49447.5***
Hazardous alcohol use (yes)	49.3 (526)	39.7 (477)	X^2=21.37***
IPV			
HED	55.1 (125)	32.2 (232)	X^2=38.35***
Typical standard drinks (M [SD])	3.41 (3.47)	1.97 (2.25)	*U*=56583.5***
Hazardous alcohol use (yes)	52.4 (119)	41.5 (299)	X^2=8.31**
FV			
HED	39.8 (41)	21.4 (42)	X^2=11.37***
Typical standard drinks (M [SD])	2.20 (2.81)	1.46 (1.79)	*U*=7960.00**
Hazardous alcohol use (yes)	41.7 (43)	30.1 (59)	X2=4.07*
Other violence			
HED	48.8 (359)	35.3 (101)	X^2=15.08***
Typical standard drinks (M [SD])	2.81 (3.11)	2.05 (2.44)	*U*=86111.00***
Hazardous alcohol use (yes)	49.5 (364)	41.6 (119)	X^2=5.09*

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

Note: HED=heavy episodic drinking (consumption of 6 or more drink on one occasion at least once in the past 12 months. SD=standard deviation

Usual alcohol use and alcohol use at the most recent incident

Any, and respondent use of alcohol at the most recent incident was associated with the respondent's usual hazardous (p<0.001, Phi=0.11; p<0.001, Phi=0.21) and heavy episodic drinking (p<0.001, Phi=0.12; p<0.001, Phi=0.25). These differences were consistent across IPV and 'other violence' incidents. However, for family violence, no significant difference was evident in the proportion of respondents who reported any alcohol use at the most recent incident, who drank at hazardous levels (37.5% vs 32.7%) or who engaged in HED (30.7% vs 26.5%). Respondent HED or hazardous drinking status was also not significantly associated with reporting experience of a similar incident with the same person(s) previously for IPV, FV or other violence (ps>0.05).

Partner alcohol use

Most partners (77.9%) were current drinkers (ie had consumed alcohol within the past 12 months) with 138 respondents indicating they 'don't know/can't remember' their partner's drinking behaviour for all three questions and were coded as missing data.

A total of 40.8 percent engaged in at least one episode of HED in the past 12 months, and 43.8 percent were hazardous drinkers (only calculated for partners with no missing data on all three items of the AUDIT-C, n=4048). A total of 310 respondents indicated that they 'don't know/can't remember' their partners HED over the past 12 months.

Compared with males, significantly fewer female partners were current drinkers (p<0.001), engaged in HED (p<0.001), and were hazardous drinkers (p<0.001). Respondents who indicated their partner's sex as being transgender (n=3) or other (n=1) were excluded from sex comparison analyses.

Respondent drinking behaviour predicted partner drinking behaviour; 86.1 percent of partners of respondents who were current drinkers were also current drinkers (p<0.001, Phi=0.41), 69.5 percent of partners of respondents who engaged in heavy episodic drinking were also heavy episodic drinkers p<0.001, Phi=0.47), and 67.4 percent of partners of respondents who were hazardous drinkers also drank at hazardous levels (p<0.001, Phi=0.43).

Compared with respondents who reported both family violence and 'other violence' incidents, current and recent partners of respondents who reported an intimate partner violence incident were significantly more likely to be a current drinker (p<0.001, Phi=-0.10; p<0.001, Phi=0.09), engage in heavy episodic drinking (p<0.001, Phi=-0.16; p<0.001, Phi=0.18), drink at hazardous levels (p<0.01, Phi=-0.08; p<0.01, Phi=0.07), and consume a higher mean number of standard drinks (p<0.001; p<0.001)—see Table 58. Similar trends were found when only current partners' (n=1440) drinking patterns were considered.

Table 58 Current and most recent partners' alcohol use patterns, alone and with respondent, according to most recent incident type (n=1,837)[1]

	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
All partners (n=1,837)						
Any alcohol consumption (yes)	80.4 (618)	71.6 (164)	74.1 (622)	**	**	ns
HED (yes)	50.2 (386)	34.1 (78)	34.9 (293)	***	***	ns
Typical standard drinks (M [SD])[a]	3.20 (3.53)	1.93 (2.47)	2.04 (2.50)	***	***	ns
Hazardous alcohol use (yes)	50.2 (386)	40.2 (92)	43.0 (361)	**	**	ns
Respondent and partner drink together (yes)[b]	67.5 (518)	58.5 (134)	67.2 (563)	*	ns	*
Respondent and partner HED together (yes)[c]	31.3 (236)	22.7 (52)	30.3 (253)	*	ns	*
Current partners (n=1,440)						
Any alcohol consumption (yes)	79.0 (447)	71.4 (140)	74.8 (507)	*	ns	ns
HED (yes)	46.8 (265)	33.7 (66)	33.8 (229)	***	***	ns
Typical standard drinks (M [SD])[a]	2.91 (3.27)	1.90 (2.51)	1.91 (2.38)	***	***	ns
Hazardous alcohol use (yes)	47.0 (266)	39.8 (78)	42.5 (288)	ns	ns	ns
Respondent and partner drink together (yes)	67.8 (383)	57.7 (113)	48.3 (464)	**	ns	**
Respondent and partner HED together (yes)	31.5 (175)	22.4 (44)	29.0 (196)	*	ns	ns

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

1: n refers to number of respondents who reported lifetime violence, who ever had a partner, and who answered all three AUDIT-C items

a: Mann-Whitney-U Test

b: drinking behaviour together not indicated by 3 respondents

c: binge drinking behaviour together not indicated by 17 respondents

Note: HED=heavy episodic drinking (consumption of 6 or more drinks on one occasion at least once in the past 12 months). SD=standard deviation

Respondent and partner alcohol use

Of the sample that reported having ever been in a relationship, most (95.3%) respondents and partners who were current drinkers drank together, with 41.5 percent engaging in heavy episodic drinking together. Similar trends were found when considering only the drinking patterns of respondents who experienced lifetime violence, and their partners.

No significant differences were evident in the proportion of respondents who drank with their partner across incident types (ps >0.05). A significantly greater proportion of respondents who reported IPV (p<0.05, Phi=-0.08) or 'other violence' (p<0.05, Phi=-0.07) incidents engaged in heavy episodic drinking with their partner compared with FV. When analyses were restricted to respondents in a current relationship (for at least 12 months) and who experienced their most recent incident within the past 12 months, there were no significant differences in drinking behaviour together and type of violence experienced at the most recent incident. However, given the reduced analytic n for these analyses, the power to detect a significant difference was substantially reduced.

Among respondents who drank together with their partner, a small proportion had experienced alcohol-related violence or aggression in the past 12 months with their partner (12.0% other violence, 30.6% IPV, 9.8% FV). Respondents who reported an IPV incident and who drank with their partner were significantly more likely to experience alcohol-related violence with the partner than those who reported either FV or 'other violence' incidents (p<0.001).

Beliefs about alcohol use and violence

To determine the frequency respondents had experienced alcohol-related incidents in general, they were asked: 'How often do you think alcohol is a cause of violence you have been involved in?' with response options ranging from 'never' to 'daily' or 'almost daily'.

Those who reported an IPV incident were significantly more likely to indicate alcohol was a cause of the violence they had experienced compared with those who reported other violence (p<0.01, Phi=0.06) or a family violence (p<0.01, Phi=-0.08) incident.

Respondents who experienced an alcohol-related, most recent incident—17.5 percent, 20.5 percent, and 32.3 percent of respondents reporting IPV, FV, and other violence respectively—indicated that alcohol has never caused violent incidents in which they have been involved. This indicates that involvement of alcohol was not necessarily attributed as a cause of the most recent incident. The proportion of respondents reporting that alcohol has caused a violent incident they have been involved in, among those that reported alcohol was involved in the most recent incident, was significantly higher for those reporting IPV (82.5%; p<0.001, Phi=0.17) and FV (79.5%; p<0.05, Phi=0.10) compared with those reporting other violence (67.7%).

Drug use and most recent incident

Of respondents who experienced lifetime violence 8.5 percent had used an illicit substance in the past 12 months (see Table 59). As there were no respondents within family violence classified as 'high substance dependency', comparisons to FV are not reported.

Respondents who reported an IPV or other violence incident were more likely than those who reported FV to use illicit drugs (p<0.001, Phi=0.11; p<0.001, Phi=0.09). Severity of drug dependence was not found to differ across respondents who experienced each incident type.

Table 59 Drug use and dependency level of male and female respondents according to most recent incident type (n=2,278)

	IPV % (n)	FV % (n)	Other violence % (n)	Significance		
				IPV vs FV	IPV vs other	FV vs other
Illicit drug use past 12 months (yes)	10.2 (97)	3.0 (9)	8.6 (88)	***	ns	***
M SDS Score (SD)[b]	8.86 (12.53)	2.78 (4.63)	8.71 (10.48)	ns	ns	ns
Dependency classification						
Low substance use dependency	81.4 (79)	100.0 (9)	85.2 (75)	ns[a]	ns	ns[a]
Within high substance use dependency	18.6 (18)	0.0 (0)	14.8 (13)			
Males (n=1,066)						
Illicit drug use past 12 months (yes)	7.0 (16)	1.9 (2)	7.7 (57)	ns	ns	*
Females (n=1,202)						
Illicit drug use past 12 months (yes)	11.0 (79)	3.6 (7)	10.1 (29)	**	ns	**

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analyses include cells with expected count <5, Fisher's Exact Test is reported

b: Mann-Whitney-U test

Note: SDS=Severity of Dependency Scale. M=mean. SD=standard deviation

Beliefs about drug use and violence

The general frequency of respondents who had experienced drug-related violence did not differ according to the most recent incident typeF (ps>0.05). To determine the general frequency that respondents had experienced drug-related violence, they were asked, 'How often do you think drugs are a cause of violence you have been involved in?' with response options ranging from 'never' to 'daily' or 'almost daily'. This question did not specify that the drugs were illicit. Specifically 19.7 percent of those who reported an IPV incident, 20.1 percent who reported a FV incident and 23.9 percent who reported an 'other violence' incident, believed that drugs were a cause of the violence they had experienced at least once.

In relation to drug-related recent incidents, 34.1 percent of respondents who reported IPV, 24.0 percent who reported FV and 22.2 percent who reported 'other violence' stated that drugs had never been a cause of the violence they had experienced in general. This suggests that respondents did not necessarily attribute drugs as a cause of the most recent drug-related violent incident. In contrast, considering drug-unrelated incidents, a significantly greater proportion of respondents who reported an 'other violence' incident (20.2%) stated that drugs were a cause of the violence they had experienced in general compared with both IPV (11.6%; p<0.001, Phi=-0.17) and FV (12.2%; p<0.01, Phi=-0.09).

Mental health

Overall, respondents who reported either an intimate partner or family violence incident had higher depression, anxiety and stress levels. They were more likely to have a higher than normal level of all three symptoms, than those who reported an 'other violence' incident (see Table 60). This difference was significant for men only. Females who experienced an 'other violence' incident had a significantly higher mean anxiety compared with females who reported an IPV incident.

Table 60 Mean depression, anxiety and stress scale scores according to most recent incident type (n=2,278)						
				Significance[a]		
	IPV M (SD)	FV M (SD)	Other violence	M (SD)	IPV vs other	FV vs other
Total (n=2,278)						
Depression	5.07 (5.57)	4.85 (5.44)	3.56 (4.73)	ns	***	***
Anxiety	3.12 (4.36)	3.40 (4.55)	2.38 (3.88)	ns	***	***
Stress	4.77 (4.73)	4.81 (4.80)	3.61 (4.29)	ns	***	***
Males (n=1,066)						
Depression	5.11 (5.28)	4.85 (5.73)	2.98 (4.18)	ns	***	**
Anxiety	2.93 (4.06)	3.51 (4.87)	1.79 (3.14)	ns	***	***
Stress	4.62 (4.54)	4.69 (5.09)	2.98 (3.72)	ns	***	***
Females (n=1,202)						
Depression	5.03 (5.67)	4.86 (5.30)	4.99 (5.67)	ns	ns	ns
Anxiety	3.17 (720)	3.35 (4.39)	3.86 (5.04)	ns	ns	ns
Stress	4.80 (4.80)	4.87 (4.65)	5.22 (5.14)	ns	ns	ns

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: Kruskal-Wallis post-hoc tests

Impact on life

The most recent FV and IPV incidents had a similarly moderately high impact on respondents' lives (*M*=5.92, *SD*=2.94; *M*=6.06, *SD*=3.02), and was significantly higher than the impact of 'other violence' incidents (*M*=3.83, *SD*=2.95) (p<0.001; p<0.001). Females reported significantly higher impact on life scores than males for 'other violence' incidents (*M*=5.10 vs *M*=3.33, p<0.001), IPV (*M*=6.28 vs *M*=5.29, p<0.001), and FV (*M*=6.18 vs *M*=5.42, p<0.05).

To determine the unique impact key respondent and incident characteristics had on the most recent incident, a binary logistic regression model was conducted with impact on life (low vs high as outcome variable (see Table 61). A k-means cluster analysis was performed resulting in two categories researchers termed 'low' (0–5) and 'high' (6–10) impact on life. A total of 54.3 percent of respondents were classified as 'low'. To determine if alcohol and drug involvement associated differently by type of violence experienced, interaction terms between alcohol and drug involvement and type of violence were added to the model. Addition of these interactions added no significant variance to the model (X2(4)=2.93, p=0.57), and thus they were removed from the final model presented in the table below.

The model accounted for 19 to 25 percent of the variance in predicting impact on life (Cox & Snell R Square=0.19; Nagelkerke R Square=0.25) and correctly predicted 68.3 percent of cases. The odds of being classified in the 'high' impact on life group was significantly increased for respondents aged 25 to 35 years (compared with those aged 66 years or older) who were female, had experienced IPV or FV at the most recent incident (compared with other violence), had received a physical or psychological injury as a result of the incident, and who experienced a drug-related incident. Alcohol involvement in the incident significantly decreased the odds of being classified in the high impact on life group.

Table 61 Logistic regression model predicting experience of lifetime violence (n=2,268)				
	B	Wald X^2	OR	95% CI
Age (years)				
18–25	0.07	0.22	1.08	0.79–1.47
26–35	0.52	8.02	1.68**	1.17–2.40
36–50	0.29	3.46	1.34	0.98–1.82
51–65	0.25	3.15	1.29	0.97–1.70
66+[a]				
Females	0.81	59.11	2.26***	1.83–2.28
Type of violence				
Other[a]				
IPV	0.80	51.20	2.22***	1.78–2.76
FV	0.89	36.02	2.43***	1.82–3.25
Physical injury (yes)	0.33	5.77	1.40*	1.06–1.83
Psychological injury (yes)	1.92	81.39	6.86***	4.51–10.42
Alcohol involved (yes)	-0.29	7.97	0.75**	0.61–0.91
Drugs involved (yes)	0.50	9.77	1.65**	1.20–2.25

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference group

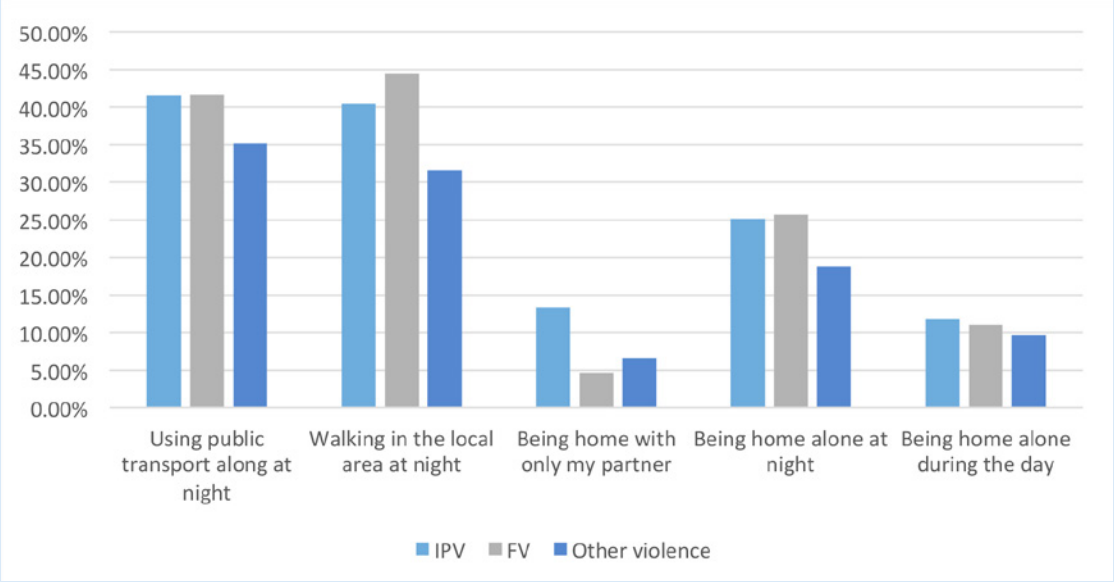
Feelings of personal safety

Figure 26 below shows the proportion of respondents who reported an IPV, a FV or 'other violence' incident and indicated feeling unsafe in each of five situations.

No significant differences were evident between respondents who reported either an IPV or FV incident in feelings of safety in each situation, with the exception of 'being home with only my partner'. Specifically, 13.6 percent of respondents who reported IPV compared with 4.6 percent who reported FV indicated they felt unsafe in this situation (p<0.001, Phi=0.12). Compared with those who reported an 'other violence' incident, respondents who reported IPV were more likely to report feeling unsafe using public transport alone at night (p<0.05, Phi=-0.07), walking in the local area alone at night (p<0.001, Phi=-0.09), being alone with their partner (p<0.001, Phi=-0.11) and being home alone at night (p<0.001, Phi=-0.07).

Compared with those who reported an 'other violence' incident, respondents who reported FV were more likely to report feeling unsafe walking alone in the local area at night (p<0.001, Phi=-0.11) and being home alone at night (p<0.05, Phi=-0.07).

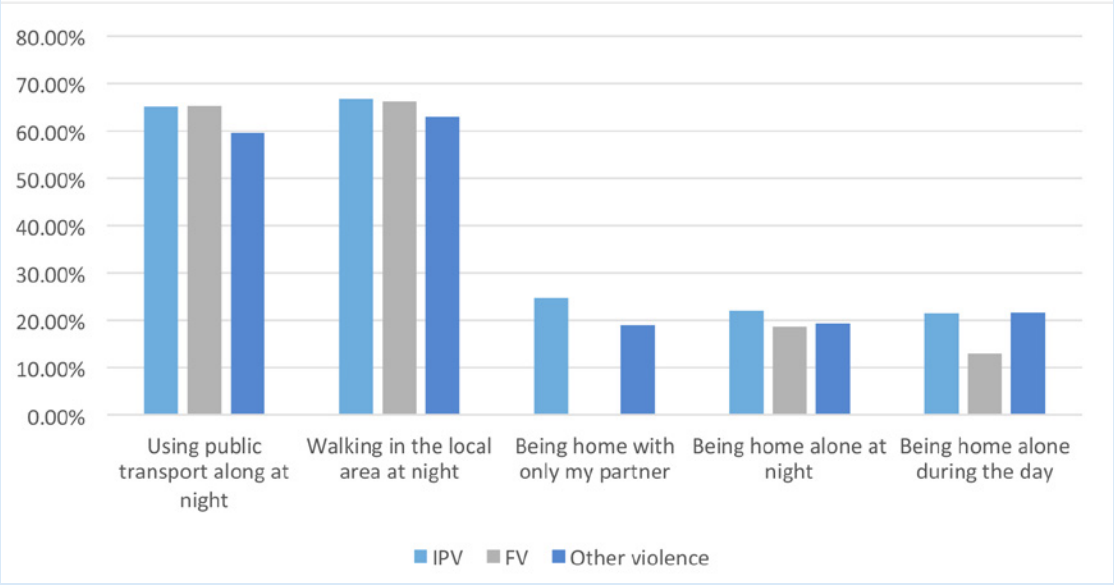
Figure 26 Proportion of respondents who felt unsafe in five situations according to most recent incident type[a]



a: cross-tabulations exclude respondents who indicated not applicable for each situation

Figure 27 below displays the proportion of respondents who reported a recent incident and avoided each situation due to feeling unsafe. No significant differences were evident in avoiding each situation due to feeling unsafe across most recent incident types (ps>0.05).

Figure 27 Proportion of respondents who reported IPV, FV and 'other violence' who reported avoiding situations due to feeling unsafe[a]



a. cross-tabulation excludes respondents who indicated not applicable or that they did not feel unsafe in each situation

Multivariate predictors of most recent incident type

To determine which factors predicted IPV versus FV, IPV versus other violence, and FV versus other violence, three hierarchical logistic regression analyses were performed with type of violence experienced at the most recent experience as the outcome variable. Demographic factors that were significant bivariate predictors of violence types (age group, sex, education and geographic region) were entered in the first step, respondent alcohol and drug use variables in the second step, and partner alcohol use variables in the third step. Although significant at the bivariate level, due to high levels of missing data, household income was not included in the models.

Intimate partner versus other violence

Table 62 shows the logistic regression model predicting experience of IPV compared with other violence at the most recent incident. In the fully adjusted model (Step 3), respondents aged 18 to 25 years were significantly less likely to report an IPV compared with an 'other violence' incident (OR=0.62, 95%CI=0.41–0.96), and females (OR=10.33, 95%CI=7.40–14.43), those whose highest education level was Year 11 or below (OR=1.46, CI=1.06–2.01) or Year 12 (OR=1.45, CI=1.03–2.04), and those with partners who engaged in heavy episodic drinking (OR=1.95, 95%CI=1.44–2.66) were significantly more likely to report an IPV compared with 'other violence' incident. Thus, partner heavy drinking behaviour was the only variable found to predict experience of IPV versus other violence over and above demographic factors. The final model accounted for 26 to 45 percent of the variance in experience of IPV versus other violence (Cox & Snell R Square=0.26; Nagelkerke R Square=0.34) and correctly classified 75.7 percent of IPV cases and 74.7 percent of other violence cases.

Family versus other violence

Partner drinking variables added at Step 3 did not add significant variance to the model over and above demographic factors and respondent substance use behaviour added in Steps 1 and 2. The final model accounted for 12 to 19 percent of the variance in the prediction of FV versus 'other violence' incidents (Cox & Snell R Square=0.12; Nagelkerke R Square=0.19) and correctly predicted 79.4 percent of cases (18.5% of FV and 96.3% of other violence).

Intimate partner versus family violence

As shown at Step 1, in the fully adjusted model, being female, using illicit drugs, and having a partner who engages in heavy episodic drinking were significantly associated with the experience of IPV, while being aged 18 to 25 years was significantly associated with a decreased likelihood of IPV. While the final model correctly predicted 77.8 percent of cases, it was poor at classifying FV, with only 3.3 percent of cases correctly classified. The total variance accounted for by the model ranged between seven and 11 percent (Cox & Snell R Square=0.07; Nagelkerke R Square=0.11).

Table 62 Logistic regression predicting experience of IPV compared with other violence at most recent incident (n=1,719)

	Step 1			Step 2			Step 3		
	B	OR	95% CI	B	OR	95% CI	B	OR	95% CI
Age (years)									
18–25	-0.35	0.70	0.47–1.04	-0.44	0.64*	0.42–0.98	-0.50	0.61*	0.40–0.93
26–35	-0.25	0.78	0.51–1.18	-0.33	0.71	0.46–1.12	-0.41	0.88	0.42–1.04
36–50	0.46	1.58*	1.10–2.27	0.42	1.52*	1.04–2.20	0.34	1.41	0.97–2.05
51–65	0.25	1.28	0.93–1.77	0.23	1.26	0.91–1.74	0.22	1.24	0.90–1.73
66+[a]									
Female	2.29	9.84***	7.80–12.42	2.32	10.15***	7.97–12.94	2.21	9.11***	7.12–11.65
Highest level of education									
Year 11 or below	0.42	1.51**	1.10–2.08	0.40	1.50*	1.09–2.06	0.38	1.46*	1.06–2.02
Year 12 or equivalent	0.43	1.53*	1.09–2.14	0.42	1.52*	1.08–2.13	0.38	1.46*	1.04–2.06
Vocational qualification	0.26	1.30	0.99–1.71	0.26	1.29	0.98–1.70	0.23	1.26	0.95–1.67
Tertiary qualificationa									
Resides in regional location	-0.17	0.84	0.65–1.09	-0.18	0.83	0.64–1.08	-0.20	0.82	0.63–1.07
HED				0.12	1.13	0.80–1.58	-0.11	0.90	0.61–1.31
Hazardous drinker				-0.00	1.00	0.73–1.37	0.00	1.00	0.73–1.38
Illicit drug use (yes)				0.17	1.19	0.80–1.77	0.14	1.15	0.77–1.72
Partner HED							0.69	1.99***	1.46–2.70
Drinking together HED							-0.15	0.86	0.60–1.24

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Note: OR=odds ratio 95%. CI=95% confidence Interval for odds ratio. HED-heavy episodic drinking

Table 63 Logistic regression predicting experience of FV compared with other violence at most recent incident (n=1,115)

	Step 1			Step 2			Step 3		
	B	OR	95% CI	B	OR	95% CI	B	OR	95% CI
Age (years)									
18–25	0.00	1.00	0.60–1.68	0.27	1.31	0.76–2.25	0.26	1.30	0.75–2.23
26–35	-0.40	0.67	0.37–1.21	-0.20	0.82	0.44–1.51	-0.20	0.82	0.44–1.51
36–50	0.18	1.20	0.72–1.99	0.29	1.34	0.80–2.24	0.28	1.32	0.79–2.21
51–65	-0.03	0.96	0.61–1.53	0.03	1.03	0.65–1.64	0.03	1.03	0.65–1.63
66+[a]									
Female	1.63	5.10***	3.70–7.03	1.54	4.65***	3.34–6.47	1.52	4.59***	3.29–6.41
Highest level of education									
Year 11 or below	-0.12	0.89	0.55–1.42	-0.08	0.92	0.57–1.48	-0.09	0.91	0.56–1.47
Year 12 or equivalent	0.43	1.53	0.99–2.35	0.45	1.57*	1.01–2.43	0.44	1.56*	1.01–2.24
Vocational qualification	0.06	1.06	0.72–1.55	0.09	1.09	0.74–1.60	0.08	1.09	0.74–1.60
Tertiary qualificationa									
Resides in regional location	-0.49	0.61*	0.42–0.90	-0.47	0.63*	0.42–0.93	-0.48	0.62*	0.42–0.92
HED				-0.46	0.63	0.39–1.01	-0.47	0.63	0.37–1.06
Hazardous drinker				0.04	1.04	0.66–1.62	0.04	1.04	0.66–1.62
Illicit drug use (yes)				-1.05	0.35**	0.16–0.77	-1.05	0.35**	0.16–0.78
Partner HED							0.14	1.15	0.75–1.77
Drinking together HED							-0.11	0.89	0.53–1.49

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Note: OR= odds ratio 95%. CI=95% confidence Interval for odds ratio. HED=heavy episodic drinking

Table 64 Logistic regression predicting experience of IPV compared with FV at most recent incident (n=1,090)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Respondent age												
18–25 years	-0.41	2.58	0.67	0.41–1.09	-0.74	7.61	0.48**	0.28–0.81	-0.80	8.80	0.45**	0.26–0.76
26–35 years	0.02	0.01	1.02	0.57–1.82	-0.27	0.77	0.77	0.42–1.39	-0.35	1.26	0.71	0.39–1.29
36–50 years	0.12	0.25	1,12	0.69–1.83	-0.01	0.00	0.99	0.60–1.62	-0.05	0.04	0.95	0.58–1.57
51–65 years	0.21	0.83	1,23	0.78–1.94	0.18	0.60	1.20	0.76–1.89	0.17	0.50	1.18	0.74–1.87
66+ years[a]												
Female	0.63	15.58	1.89***	1.38–2.59	0.78	20.92	2.18***	1.56–3.05	0.67	14.75	1.95***	1.39–2.75
Respondent education												
Year 11 or below	0.46	4.16	1.59*	1.02–2.47	0.39	2.88	1.46	0.94–2.31	0.36	2.40	1.43	0.91–2.25
Year 12 or equivalent	-0.15	0.51	0.86	0.57–1.30	-0.15	0.47	0.86	0.57–1.31	-0.18	0.67	0.84	0.55–1.28
Vocational qualification	0.18	0.89	1.19	0.83–1.72	0.14	0.56	1.15	0.79–1.68	0.11	0.34	1.12	0.77–1.63
Tertiary qualificationa												
Resides in rural location	0.28	2.20	1.33	0.91–1.92	0.25	1.67	1.28	0.88–1.87	0.23	1.45	1.26	0.86–1.85
HED					0.58	6.05	1.79*	1.12–2.84	0.31	1.31	1.36	0.80–2.32
Hazardous drinker					-0.02	0.01	0.99	0.64–1.49	-0.00	0.00	1.00	0.65–1.52
Illicit drug use (yes)					1.21	9.73	3.37**	1.57–7.23	1.21	9.55	3.36**	1.56–7.26
Partner HED									0.65	10.93	1.92***	1.30–2.84
Drinking together HED									-0.06	0.05	0.94	0.56–1.57

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Note: OR= odds ratio 95%. CI=95% confidence Interval for odds ratio. HED=heavy episodic drinking

A final model predicting experience of alcohol-related violence (ARV) among respondents who drank together with their partner (see Table 65) dichotomised as never (0) versus ever (1).

The effect of respondent heavy episodic drinking was no longer significant with the addition of partner drinking variables in Step 3, where partners' heavy episodic drinking, alone and together with respondents, was associated with 6.25 and 2.78 times greater odds of ARV, respectively. Finally, there was a significant interaction between sex and heavy episodic drinking, whereby male respondents who engaged in heavy episodic drinking were 2.60 times more likely to report ARV compared with female respondents who drank heavily. As shown in Figure 28, for male and female respondents a significantly greater proportion of those who engaged in heavy episodic drinking reported ARV with a partner when drinking together. Post-hoc bivariate analyses indicated that the size of this effect was greater for males (OR=2.60, 95%CI=2.02–3.34; Phi=0.23) than females (OR=1.32, 95%CI=1.04–1.69; Phi=0.19).

Although the final model accounted for 13 to 23 percent of the variance in ARV (Cox & Snell R Square=0.13; Nagelkerke R Square=0.23), overall, the model was a poor predictor of experience of ARV, with only one percent of ARV cases correctly classified, compared with 99.8 percent of those who did not report ARV.

Figure 28 Interaction effect of HED on experience of ARV with current or most recent partner for males versus females

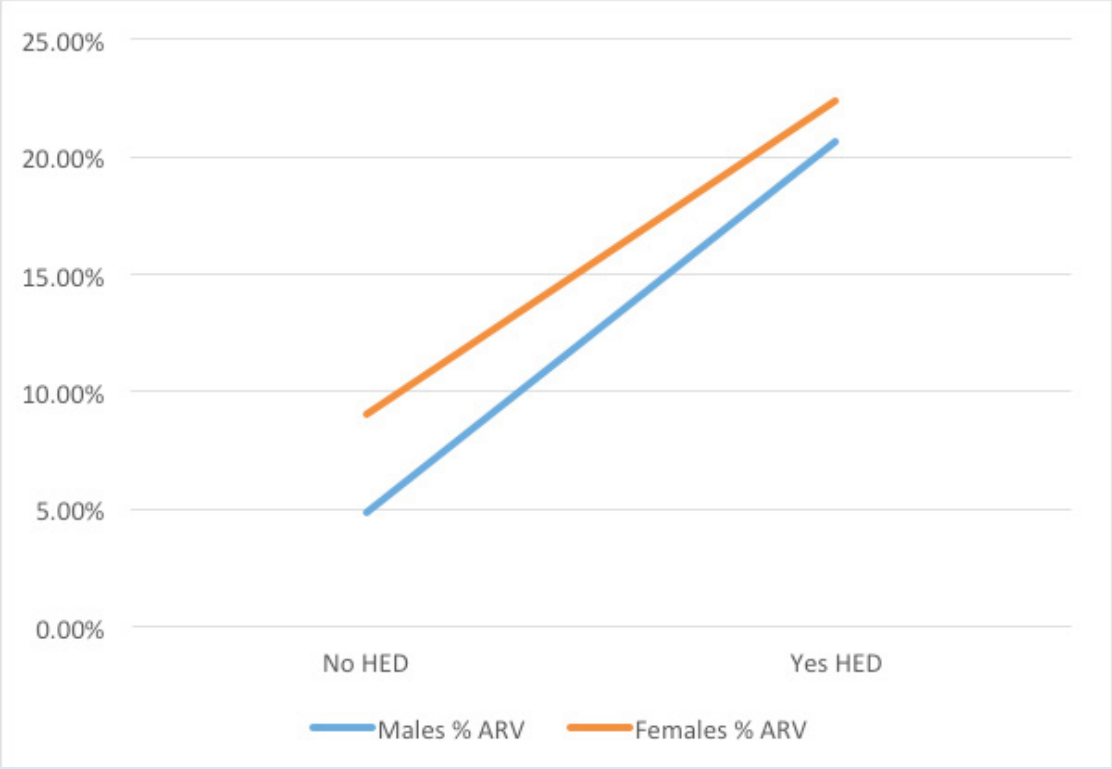


Table 65 Logistic regression predicting experience of ARV (ever) with current or most recent partner versus never

	Step 1				Step 2				Step 3				Step 4			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Respondent age																
18–25 years	1.48	52.00	4.39***	2.94–6.56	0.93	17.79	2.53***	1.64–3.89	0.53	5.49	1.70*	1.09–2.64	0.52	5.37	1.68*	1.08–2.62
26–35 years	1.71	64.56	5.54***	3.65–8.42	1.26	21.32	3.53***	2.27–5.49	0.90	14.79	2.45***	1.55–3.87	0.90	14.98	2.47***	1.56–2.89
36–50 years	0.95	20.83	2.58***	1.72–3.88	0.67	9.86	1.96**	1.29–2.99	0.37	2.78	1.45	0.94–2.25	0.36	2.66	1.44	0.93–2.23
51–65 years	0.73	14.51	2.08***	1.43–3.03	0.59	9.26	1.81**	1.24–2.66	0.52	6.55	1.68**	1.13–2.51	0.50	5.96	1.65*	1.10–2.46
66+ years[a]																
Male	0.20	3.03	1.23	0.97–1.54	-0.01	0.01	0.99	0.78–1.26	0.17	1.75	1.18	0.92–1.52	-0.15	0.30	0.86	0.50–1.47
Respondent education																
Year 11 or below	0.23	1.91	1.27	0.91–1.77	0.13	1.27	1.14	0.80–1.60	-0.01	0.01	0.98	0.69–1.40	-0.01	0.00	0.99	0.70–1.41
Year 12 or equivalent	0.15	0.92	1.16	0.85–1.59	0.10	0.54	1.10	0.80–1.52	0.03	0.04	1.03	0.74–1.44	0.03	0.04	1.03	0.74–1.44
Vocational qualification	0.22	2.30	1.24	0.94–1.64	0.15	0.38	1.16	0.88–1.55	0.12	0.64	1.13	0.84–1.52	0.14	0.81	1.15	0.85–1.54
Tertiary qualification[a]																
Resides in rural location	0.12	0.81	1.13	0.87–1.47	0.02	1.11	1.02	0.78–1.34	-0.04	0.07	0.96	0.73–1.27	-0.05	0.012	0.95	0.73–1.26
HED					1.15	0.03	3.18***	2.28–4.41	-0.06	0.09	0.94	0.63–1.40	-0.46	3.50	0.63	0.39–1.02
Hazardous drinker					-0.07	47.37	0.66	0.67–1.27	-0.21	1.56	0.81	0.59–1.12	0.02	0.00	1.02	0.66–1.57
Illicit drug use (yes)					0.33	0.19	1.39	0.97–1.98	1.25	1.80	1.28	0.89–1.84	0.42	3.28	1.52	0.97–2.39
Partner HED									1.83	68.66	6.25***	4.05–9.64	1.76	62.64	5.80***	3.75–8.96
Drinking together HED									1.02	28.89	2.78***	1.92–4.04	1.08	30.90	2.95***	2.01–4.32
HED*Male													0.96	7.12	2.60**	1.29–5.27
Hazardous*Male													-0.51	2.50	0.60	0.21–1.13
Illicit drug use*Male													-0.38	0.97	0.68	0.32–1.45

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Note: OR= odds ratio 95%. CI=95% confidence Interval for odds ratio. HED=heavy episodic drinking

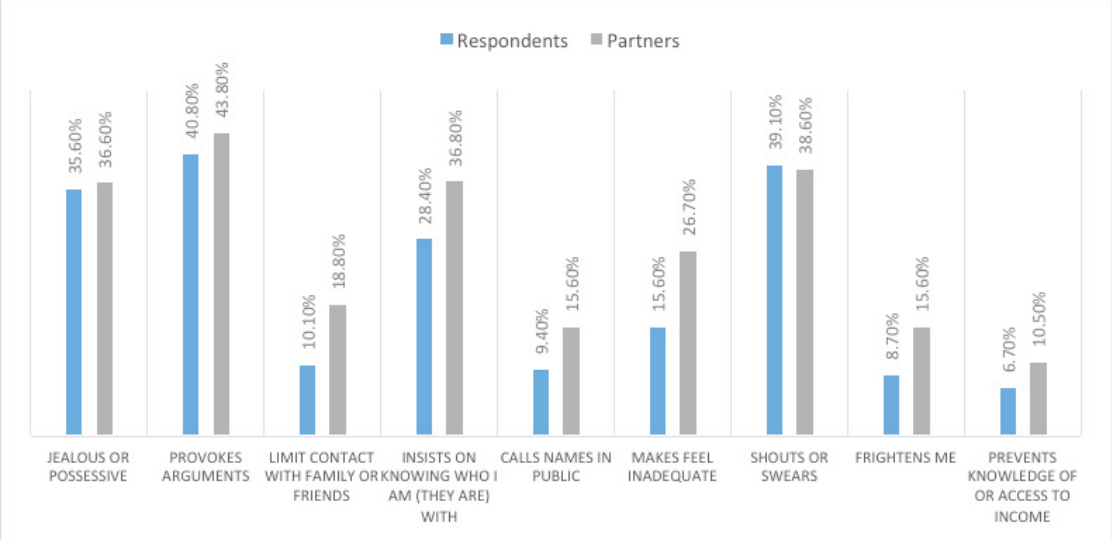
Coercive control

This section presents survey findings related to coercive control. Coercive control was not explicitly identified as a key variable in the research questions guiding this study. However, analyses indicated differences in FDV patterns influenced by levels of coercive control between intimate partners. For this reason it was considered important to include this section.

Respondents who had ever had a partner, provided information regarding the coercive controlling behaviours they and their partner engaged in towards each other. The Coercive Control Scale or CCS (Johnson et al. 2014, see Appendix A) scores were dichotomised into yes versus no, and then classified according to Johnson et al. (2014) where a score of five or more indicated 'high coercive control' and scores of one to four indicated 'low coercive control'. Scores of zero were classified as 'no coercive control'.

As shown in Table 66, male respondents were significantly more likely to engage in five or more coercive controlling behaviours than female respondents. Female partners were more likely than male partners to engage in one to four behaviours. On average, partners engaged in 2.43 controlling behaviours (SD=2.64) and respondents 1.95 (SD=2.12). Partner and respondent coercive control were highly positively skewed; 31.8 and 33.4 percent of partners and respondents engaged in zero coercive controlling behaviours, respectively, and 47.5 and 51.3 percent of partners and respondents engaged in a single coercive control behaviour 'sometimes'. Inspection of correlation matrices revealed moderate to strong positive correlations (r=0.40–0.65) between partners' CCS items. Respondent CCS items were less strongly correlated, but were still small to moderate (r=0.25–0.52). Taken together, these analyses suggested that about half of all respondents and partners engaged in no or very low frequencies of coercive controlling behaviours, and that a higher frequency of engaging in any one coercive controlling behaviour was associated with engaging in other coercive controlling behaviours more frequently. Researchers subsequently dichotomised respondent and partner CCS items such that one=yes and zero=no. A score of one indicated a respondent or partner engaged in a coercive controlling behaviour at least sometimes and a score of zero indicated a respondent/partner never engaged in behaviour of this kind. The three most frequent coercive controlling behaviours respondents and partners engaged in were 'provokes arguments', 'shouts or swears', and 'is jealous or possessive' (see Figure 29). A greater proportion of partners than respondents engaged in each behaviour with the exception of 'shouts or swears'.

Figure 29 Proportion of respondents (n=4,735)[1] and partners (n=4,735) who engaged in each coercive controlling behaviour



1: excludes 383 respondents who had never been in a relationship

Following Johnson et al.'s (2014) approach, one to four coercive controlling behaviours were classified as a low level, and five or more behaviours were classified as a high level of coercive control. According to this classification, 33.3 percent of respondents and 34.4 percent of their partners engaged in no coercive control, while 55.2 percent of respondents and 45.2 percent of partners engaged in a low, and 11.4 percent of respondents and 20.5 percent of partners engaged in a high level of coercive control. A similar proportion of males and females were classified as engaging in no, low, and high levels of coercive control (Table 66). Although significantly greater proportions of male respondents engaged in a high level, and female partners a low level of coercive control, these represent differences of only 2.6 and 3.1 percent respectively.

Table 66 Proportion of male and female respondents (n=4,721) and partners (n=4,719) classified as perpetrating no, low, and high levels of coercive control[1]

Level of coercive control	Total n	Males % (n)	Females % (n)	Chi square statistic
Respondent				
None	1,583	33.2 (755)	33.6 (823)	0.06
Low	2,612	54.1 (1228)	56.3 (1380)	2.42
High	540	12.7 (288)	10.1 (247)	7.93**
Any	3,152	48.2 (1516)	66.4 (1627)	0.06
Partner				
None	1,626	35.0 (867)	33.6 (753)	0.96
Low	2,138	43.7 (1083)	46.8 (1049)	4.57*
High	971	21.3 (529)	19.6 (438)	2.30
Any	3,509	65.0 (1612)	66.4 (1487)	0.96

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$.

1: excludes 14 respondents and 16 partners whose gender was described as other (ie not male or female)

A greater proportion of ex-partners (33.1%) engaged in a high level of coercive control than current partners (16.5%). Current versus ex-partner status accounted for 18 percent of the variance in level of coercive control ($p<0.001$).

Coercive control and experience of violence

Table 67 presents respondent and partner level of coercive control according to respondent experience of lifetime and recent violence.

Table 67 Respondent experience of violence according to respondent and partner engagement in no, low, and high CCB (n=4,735)

	Respondent coercive control[a]		
	None	Low level	High level
Lifetime			
Yes % (n)	25.6 (556)***	58.9 (1,280)***	15.5 (338)***
No % (n)	40.1 (1,027)	52.0 (1,332)	7.9 (202)
Recent			
Yes % (n)	18.1 (52)***	57.3 (165)	24.7 (71)***
No % (n)	34.4 (1,531)	55.0 (2,447)	10.5 (469)
Most recent experience (n=2,174)[1]			
IPV % (n)	21.9 (208)***	61.4 (583)**	16.7 (159)
FV % (n)	34.0 (90)	58.6 (562)	15.1 (40)
Other violence % (n)	26.9 (258)	50.9 (135)	14.5 (139)
	Partner coercive control[a]		
	None	Low level	High level
Lifetime			
Yes % (n)	26.2 (570)***	43.7 (951)	30.0 (653)***
No % (n)	41.2 (1,056)	46.3 (1,187)	12.4 (318)
Recent			
Yes % (n)	16.7 (48)***	29.9 (86)***	53.5 (154)***
No % (n)	35.5 (1,578)	46.1 (2,052)	18.4 (817)
Most recent experience (n=2,174)[1]			
IPV % (n)	18.9 (180)***	37.4 (355)***	43.7 (215)***
FV % (n)	37.4 (99)	47.2 (125)	15.5 (41)
Other violence % (n)	30.3 (291)	49.1 (471)	20.5 (197)

*** statistically significant at p<0.001

a: no CCB, low CCB, and high CCB were dummy coded as 1=yes, 0=no

1: excludes respondents who had never had a partner

Note: CCB=coercive controlling behaviour

As shown in Table 67, respondents who engaged in any coercive control, compared with those who did not, were more likely to have experienced violence. Those who did not engage in any coercive control were less likely to report violence.

Respondent experience of violence was significantly related to partners' level of coercive control. Respondents whose partner did not engage in any coercive control were less likely to have experienced lifetime and recent violence, while respondents whose partners engaged in a high level of coercive control were more likely to report violence.

Most recent incident type

Respondents who reported IPV at the most recent incident were significantly more likely to engage in a low level and less likely to engage in no coercive control (see Figure 31). There were no significant differences in the proportion of respondents who engaged in a high level of coercive control across incident types.

Almost half (43.7%) of partners of respondents who reported an IPV incident engaged in a high level of coercive control, more than double the proportion of partners of respondents who reported a FV (15.5%) or other violence (20.5%) incident. The size of this effect was moderate (Cramer's V=0.26, p<0.001). Nevertheless, Figure 30 shows that partners of respondents who reported an IPV incident were more likely to engage in any coercive control compared with partners of respondents who reported either family or other violence.

Figure 30 Proportion of respondents' current or most recent partners classified as no CCB, low CCB and high CCB by type of violence experienced at most recent incident (n=2,174)

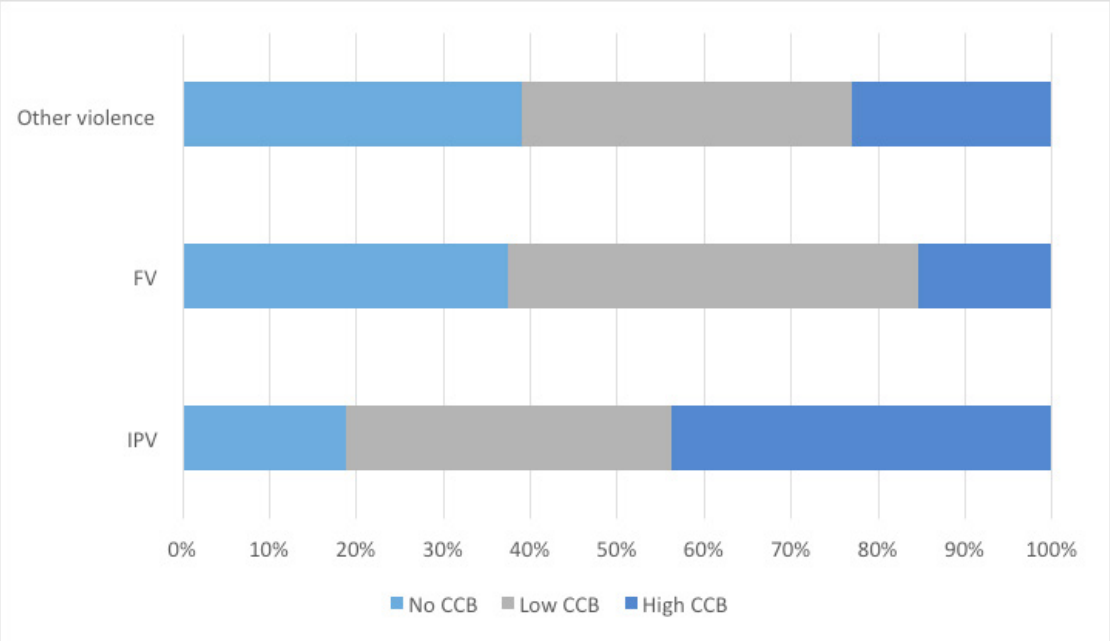
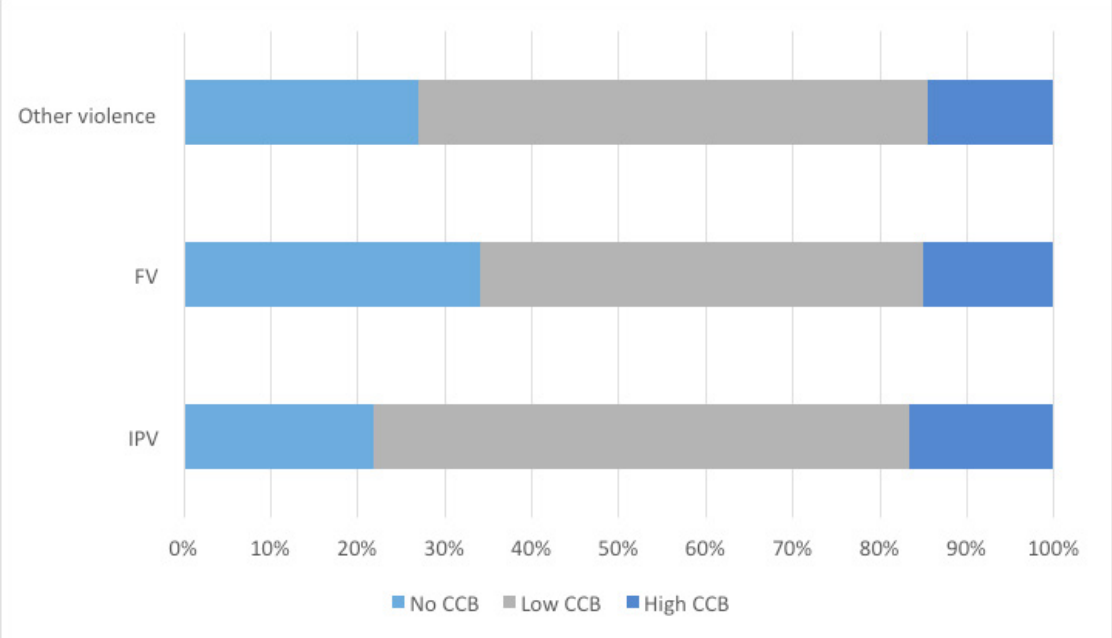


Figure 31 Proportion of respondents classified as no CCB, low CCB and high CCB by type of violence experienced at most recent incident (n=2,174)



Coercive control and substance use

Table 68 shows the usual alcohol use patterns of respondents and partners according to level of coercive control.

The proportion of respondents who engaged in each drinking behaviour (and the mean number of standard drinks consumed per typical occasion) was higher among those who engaged in a low level compared with no coercive control, and then higher again for respondents who engaged in a high level compared with no coercive control. The exception to this trend related to respondents who were current drinkers and who drank at hazardous levels—no significant difference was evident between those who engaged in a low versus a high level of coercive control. The finding of increased severity of coercive control was also evident in relation to partners' drinking behaviour. All comparisons were statistically significant, with the exception of the comparison between low versus high, and current drinker status.

A similar proportion of respondents and partners drank together, regardless of the level of coercive control. However, those who engaged in a high level of coercive control reported the highest incidence of engaging in heavy episodic drinking together.

Table 68 Respondent and partner drinking behaviours according to level of coercive control (n=4,735)						
	Level of coercive control % (n)			Significance		
Respondent	None	Low	High	None vs low	Low vs high	High vs none
Current drinker (yes)	75.2 (1,190)	84.0 (2,194)	83.5 (451)	***	ns	***
Standard drinks M (SD)[a]	1.98 (3.03)	2.37 (2.47)	2.88 (3.40)	***	*	***
HED (yes)	30.6 (484)	40.4 (1,054)	54.1 (292)	***	***	***
Hazardous drinker (yes)	39.9 (631)	46.4 (1,213)	49.4 (267)	***	ns	***
Drink together (yes)	59.1 (898)	70.3 (1,776)	70.1 (365)	***	ns	***
HED together (yes)	21.9 (336)	30.5 (775)	41.9 (216)	***	***	***
	Level of coercive control % (n)			Significance		
Partner (n=4,048)[b]	None	Low	High	None vs low	Low vs high	High vs none
Current drinker (yes)	70.3 (1,013)	76.5 (1,408)	79.5 (610)	***	ns	***
Standard drinks M (SD)[a]	1.72 (2.15)	2.13 (2.27)	3.27 (3.71)	***	***	***
HED (yes)	28.9 (416)	38.9 (716)	56.8 (436)	***	***	***
Hazardous drinker (yes)	37.7 (543)	43.6 (803)	55.7 (427)	***	***	***
Drink together (yes)	62.6 (981)	69.8 (1,452)	65.8 (606)	***	*	ns
HED together (yes)	22.6 (357)	29.8 (622)	37.7 (348)	***	***	***

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: Mann-Whitney U Test

b: only includes partners with complete AUDIT-C data

Note: SD=standard deviation

Table 69 shows the association between respondent drug use and coercive control. Partners' drug use behaviours were not surveyed and so relationships with partners' coercive controlling behaviour could not be analysed. The proportion of respondents who used illicit drugs significantly increased across levels of coercive control; 2.6 percent, 6.1 percent, and 14.3 percent of respondents who used drugs engaged in no, low, and high levels of coercive control, respectively.

Drug-using respondents who engaged in a high level of coercive control had a significantly higher mean level of substance dependence compared with those who engaged in a low level of coercive control. However, comparisons between respondents with a high versus a low level of substance dependency indicated that, while a significantly greater proportion of respondents who engaged in a high level of coercive control had a high level of substance dependency, there was no significant difference in level of dependency between those who engaged in no, versus a high level, of coercive control. The analytic sample for this comparison was 118, suggesting insufficient power to detect a significant difference.

Table 69 Respondent illicit drug use according to level of coercive control (n=4,735)

	Level of coercive control % (n)			Significance		
	None	Low	High	None vs low	Low vs high	High vs none
Illicit drug use (yes)	2.6 (41)	6.1 (159)	14.3 (77)	***	***	***
SDS M (SD)[ac]	5.36 (7.97)	6.16 (9.57)	10.67 (13.44)	ns	***	*
High dependency severity (vs low dependency severity)[a]	12.2 (5)	9.4 (15)	24.7 (19)	ns	**	ns
Drug of choice						
Marijuana and other depressants[b]	88.6 (31)	81.3 (113)	73.8 (45)	ns	ns	ns
Methamphetamine, MDMA and other stimulants[b]	11.4 (4)	18.7 (26)	26.2 (16)			

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: proportion of those who indicated illicit drug use over the past 12 months (n=277)

b: proportion of those who indicated a drug of choice (n=235)

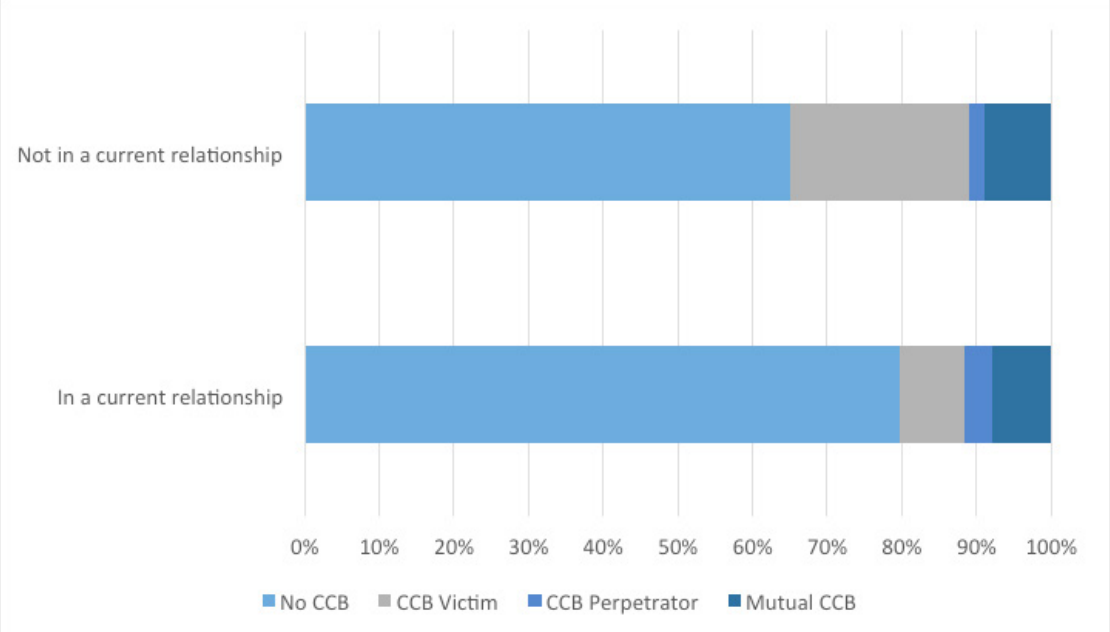
c: Mann-Whitney-U test

Note: SDS=Severity of Dependency Scale; SD=standard deviation

Couple-level coercive control types

Respondents were classified into four types of coercive controlling behaviour based on their own and their partner's level of coercive controlling behaviour as shown in Table 70. A significantly greater proportion of females (14.4%) were classified as 'CCB victims' than males (10.1%, p<0.001) and a significantly greater proportion of males (9.2%) were classified as 'mutual CCB' compared with females (7.0%, p<0.01). No significant differences existed in the proportion of males and females classified as engaging in no CCB, or as CCB victims. As shown in Figure 32, a significantly greater proportion of respondents who were not in a current relationship were classified as 'CCB victims' (24.1%) compared with respondents in a current relationship (8.6%, p<0.001, Phi=0.20). Conversely, a significantly greater proportion of those in current relationships were classified as 'no CCB' (79.8% vs 64.9%, p<0.001, Phi=-0.15) or as 'CCB perpetrators' (3.7% vs 1.9%, p<0.01, Phi=-0.04). Classification as 'mutual CCB' did not significantly vary by relationship status.

Figure 32 CCB type by relationship status (n=4,735)



Demographic characteristics comparing the three CCB types to those classified as 'no CCB' are presented in Table 71. Controlling coercive behaviour perpetrators were more likely to be aged 26 to 50 years, and less likely to be aged 66 or older. The gross household income of CCB perpetrators was less likely to be $25,001 to $50,000 and more likely to be $100,001 or more. Conversely, CCB victims were more likely to report a gross household income of $25,000 to $50,000 and less likely to report a gross household income of $50,001 or higher. Victims of CCB were also significantly more likely to report their highest education level was a vocational qualification and significantly less likely to indicate they had a tertiary qualification. These victims were also significantly less likely to be male than those who were categorised as 'no CCB'. Those classified as 'mutual CCB' were significantly more likely to be younger than 50 years and significantly less likely to be aged 51 or older. No significant differences were evident regarding place of birth (Australia vs other), location (regional vs metropolitan) and SEIFA disadvantage quintile.

Table 70 Couple-level coercive control types (n=4,735)

	Level of coercive controlling behaviour		
	Respondent	Their partner	% (n)
No CCB	low/no	low/no	76.2 (3,609)
CCB victim	low/no	high	12.4 (586)
CCB perpetrator	high	low/no	3.3 (155)
Mutual CCB	high	high	8.1 (385)

Note: CCB=coercive controlling behaviour

Table 71 Demographic characteristics of coercive control types (n=4,735)

	No CCB % (n)[a]	CCB perpetrator % (n)	CCB victim % (n)	Mutual CCB % (n)
Age group (years)				
18–25	17.8 (641)	21.9 (34)	18.3 (107)	35.3 (136)***
26–35	9.5 (342)	18.7 (29)***	11.4 (67)	18.7 (72)***
36–50	16.8 (605)	23.2 (36)*	19.5 (114)	21.8 (84)*
51–65	30.1 (1,088)	23.2 (36)	34.8 (204)*	17.1 (66)***
66+	25.9 (933)	12.9 (20)***	16.0 (94)***	7.0 (27)***
% male[b]	48.7 (1,753)	50.6 (78)	39.5 (230)***	55.1 (210)*
% born in Australia	73.6 (2,655)	76.1 (118)	76.3 (447)	75.1 (289)
Highest level of education				
Year 11 or below	18.3 (662)	16.1 (25)	21.3 (125)	16.1 (62)
Year 12 or equivalent	19.0 (684)	18.1 (28)	19.5 (114)	21.8 (84)
Vocational qualification	25.0 (904)	25.8 (40)	29.7 (174)*	23.6 (91)
Tertiary qualification	37.7 (1,359)	40.0 (62)	29.5 (173)***	38.4 (148)
Gross household income[c]				
$25,000 or less	14.2 (459)	11.4 (16)	22.3 (121)***	16.0 (57)
$25,001–$50,000	31.6 (1,023)	15.0 (21)***	32.6 (177)	28.6 (102)
$50,001–$100,000	34.8 (1,126)	37.1 (52)	29.5 (160)*	33.9 (121)
$100,001 or more	19.5 (631)	36.4 (51)***	15.7 (85)*	21.6 (77)
% resides in regional location[d]	21.3 (746)	22.1 (33)	23.7 (136)	19.5 (72)
SEIFA disadvantage index[e]				
1 (most disadvantage)	20.6 (740)	21.3 (33)	21.2 (124)	23.6 (90)
2	20.3 (731)	16.1 (25)	23.3 (136)	22.3 (85)
3	19.1 (689)	21.3 (33)	18.8 (110)	21.8 (83)
4	20.9 (752)	22.6 (35)	20.9 (122)	17.1 (65)
5 (least disadvantage)	19.1 (688)	18.7 (29)	15.8 (92)	15.2 (58)

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference group

b: n=4,721

c: n=4,279

d: n=4,593

e: n=4,720

Substance use

Alcohol use patterns of respondents and partners, alone and together, according to CCB classification are presented in Table 72. Coercive control behaviour perpetrators were significantly more likely to be a current drinker (p<0.05, Phi=0.04) and to engage in heavy episodic drinking with their partner (p<0.05, Phi=0.03). Victims of CCB were significantly more likely to engage in HED alone and with their partner (p<0.05, Phi=0.04; p<0.001, Phi=0.05). Further, CCB victims' partners consumed a significantly higher mean number of standard drinks per typical occasion (p<0.001), and were more likely to be a current drinker (p<0.001, Phi=0.06), engage in HED (p<0.001, Phi=0.13), and to be classified a hazardous drinker (p<0.001, Phi=0.09). Respondents classified as engaging in mutual CCB consumed a significantly higher mean number of standard drinks per typical occasion (p<0.001), and were significantly more likely to engage in HED alone and together with their partner (p<0.001, Phi=0.14; p<0.001, Phi=0.12), and to be classified as a hazardous drinker (p<0.001, Phi=0.05). Partners of respondents classified as engaging in mutual CCB consumed a significantly higher mean number of standard drinks per typical occasion (p<0.001), and were significantly more likely to engage in HED (p<0.001, Phi=0.16) and to be classified as a hazardous drinker (p<0.001, Phi=0.09).

Table 72 Respondent and partner drinking behaviours according to coercive controlling type (n=4,568)

	No CCB % (n)[a]	CCB perpetrator % (n)	CCB victim % (n)	Mutual CCB % (n)
Respondent				
Current drinker (yes)	81.0 (2,992)	88.4 (137)*	78.8 (462)	81.6 (314)
Standard drinks M (SD)[b]	2.17 (2.59)	2.46 (2.56)	2.55 (3.27)	3.05 (3.68)***
HED (yes)	36.0 (1,298)	42.6 (66)	41.0 (240)*	58.7 (226)***
Hazardous drinker (yes)	43.7 (1,577)	41.3 (64)	45.6 (267)	52.7 (203)***
Partner (n=4,048)[a]				
Current drinker (yes)	73.5 (2,312)	80.1 (109)	81.0 (357)***	77.6 (253)
Standard drinks M (SD)[c]	1.93 (2.23)	2.31 (2.76)	3.33 (2.79)***	3.24 (3.79)***
HED (yes)	34.2 (1,077)	40.4 (55)	54.7 (237)***	61.0 (199)***
Hazardous drinker (yes)	40.9 (1,287)	43.4 (59)	54.9 (242)***	56.7 (185)***
Together (n=4,589)				
Drink together (yes)	66.4 (2,320)	73.9 (113)	64.0 (354)	68.5 (252)
HED together (yes)	26.4 (927)	34.4 (52)*	32.9 (184)***	45.1 (164)***

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: reference group

b: Mann-Whitney U Test

c: only includes partners with complete AUDIT-C data

Notes: HED=heavy episodic drinking (consumption of 6 or more drinks on one occasion at least once in the past 12 months); SD=standard deviation

Respondent illicit drug use according to CCB classification is presented in Table 73. Victims of CCB (p<0.001, Phi=-0.06), perpetrators (p<0.001, Phi=-0.10), and mutual CCB (p<0.001, Phi=-0.13) were all significantly more likely to have used illicit substances in the past 12 months compared with those classified as 'no CCB'. Among illicit substance users, a significantly greater proportion of 'mutual CCB' were classified as having a high level of drug dependency compared with 'no CCB' (p<0.01, Phi=0.22).

Table 73 Respondent illicit drug use according to coercive control type (n=4,735)				
	No CCB %d (n)[a]	CCB perpetrator % (n)	CCB victim % (n)	Mutual CCB % (n)
Illicit drug use (yes)	4.3 (154)	14.8 (23)***	7.8 (46)***	14.0 (54)***
SDS M (SD)[b]	5.5 (8.6)	8.9 (12.4)	6.9 (10.5)	13.9 (14.8)***
High dependency severity (vs low dependency severity)[c]	9.1 (14)	21.7 (5)	13.0 (6)	25.9 (14)**

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference group

b: Mann-Whitney-U test

c: proportion of those who indicated illicit drug use over the past 12 months (n=277)

d: proportion of those who indicated a drug of choice (n=235)

Note: SDS=Severity of Dependency Scale; SD=standard deviation

Mental health

Table 74 shows depression, anxiety and stress symptoms of the three CCB types compared with those classified as 'no CCB'. Each mental health symptom was most severe for those classified as 'mutual CCB', while CCB victims and CCB perpetrators reported similar levels of depression, anxiety, and stress. Generally, each of the three CCB types reported more severe symptoms compared with those reporting 'no CCB'. Figures 33, 34 and 35 show the severity of depression, anxiety and stress symptoms by coercive control type.

Table 74 Severity of depression, anxiety and stress symptoms by coercive control type (n=4,735)				
	No CCB % (n)[a]	CCB perpetrator % (n)	CCB victim % (n)	Mutual CCB % (n)
Depression				
Normal	82.5 (2,979)	59.4 (92)***	52.9 (310)***	31.9 (123)***
Mild	6.0 (217)	11.6 (18)**	11.1 (65)***	7.5 (29)
Moderate	7.1 (257)	15.5 (24)***	17.1 (100)***	33.5 (129)***
Severe	2.1 (75)	6.5 (10)***	7.2 (42)***	10.1 (39)***
Extremely severe	2.2 (81)	7.1 (11)***	11.8 (69)***	16.9 (65)***
Anxiety				
Normal	87.6 (3,161)	69.0 (107)***	65.7 (385)***	41.3 (159)***
Mild	5.0 (179)	11.6 (18)***	8.4 (49)***	9.4 (36)***
Moderate	3.0 (109)	8.4 (13)***	9.4 (55)***	14.5 (56)***
Severe	1.7 (62)	4.5 (7)*[b]	6.0 (35)***	9.9 (38)***
Extremely severe	2.7 (98)	6.5 (10)*[b]	10.6 (62)***	24.9 (96)***
Stress				
Normal	93.0 (3,356)	77.4 (120)***	75.4 (442)***	57.4 (221)***
Mild	2.7 (97)	7.1 (11)**[b]	7.3 (43)***	12.2 (47)***
Moderate	2.4 (86)	7.7 (12)***[b]	8.5 (50)***	14.5 (56)***
Severe	1.2 (45)	5.8 (9)***	6.1 (36)***	10.6 (41)***
Extremely severe	0.7 (25)	1.9 (3)	2.6 (15)***	5.2 (20)***[a]

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference group

b: analysis contains at least one cell with an expected count of <5, Fisher's Exact Test is reported

Note: CCB=coercive controlling behaviour

Figure 33 Severity of depression symptoms by coercive control type (n=4,735)

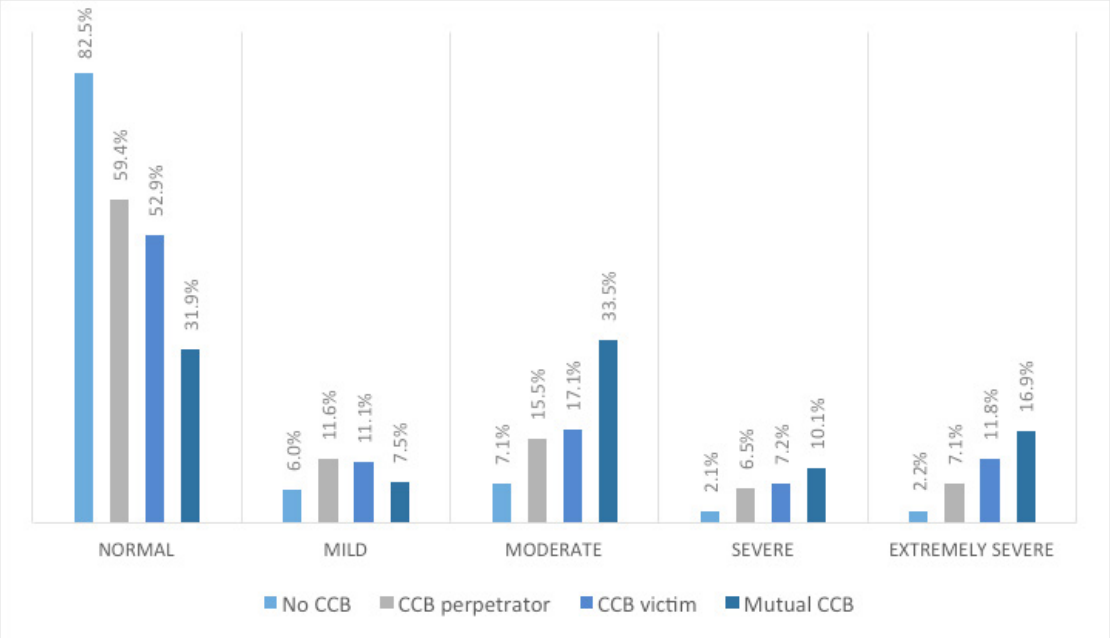


Figure 34 Severity of anxiety symptoms by coercive control type (n=4,735)

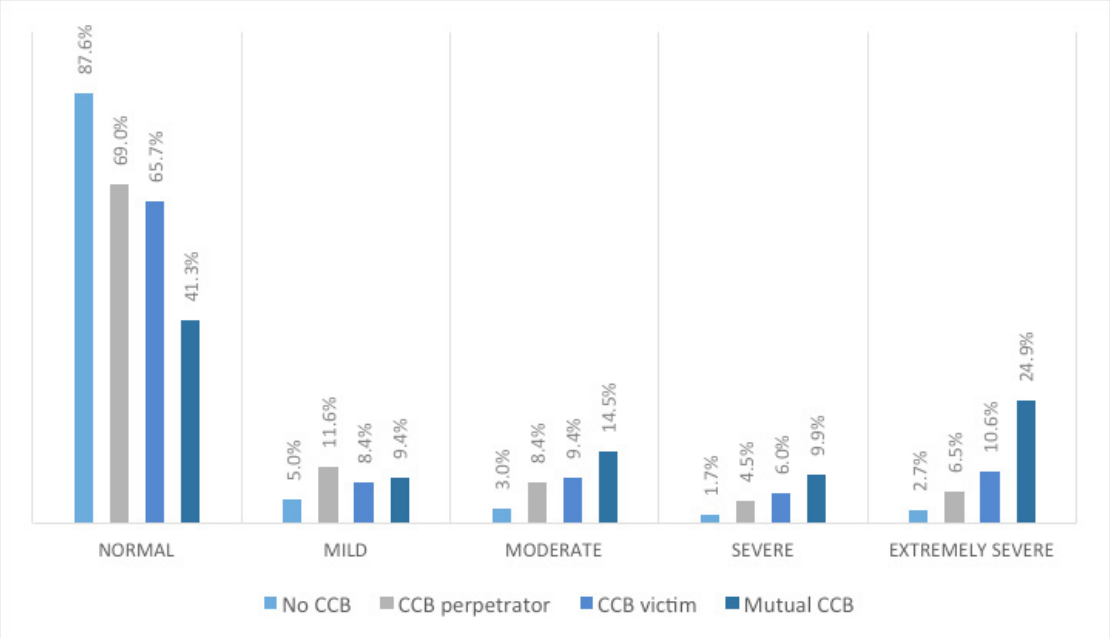
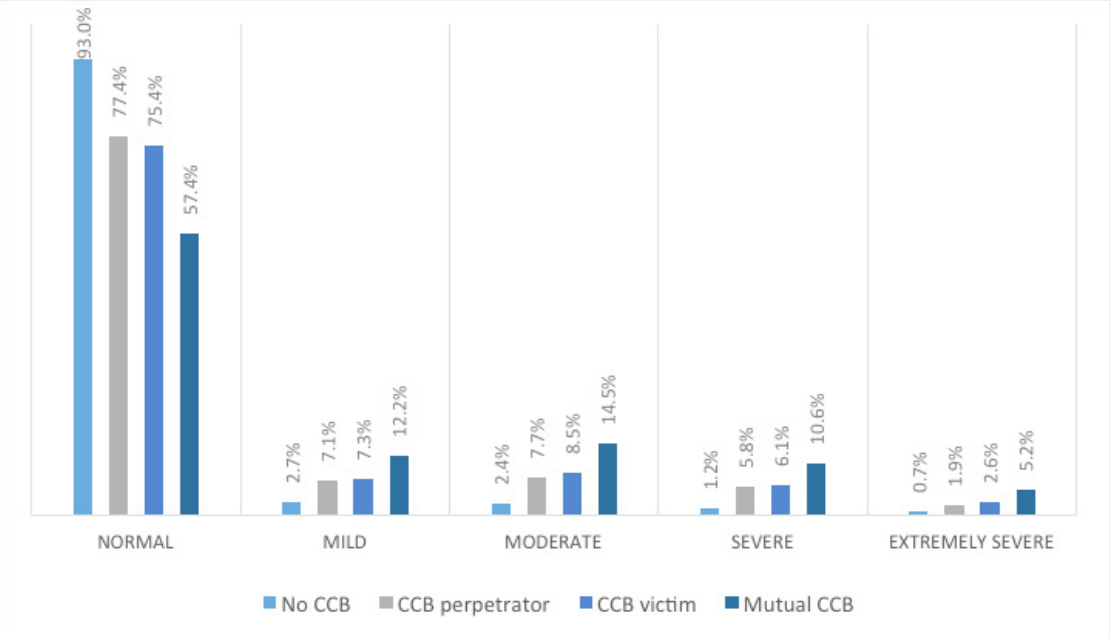


Figure 35 Severity of stress symptoms by coercive control type (n=4,735)



Comparing pilot and panel samples

To determine if there were any statistically significant differences between the pilot and panel data, a series of bivariate analyses were run on key demographic and outcome variables (lifetime violence, IPV, FV) with panel versus pilot case as the outcome variable.

Table 75 Bivariate analyses comparing pilot (n=923) and panel (n=5,118) samples

Variable	Pilot % (n)	Panel % (n)	Statistic
Age (M [SD])	57.90 (15.05)	47.69 (1,895)	U=1629034.5***
Age group (years)			X^2=256.0*** Cramer's V=0.21***
18–25	1.4 (13)	22.1 (1,130)	
26–35	7.2 (65)	10.6 (544)	
36–50	22.7 (205)	17.1 (874)	
51–65	34.8 (315)	28.3 (1,446)	
66+	33.8 (306)	21.7 (1,113)	
% male	48.0 (438)	48.0 (2,450)	X2=0.00 Phi=0.00
% born in Australia	78.5 (713)	74.7 (3,824)	X2=6.01* Phi=-0.03*
Highest level of education			X2=93.43*** Cramer's V=0.12***
Year 11 or below	21.7 (198)	18.2 (939)	
Year 12 or equivalent	7.3 (67)	20.7 (1,053)	
Vocational qualification	31.5 (288)	24.8 (1,269)	
Tertiary qualification	39.4 (360)	36.3 (1,857)	

Table 75 Bivariate analyses comparing pilot (n=923) and panel (n=5,118) samples

Variable	Pilot % (n)	Panel % (n)	Statistic
Gross annual household income			X^2=116.89*** Cramer's V=0.15***
$25,000 or less	13.3 (118)	16.2 (741)	
$25,001–$50,000	20.5 (181)	30.4 (1,395)	
$50,001–$100,000	30.5 (270)	33.7 (1,543)	
$100,001 or more	35.7 (316)	19.7 (903)	
Marital status			X^2=149.44*** Cramer's V=0.16***
Never married	8.9 (81)	27.6 (1,411)	
Married/de facto or otherwise in a relationship	71.1 (651)	58.1 (2,967)	
Separated, widowed, divorced	20.0 (183)	14.2 (727)	
% residing in a regional location	18.1 (164)	21.2 (3,893)	X^2=4.58* Phi=-0.03*
% experienced lifetime violence	50.9 (470)	44.5 (2,278)	X^2=12.96*** Phi=0.05***
% experienced IPV[a]	38.0 (166)	41.8 (952)	X^2=2.19 Phi=-0.03
% experienced FV[a]	15.6 (68)	13.1 (299)	X^2=1.86 Phi=0.03
% of most recent incidents involved alcohol[a,b]	39.5 (170)	32.7 (745)	X^2=7.54** Phi=0.05**
% of most recent incident involved drugs[a,b]	12.5 (52)	10.6 (241)	X^2=1.30 Phi=0.02

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: analysis excludes participants who did not report lifetime violence

b: the results related to general alcohol and other drug use were not included. The reference periods used to assess general alcohol and drug use in the pilot and panel surveys differed, and therefore the data on these variables could not be combined

Note: M=mean. SD=standard deviation

Table 75 shows statistically significant differences between the pilot and panel samples on a number of demographic and violence variables. In the panel survey, researchers deliberately oversampled younger individuals aged 18 to 25 years and respondents from regional locations so each demographic group comprised at least 20 percent of the final sample. To determine if the bivariate differences in demographic and key variables were associated with the oversampling methodology, a series of separate hierarchical binary logistic regressions were run, controlling for location (metro vs regional) and age in the first step, and each significant variable within in the second step. The results of these analyses are presented in Table 76.

Table 76 Hierarchical logistic regressions of key demographic and predictor variables predicting pilot survey (versus panel) controlling for age and geographic region[a]

Variable	OR	95%CI
Born in Australia (yes)	0.69***	0.58–0.82
Highest level of education		
Year 11 or below (reference)		
Year 12 or equivalent	0.43***	0.32–0.58
Vocational qualification	1.23*	1.00–1.52
Tertiary qualification	1.15	0.94–1.41
Gross annual household Income		
$25,000 or less (reference)		
$25,001–$50,000	0.73*	0.57–0.96
$50,001–$100,000	1.40**	1.09–1.80
$100,000 or more	3.48***	2.70–4.49
Marital status		
Never married (reference)		0.33–0.62
Married/de facto	2.25***	1.73–2.93
Separated, divorced, widowed	2.18***	1.60–2.98
Experience lifetime violence (yes)	1.37***	1.18–1.59
Alcohol involved in incident (yes)	1.32*	1.06–1.65

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: controlling for age and location in step 1

Notes: OR=odds ratio 95%. CI=95% confidence interval

After controlling for age and location, respondents who completed the pilot survey were less likely to have been born outside Australia, were more highly educated, were more likely to report a higher household income, to report they were currently or previously married (ie currently separated, divorced or widowed) or in a de facto relationship, were more likely to report lifetime violence, and were more likely to report that their most recent experience of violence involved alcohol.

Taken together, the results suggest that the pilot and panel samples were systematically different. In addition, changes to the content or phrasing of several key survey questions meant that combining the two samples on these questions would not allow meaningful interpretation. Given that researchers used different recruitment methodologies in the pilot and panel survey phases, and the results provided evidence that the samples were unique, it was decided that the pilot and panel data would not be combined.

Police data results

Australian Capital Territory police data results

The following explores trends for domestic violence incidents attended by ACT police between 1 July 2009 and 30 June 2014. They are presented separately for individuals and incidents. Data include domestic violence incidents involving intimate partners and other family members and compares intimate partner violence with family violence.

Individuals

Offenders

Data regarding DV offenders in the Australian Capital Territory were not linked to specific DV victims or incidents and therefore were not available for analysis.

Victims

A total of 5,581 episodes of victimisation, including 4,474 unique victims and 699 repeat victims, were recorded across all DV incidents in the ACT during the reporting period. These include 1,978 (35.4%) FV and 3,082 (55.2%) IPV victims. For 521 individuals, the relationship between the victim and the offender was that of a non-family member. Table 77 presents the number of victims recorded as present at FV and IPV incidents. Most incidents involved only one victim.

Table 77 Number of victims recorded at FV and IPV incidents, ACT (n=5,064)

	FV[a]		IPV[a]		All incidents	
	n	%	n	%	n	%
1	1,525	89.3	2,760	92.2	4,623	91.3
2	163	9.5	208	6.9	390	7.7
3	15	0.9	20	0.7	37	0.7
4+	5	0.3	7	0.2	14	0.3

a: n=4,703

While most victims (74.6%) were female, a significantly greater proportion of FV victims were male (35.3%) compared with IPV victims (16.2%, $p<0.001$, Phi=-0.22). Table 78 shows the proportion of male and female victims across age groups.

Table 78 Proportion of male and female victims by age group, ACT (n=5,581)						
	Male		Female		All victims	
Age (years)	n	%	n	%	n	%
0–4	42	51.2	40	48.8	82	1.5
5–11	113	45.7	134	54.3	247	4.4
12–17	134	27.6	352	72.4	486	8.7
18–24	196	16.7	976	83.3	1,172	21.0
25–34	265	19.5	1,095	80.5	1,360	24.4
35–49	412	26.4	1,146	73.6	1,558	27.9
50–59	163	36.1	289	63.9	452	8.1
60–69	62	40.8	90	59.2	152	2.7
70–84	31	44.3	39	55.7	70	1.3
85+	1	50.0	1	50.0	2	<0.1

A higher proportion of child victims of FV (60.3%) and IPV (92.1%) were female, with most child victims involved in family violence related incidents (see Table 79).

Table 79 Proportion and gender of FV and IPV incidents involving a child victim per year, ACT (n=5,064)								
	Female		Male		Female		Male	
	n	%	n	%	n	%	n	%
2009	40	51.9	32	41.6	5	6.5	0	0.0
2010	74	50.0	48	32.4	25	16.9	1	0.7
2011	92	54.4	58	34.3	17	10.1	2	1.2
2012	71	51.8	43	31.4	19	13.9	4	2.9
2013	76	55.9	41	30.1	18	13.2	1	0.7
2014	34	44.7	33	43.4	9	11.8	0	0.0

The relative socioeconomic disadvantage of victim residential location is presented at the area level in Table 80. Generally, the proportion of episodes of victimisation was greatest in areas of the most disadvantage (1st SEIFA quintile) and steadily decreased thereafter. However, the proportion of victims in the third quintile, especially for FV, was greater compared with the second quintile.

Table 80 Proportion of FV and IPV victims residing within each socioeconomic disadvantage quintile, ACT (n=4,658)						
	FV		IPV		All victims[a]	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantage)	500	30.3	701	27.0	1,307	23.4
2	326	19.8	620	23.9	1,040	18.6
3	440	26.7	661	25.5	1,209	21.7
4	261	15.8	358	13.8	682	12.2
5 (least disadvantage)	121	7.3	252	9.7	420	7.5

a: postcodes of 923 victims could not be classified into a quintile

Note: only postcodes for victim residence were given, so disadvantage is a person-level variable for the Australian Capital Territory. As some victims involved in the same incident live in multiple quintiles, it could not be aggregated to incident level

Incidents

The ACT police attended 5,064 DV incidents across the reporting period, including 2,995 IPV and 1,708 FV incidents. Of these, 361 incidents could not be classified as IPV or FV with the relationship between the victim/s and offender/s (all) identified as either: 'known non-family-other', 'person not known to victim', 'relationship is not known', or 'no offender involved'. Thus, 'all incidents' includes these incidents that were unable to be classified as well as all FV and IPV incidents. Table 81 shows the proportion of FV and IPV incidents per year. Across all years, there was a greater proportion of IPV than FV incidents.

Table 81 Proportion of FV and IPV incidents per year, ACT (n=5,064)

	FV[b]		IPV[b]		All incidents[a]	
Year	n	%	n	%	n	Rate per 10,000
2009	175	36.8	301	62.7	469	n.a.
2010	359	35.5	653	63.7	1,002	30.5
2011	346	36.2	609	63.1	940	27.6
2012	349	38.2	565	60.9	901	25.6
2013	319	36.5	554	62.8	865	24.1
2014	160	33.8	313	65.5	469	n.a.

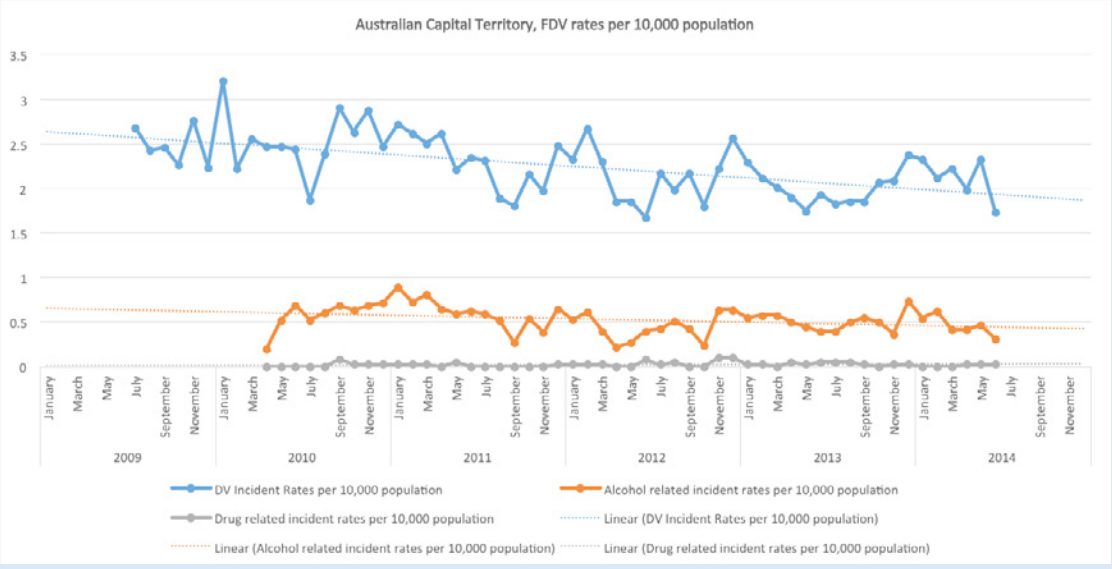
a: the proportion of all incidents

b: n=4,703

n.a.=not applicable (only 6 months of data available for these years)

Figure 36 shows that the rates of all FDV incidents per 10,000 people decreased between 2009 and 2014. This trend is consistent for alcohol-related incidents and drug-related incidents.

Figure 36: Alcohol, drug and all incident rates per 10,000 population over reporting period, ACT



Alcohol-related incidents

Of all incidents, 23.9 percent were alcohol-related. Across the reporting period there was a significantly greater proportion of alcohol-related IPV (27.6%) compared with alcohol-related FV incidents (18.3%, $p<0.001$; Phi=0.10)—see Table 82.

Table 82 Proportion of alcohol-related FV and IPV incidents per year, ACT (n=4,186)						
	FV[b]		IPV[b]		All incidents[a]	
Year	n	%	n	%	n	Rate per 10,000
2009[a]	–	–	–	–	–	–
2010	37	14.6	144	32.4	179	25.9
2011	71	20.5	183	30.1	250	26.6
2012	53	15.2	134	23.5	182	20.2
2013	71	22.3	148	26.7	215	24.9
2014	29	18.2	75	24.1	103	22.0

a: alcohol use not available for 2009 and up until April 2010 (n=896 incidents)

b: n=3,908

Drug-related incidents

There were few drug-related DV incidents (1.1%). No significant difference was evident in the proportion of drug-related IPV (1.1%) and FV (1.1%) incidents (p>0.05)—see Table 83.

Table 83 Proportion of drug-related FV and IPV incidents per year, ACT (n=5,062)						
	FV[b]		IPV[b]		All incidents[a]	
Year	n	%	n	%	n	%
2009	1	0.6	3	0.7	3	0.6
2010	2	0.6	6	0.9	8	0.8
2011	3	0.9	2	0.3	5	0.5
2012	6	1.7	11	2.0	17	1.9
2013	7	2.2	7	1.3	14	1.6
2014	0	0.0	3	1.0	3	0.6

a: n=4,701

Child involvement (victim)

Child-witnessed DV incidents were identified by the involvement of victims younger than 18 years. Overall, 14.7 percent of incidents involved a child victim, including 32.2 percent of FV and 4.8 percent of IPV incidents (p<0.001, Phi=-0.37). The proportion of incidents involving a child victim did not significantly vary across the reporting period (ps>0.05)—see Table 84.

Table 84 Proportion of FV and IPV incidents involving a child victim per year, ACT (n=5,064)						
	FV[a]		IPV[a]		All incidents	
Year	n	%	n	%	n	%
2009	60	34.3	12	4.0	77	14.2
2010	107	29.8	37	5.7	149	13.4
2011	124	35.8	30	4.9	173	16.9
2012	105	30.1	27	4.8	141	14.6
2013	98	30.7	26	4.7	134	14.5
2014	56	35.0	13	4.2	71	14.3

a: n=4,703

A smaller proportion of IPV and FV incidents involving a child victim or breach of justice orders were alcohol-related compared with incidents not involving a child. This difference was significant for FV only (p<0.001, Phi=-0.17). Only five DV incidents involving a child victim were drug-related (drugs were seized at the incident).

Breach of family violence orders

Few DV incidents involved either breach of a FVO (7.9%) or a justice order or JOF (5.0% including a breach of bail, restraining order, parole, and other order, although the offence category was not available for 111 incidents). A significantly greater proportion of IPV incidents involved breach of a FVO (11.5% vs 2.6%, p<0.001, Phi=0.16) or JO (6.6% vs 2.7%, p<0.001, Phi=0.09) compared with FV incidents. The proportion of incidents involving breach of FVOs and JOs did not vary significantly across the reporting period (p>0.05).

Tables 85 and 86 show a smaller proportion of incidents involving breach of FVOs or JOs were alcohol-related compared with incidents not involving breaches. These differences were significant for IPV only (p<0.001, Phi=-0.16; p<0.001, Phi=-0.11). Only two incidents involving breach of a FVO and three incidents involving breach of a JO were drug-related (drugs were seized at the incident).

Table 85 Proportion of FV and IPV incidents that involved a family violence order breach that were alcohol-related, ACT (n=4,078)

	No FVO breach		FVO breach	
	n	%	n	%
FV[a]	253	18.5	3	8.6
IPV[a]	646	30.1	20	7.1
All incidents	950	25.3	24	7.3

a: n=3,825

Table 86 Proportion FV and IPV incidents that involved a justice order breach that were alcohol-related, ACT (n=4,078)

	No FVO breach		FVO breach	
	n	%	n	%
FV[a]	253	18.5	3	8.6
IPV[a]	646	30.1	20	7.1
All incidents	950	25.3	24	7.3

a: n=3,825

Note: JO=justice order

Offence against the person

A large proportion (65.3%) of incidents involved an offence against the person (ie homicide and related offences, acts to cause injury, sexual assault and related offences, dangerous or negligent acts endangering individuals, abduction, harassment and other offences against the person). A significantly smaller proportion of IPV (64.1%) than FV (71.9%) incidents involved an offence against the person (p<0.001, Phi=-0.08). The proportion of incidents involving an offence against the individuals did not vary significantly across the reporting period (p>0.05).

As shown in Table 87, a third of all IPV incidents involving an offence against the person were alcohol-related. A significantly greater proportion of IPV incidents involving an offence against the person were alcohol-related compared with incidents not involving an offence against the person (p<0.001, Phi=0.18). No significant difference was evident in the proportion of alcohol-related and unrelated FV incidents that involved an offence against the person (p>0.05). Of drug-related incidents (n=52), 32 involved an offence against the person.

Table 87 Proportion of alcohol-related FV and IPV incidents that involved an offence against the person, ACT (n=4,168)

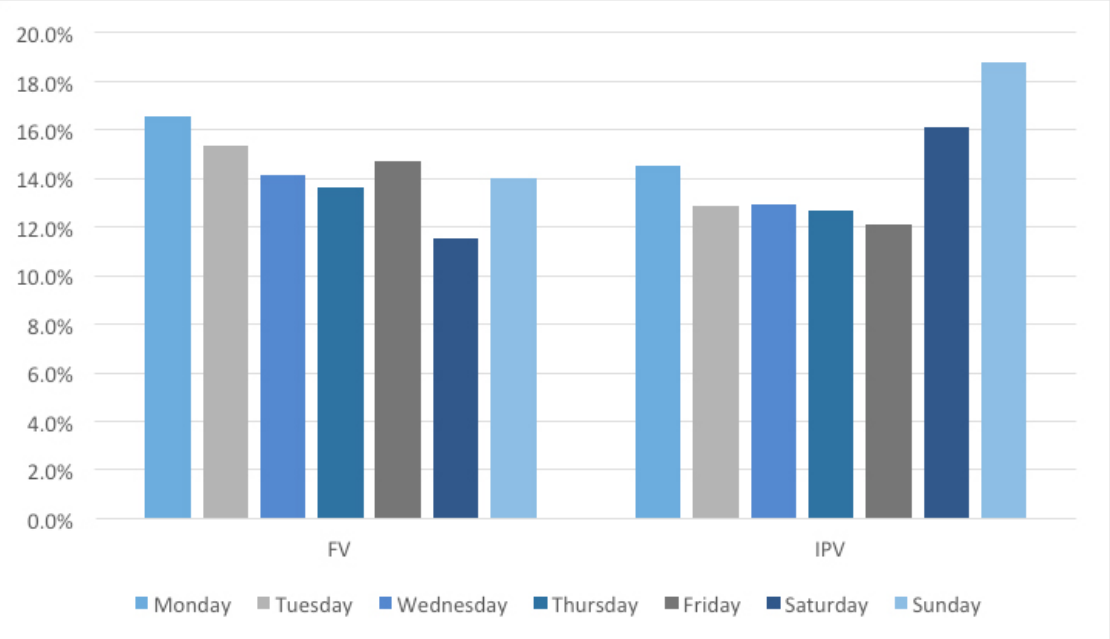
	No offence against person		Offence against person	
	n	%	n	%
FV[a]	77	19.3	184	17.9
IPV[a]	150	16.8	534	33.6
All incidents	245	17.2	752	27.4

a: n=3,908

Day and time of incident

Figures 37 and 38 show the day and time at which DV incidents occurred, respectively.

Figure 37 Proportion of FV and IPV incidents that took place on each day of the week, ACT (n=5,064)



Intimate partner violence incidents most frequently took place on Sunday (18.8%) and Saturday (16.1%), while incidents of family violence most frequently occurred on Monday (16.6%) and Tuesday (15.3%). A significantly greater proportion of FV incidents took place on Tuesday ($p<0.05$, Phi=-0.03) and Friday ($p<0.05$, Phi=-0.04) compared with IPV incidents. A significantly greater proportion of IPV incidents took place on Saturday ($p<0.001$, Phi=0.06) and Sunday ($p<0.001$, Phi=0.06) compared with FV incidents. No significant differences were evident in the proportion of FV and IPV incidents that took place on Monday, Wednesday and Thursday.

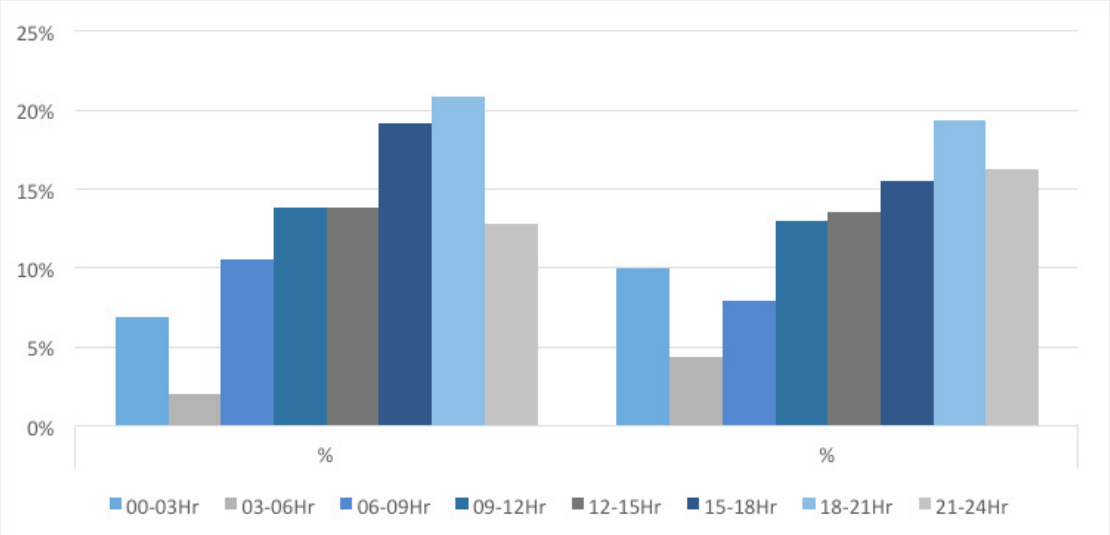
As shown in Table 88 the proportion of any alcohol-related incidents was greatest on Saturday and Sunday. A significantly greater proportion of alcohol-related IPV incidents than FV incidents took place each day of the week with the exception of Monday and Thursday ($p<0.05$, Phi=0.09–0.13).

Table 88 Proportion of IPV and FV incidents that were alcohol-related by day of the week, ACT (n=4,168)

	FV[a]		IPV[a]		All incidents	
Day	n	%	n	%	n	%
Monday	45	19.1	70	19.3	126	19.9
Tuesday	30	13.5	67	20.8	102	17.7
Wednesday	30	14.6	72	22.3	110	19.5
Thursday	36	18.2	76	24.9	115	21.7
Friday	35	16.4	78	25.8	120	21.6
Saturday	40	25.5	151	37.7	199	33.0
Sunday	45	23.1	170	36.5	225	31.9

a: n=3,908

Figure 38 Proportion of FV and IPV incidents that took place during each three-hour interval, ACT (n=5,064)



Domestic violence incidents least often took place from 12 am to 9 am, and most often from 3 to 9 pm. Intimate partner violence incidents were significantly more likely to take place between 9 pm and 6 am ($p<0.01$), and FV incidents were significantly more likely to take place from 6 to 9 am ($p<0.01$, Phi=-0.04) and 3 to 6 pm ($p<0.001$, Phi=-0.05).

As shown in Table 89, alcohol-related IPV incidents least often occurred from 9 am to 3pm, and more often occurred later in the day, with more than half of all incidents occurring between 12 am and 6 am. Intimate partner violence incidents that occurred between 6 and 9 am ($p<0.001$, Phi=0.19), 3 to 6 pm ($p<0.05$, Phi=0.08), and 6 to 9 pm ($p<0.001$, Phi=0.13) were significantly more likely to be alcohol-related compared with FV incidents occurring during these times.

Table 88 Proportion of IPV and FV incidents that were alcohol-related by day of the week, ACT (n=4,168)						
	FV[b]		IPV[b]		All incidents[a]	
Hours	n	%	n	%	n	%
00–03	45	43.3	130	52.8	183	49.5
03–06	18	64.3	65	58.6	87	56.1
06–09	7	4.5	32	16.4	41	10.9
09–12	14	7.1	21	6.4	38	6.8
12–15	13	6.7	28	8.0	43	7.3
15–18	33	12.4	72	18.5	107	15.5
18–21	69	23.0	167	35.8	247	30.5
21–24	62	34.8	169	42.9	251	40.7

a: alcohol use not available for 2009 and up until April 2010 (n=896 incidents)

b: n=3,908

Repeat victims

Of the 5,064 incidents ACT police attended across the reporting period, 34.9 percent involved a repeat victim. A significantly greater proportion of IPV (41.1%) than FV (26.9%; $p<0.001$, Phi=0.14) involved a repeat victim. The proportion of DV incidents involving repeat victims was significantly smaller in 2009 ($p<0.01$, Phi=-0.4) and 2010 ($p<0.05$, Phi=-0.03) compared with all other years.

Table 90 Proportion of FV and IPV incidents involving recidivist offenders, ACT (n=5,064)						
	FV[a]		IPV[a]		All incidents	
Year	n	%	n	%	n	%
2009	38	21.7	114	37.9	157	29.0
2010	90	25.1	245	37.5	358	32.2
2011	96	27.7	266	43.7	376	36.7
2012	103	29.5	237	41.9	355	36.7
2013	84	26.3	243	43.9	342	37.1
2014	48	30.0	125	39.9	180	36.2

a: n=4,703

Substance involvement

Table 91 shows the proportion of alcohol-related incidents involving repeat victims. For IPV only, a significantly smaller proportion of incidents involving repeat victims were alcohol-related compared with those that did not involve repeat victims ($p<0.01$, Phi=-0.06).

Table 91 Proportion of FV and IPV incidents involving repeat victims that were alcohol-related, ACT (n=4,168)				
	No repeat victim		Repeat victim	
	n	%	n	%
FV[b]	178	17.2	83	21.1
IPV[b]	430	29.9	254	24.3
All incidents[a]	649	24.3	348	23.2

a: alcohol use information was available from May 2010 (n=896 incidents)

b: n=3,908

Child victimisation

Table 92 shows the proportion of incidents involving repeat victims that also involved a child victim. For family violence only, a significantly smaller proportion of incidents that involved repeat victims involved a child victim compared with those that did not involve repeat victims (p<0.001, Phi=-0.14).

Table 92 Proportion of FV and IPV incidents involving repeat victims that involved child victims, ACT (n=5,064)

	No repeat victim		Repeat victim	
	n	%	n	%
FV[a]	453	36.3	97	21.1
IPV[a]	87	4.9	58	4.7
All incidents	583	17.7	162	9.2

a: n=4,703

Time of day and day of the week

No significant difference was evident in the proportion of FV and IPV incidents involving repeat victims that occurred across day of the week (ps<0.05). Compared with other times, FV incidents involving repeat victims were significantly more likely to occur between 3 and 6 am (p<0.01, Phi=0.06), and less likely to occur from 6 to 9 am (p<0.05, Phi=-0.05), while IPV incidents involving repeat victims were significantly more likely to occur from 12 pm to 3 pm (p<0.01, Phi=0.05).

Weapons

Of the 5,064 incidents ACT police attended across the reporting period, 14.0 percent involved weapons. The proportion of weapon-related incidents did not vary significantly across the reporting period (p<0.05), and was more likely for FV (15.9%) than IPV (12.6%) incidents (p<0.01, Phi=-0.05).

Substance involvement

A significantly greater proportion of DV incidents involving a weapon (28.0%) were alcohol-related than incidents not involving a weapon (23.3%, p<0.05, Phi=0.04). This difference was significant for IPV only, 34.1 percent of IPV incidents involving a weapon were alcohol-related compared with 26.6 percent not involving a weapon (p<0.01, Phi=0.05).

Child victimisation

No significant difference existed in the proportion of incidents that involved a weapon and whether they also involved a child victim or not (15.8% vs 14.5%, p>0.05).

Breach of an intervention order

A significantly lower proportion of DV incidents that involved a weapon resulted in a breach of a family violence order (9.0% vs 1.5%, p<0.001, Phi=-0.09) or a breach of a justice order (0.9% vs 5.7%, p<0.001, Phi=-0.07). These were significant for FV (ps<0.05) and IPV (ps<0.001) incidents.

Time of day and day of week

No significant difference was evident in the proportion of incidents that involved a weapon by day of week or time of day (ps<0.05).

Multivariate correlates of incident characteristics

The following shows multivariate correlates of DV incident characteristics. A series of multivariate models were conducted to examine key incident characteristics that are unique correlates of:

- alcohol involvement;
- child victimisation;
- breach of FVOs;
- breach of justice orders; and
- repeat victimisation.

Multivariate logistic regression models were conducted for all incidents and separately for FV and IPV incidents.

Alcohol involvement

Three separate binary logistic regressions were performed to examine if child victimisation, repeat victimisation, breach of FVOs, breach of justice orders, and the presence of weapons at the incident were uniquely associated with an alcohol-related incident (no vs yes) at all incidents (Table 93), IPV incidents (Table 94) and FV incidents (Table 95).

All incidents

Incidents involving a child victim (OR=0.33), breach of an FVO (OR=0.20), or breach of a justice order (OR=0.27) were significantly less likely to involve alcohol. Repeat victimisation and the presence of weapons at the incident were not uniquely associated with alcohol involvement at the incident.

The model accounted for five to seven percent of the variance in alcohol involvement at the incident (Cox & Snell R Square=0.05; Negelkerke R Square=0.07) and, although adequate model fit was indicated (Hosmer and Lemeshow Test >0.05), zero percent of alcohol-related incidents were correctly predicted.

IPV incidents

Incidents involving either a breach of an FVO (OR=0.17) or justice order (OR=0.20) were significantly less likely to involve alcohol. The involvement of a child victim, a repeat victim, or the presence of a weapon, were not uniquely associated with alcohol use at IPV incidents.

Overall the model accounted for five to eight percent of the variance in alcohol involvement at the incident (Cox & Snell R Square=0.05; Negelkerke R Square=0.08). Although adequate model fit was indicated (Hosmer and Lemeshow Test >0.05), zero percent of alcohol-related IPV incidents were correctly predicted.

FV incidents

The only significant predictor of family violence incidents was child victimisation, which significantly decreased the odds that an incident was alcohol-related (OR=0.31). Overall, the model accounted for four to six percent of the variance in alcohol involvement at the incident (Cox & Snell R Square=0.04; Negelkerke R Square=0.06). Although adequate model fit was indicated (Hosmer and Lemeshow Test >0.05), zero percent of alcohol-related FV incidents were correctly predicted.

Table 93 Binary logistic regression associated with alcohol involvement in incident, ACT (n=4,078)				
	B	Wald X^2	OR	95% CI
Child victim (yes)	-1.12	71.16	0.33***	0.25–0.42
Repeat victim (yes)	0.02	0.09	1.02	0.88–1.20
Breach FVO (yes)	-1.62	55.26	0.20***	0.13–0.30
Breach justice order (yes)	-1.31	28.22	0.27***	0.17–0.44
Weapon present (yes)	0.11	1.22	1.12	0.91–1.38

*** statistically significant at p<0.001

Note: FVO=family violence order.

Table 94 Binary logistic regression associated with alcohol involvement at intimate partner violence incidents, ACT (n=2,425)				
	B	Wald X^2	OR	95% CI
Child victim (yes)	-0.27	1.49	0.77	0.50–1.17
Repeat victim (yes)	-0.07	0.53	0.93	0.77–1.13
Breach FVO (yes)	-0177	54.42	0.17***	0.11–0.27
Breach justice order (yes)	-1.60	29.20	0.20***	0.11–0.36
Weapon present (yes)	0.15	1.21	1.26	0.89–1.51

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

Note: FVO=family violence order

Table 95 Binary logistic regression associated with alcohol involvement at family violence incidents, ACT (n=1,400)				
	B	Wald X^2	OR	95% CI
Child victim (yes)	-1.16	39.04	0.31***	0.22–0.45
Repeat victim (yes)	0.16	1.02	1.17	0.86–1.58
Breach FVO (yes)	-1.11	3.26	0.33	0.10–1.10
Breach justice order (yes)	-0.62	1.58	0.54	0.20–1.42
Weapon present (yes)	0.07	0.16	1.08	0.75–1.56

*** statistically significant at p<0.001

Note: FVO=family violence order

Child victim

Three separate binary logistic regressions were performed to examine if repeat victimisation, breach of family violence orders, breach of justice orders, presence of weapons, and alcohol involvement were uniquely associated with child victimisation (no vs yes) at all incidents (Table 96), IPV incidents (Table 97) and FV incidents (Table 98).

All incidents

In the final model, repeat victimisation (OR=0.53), breach of FVOs (OR=0.14), breach of justice orders (OR=0.27), and involvement of alcohol (OR=0.33) were significantly associated with decreased odds that the incident involved a child victim. The final model accounted for five to nine percent of the variance in child victimisation at the incident (Cox & Snell R Square=0.05; Negelkerke R Square=0.09) and adequately fitted the model (Hosmer and Lemeshow Test >0.05). However, the model was biased to predicting no child victimisation, with zero percent of incidents involving child victims being correctly predicted.

Intimate partner violence incidents

In the final model, the only significant predictor was a breach of FVOs, which significantly decreased the odds that an incident involved alcohol (OR=0.23). Overall the model accounted for about one percent of the variance in child victimisation in IPV incidents (Cox & Snell R Square=0.005; Negelkerke R Square=0.02). Although model fit indices indicated adequate model fit (Hosmer and Lemeshow Test >0.05), the low variance accounted for by the model suggests that overall the variables were poor predictors of child victimisation at IPV incidents.

Family violence incidents

In the adjusted model, repeat victimisation (OR=0.49), breach of FVOs (OR=0.32), breach of justice orders (OR=0.14), and alcohol involvement (OR=-0.31) were each associated with decreased odds that an incident involved a child victim. The final model accounted for seven to 10 percent of the variance in child victimisation at the incident (Cox & Snell R Square=0.07; Negelkerke R Square=0.10) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of FV incidents involving child victims.

Table 96 Binary logistic regression associated with child victimisation at incident, ACT (n=5,064)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Repeat victim (yes)	-0.64	37.44	0.53***	0.43–0.65	-0.64	36.44	0.53***	0.43–0.65
Breach FVO (yes)	-1.77	26.53	0.17***	0.09–0.33	-1.93	31.64	0.14***	0.07–0.28
Breach justice order (yes)	-1.14	12.02	0.32***	0.17–0.61	-1.29	15.31	0.27***	0.14–0.52
Weapon present (yes)	-0.06	0.24	0.94	0.73–1.20	-0.05	0.15	0.69	0.74–1.22
Alcohol involvement (yes)					-1.12	71.20	0.33***	0.25–0.42

*** statistically significant at p<0.001

Note: FVO=family violence order

Table 97 Binary logistic regression associated with child victimisation at intimate partner violence incidents, ACT (n=2,295)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Repeat victim (yes)	0.10	0.27	1.11	0.76–1.61	0.10	0.24	1.10	0.75–1.61
Breach FVO (yes)	-1.40	7.33	0.25**	0.09–0.68	-1.46	7.89	0.23**	0.08–0.64
Breach justice order (yes)	-0.22	0.30	0.58	0.36–1.77	-0.28	0.47	0.76	0.34–1.68
Weapon present (yes)	0.21	0.65	0.42	0.74–2.05	0.22	0.70	1.24	0.75–2.07
Alcohol involvement (yes)					-0.27	1.49	0.22	0.50–1.17

** statistically significant at p<0.01.

Note: FVO=family violence order

Table 98 Binary logistic regression associated with child victimisation at family violence incidents, ACT (n=1,708)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Repeat victim (yes)	-0.73	26.66	0.48***	0.36–0.63	-0.71	24.10	0.49***	0.37–0.65
Breach FVO (yes)	-1.04	4.47	0.35*	0.13–0.93	-1.13	5.27	0.32*	0.12–0.85
Breach justice order (yes)	-1.93	6.90	0.14**	0.03–0.61	-1.98	7.27	0.14**	0.03–0.58
Weapon present (yes)	-0.26	2.57	0.77	0.56–1.06	-0.26	2.47	0.77	0.56–1.07
Alcohol involvement (yes)					-1.16	38.73	0.31***	0.22–0.45

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

Note: FVO=family violence order

Breach of family violence orders

Three separate binary logistic regressions were performed to examine if child victimisation, presence of weapons, and alcohol involvement in the incident contributed to, or were uniquely associated with, a breach of FVO at an incident (no vs yes), at all incidents (Table 99), IPV incidents (Table 100) and FV incidents (Table 101). Repeat victimisation was not included in the model given that the victim needed to be involved in another offence for a justice order to be in place.

All incidents

In the adjusted model, child victimisation (OR=0.25), presence of weapons (OR=0.13), and alcohol involvement (OR=0.30) were all associated with decreased odds that an incident involved breach of an FVO. The model accounted for two to seven percent of the variance in breach of FVOs (Cox & Snell R Square=0.02; Negelkerke R Square=0.07) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of incidents involving an FVO breach.

Intimate partner violence incidents

In the adjusted model, child victimisation (OR=0.24), presence of weapons (OR=0.20), and alcohol involvement (OR=0.18) were all associated with decreased odds that an incident involved breaching an FVO. The model accounted for five to 10 percent of the variance in breach of FVOs at IPV incidents (Cox & Snell R Square=0.05; Negelkerke R Square=0.10). It adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of IPV incidents involving breach of an FVO.

Family violence incidents

The presence of weapons was removed as a predictor in this model since zero incidents involving breach of an FVO involved a weapon (making this variable a constant). Child victimisation was associated with decreased odds (OR=0.30) of an incident involving breach of an FVO, while alcohol involvement was not uniquely associated with prediction of FVO breaches. The model accounted for one to three percent of the variance in breaching FVOs at FV incidents (Cox & Snell R Square=0.01; Negelkerke R Square=0.03) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of FV incidents involving an FVO breach.

Table 99 Binary logistic regression associated with breach of a family violence order at all incidents, ACT (n=5,064)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-1.25	14.58	0.29***	0.15–0.54	-1.38	17.62	0.25***	0.13–0.48
Weapon present (yes)	-2.09	16.97	0.12***	0.05–0.33	-2.06	16.45	0.13***	0.05–0.34
Alcohol involvement (yes)					-1.20	23.90	0.30***	0.19–0.49

*** statistically significant at p<0.001

Table 100 Binary logistic regression associated with breach of a family violence order at intimate partner violence incidents, ACT (n=2,995)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-1.36	6.97	0.26**	0.09–0.70	-1.43	7.69	0.24**	0.09–0.66
Weapon present (yes)	-1.66	20.67	0.19***	0.09–0.39	-1.61	19.35	0.20***	0.10–0.41
Alcohol involvement (yes)					-1.71	52.01	0.18***	0.11–0.29

** statistically significant at p<0.01. *** statistically significant at p<0.001

Table 101 Binary logistic regression associated with breach of a family violence order at family violence incidents, ACT (n=1,708)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-1.08	4.92	0.34*	0.13–0.88	-1.19	5.91	0.30*	0.12–0.79
Alcohol involvement (yes)					-1.07	3.07	0.34	0.10–1.13

* statistically significant at p<0.05.

Breach of justice orders

Three separate binary logistic regressions were performed to examine if child victimisation and alcohol involvement contributed, or were uniquely associated with, breaching justice orders at an incident (no vs yes) at all incidents (Table 102), IPV incidents (Table 103) and FV incidents (Table 104). The presence of weapons was not included as a correlate due to its low frequency in incidents involving a breach of justice orders (eg 1 for FV and 4 for IPV) making it an unstable predictor. Repeat victimisation was also not included in the model as the victim needed to be involved in another offence for a JO to be put in place.

All incidents

In the adjusted model, child victimisation (OR=0.25) and alcohol involvement (OR=0.29) were both associated with decreased odds that an incident involved breach of a justice order. The model accounted for one to four percent of the variance in breach of the orders at incidents (Cox & Snell R Square=0.01; Negelkerke R Square=0.04) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of incidents involving the breach of an order.

Intimate partner violence incidents

Alcohol involvement was associated with decreased odds of breaching a JO (OR=0.22). The involvement of a child victim was not uniquely associated with breaching an order. The model accounted for two to four percent of the variance in breach of JOs at IPV incidents (Cox & Snell R Square=0.02; Negelkerke R Square=0.04) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of IPV incidents involving breaching a JO.

Family violence incidents

Child victimisation was associated with decreased odds (OR=0.11) of an incident involving breaching a JO, and alcohol involvement was not uniquely associated with breaching JOs. The model accounted for one to six percent of the variance in breach of JOs at FV incidents (Cox & Snell R Square=0.01; Negelkerke R Square=0.06) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of FV incidents involving breaching a JO.

Table 102 Binary logistic regression associated with breach of a justice order at all incidents, ACT (n=5,064)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-1.25	14.67	0.28***	0.15–0.54	-1.38	17.70	0.25***	0.13–0.48
Alcohol involvement (yes)					-1.22	47.91	0.29***	0.18–0.48

*** statistically significant at p<0.001

Table 103 Binary logistic regression associated with breach of a justice order at Intimate partner violence incidents, ACT (n=2,995)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-0.13	0.10	0.88	0.40–1.92	-0.16	0.15	0.85	0.39–1.87
Alcohol involvement (yes)					-1.50	26.17	0.22***	0.13–0.40

*** statistically significant at p<0.001

Table 104 Binary logistic regression associated with breach of a justice order at family violence incidents, ACT (n=1,708)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-2.10	8.27	0.12**	0.03–0.51	-2.17	8.76	0.11**	0.03–0.48
Alcohol involvement (yes)					-0.55	1.27	0.58	0.22–1.50

** statistically significant at p<0.01.

Offence against the person (violent offence)

Three separate binary logistic regressions were performed to examine if child victimisation, repeat victimisation, the presence of weapons, and alcohol involvement were uniquely associated with an offence against the person at an incident (no vs yes) at all incidents (Table 105), IPV incidents (Table 106) and FV incidents (Table 107).

All incidents

In the adjusted model, child victimisation and alcohol involvement were associated with 9.27 and 2.13 greater odds respectively that the incident involved an offence against the person, respectively. Repeat victimisation was associated with decreased odds that the incident involved an offence against the person (OR=0.59). The presence of weapons did not uniquely predict an offence against the person at all domestic violence incidents. The model accounted for 10 to 14 percent of the variance in predicting an offence against the person at FV incidents (Cox & Snell R Square=0.10; Negelkerke R Square=0.14) and adequately fitted the model (Hosmer and Lemeshow Test >0.05). The model was biased towards predicting incidents involving a violent offence, correctly predicting 84.3 percent of incidents that involved an offence against the person and 35.0 percent of IPV incidents not involving an offence against the person (overall percentage correct=67.4%).

Intimate partner violence incidents

In the adjusted model, child victimisation, the presence of weapons, and alcohol involvement were associated with 2.83, 1.34, and 2.45 greater odds respectively, that the incident resulted in an offence against the person. Incidents involving repeat victims were significantly less likely to involve an offence against the person (OR=0.51). The model accounted for seven to nine percent of the variance in predicting an offence against the person at IPV incidents (Cox & Snell R Square=0.07; Negelkerke R Square=0.09) and adequately fitted the model (Hosmer and Lemeshow Test >0.05). The model was biased towards predicting incidents that involved an offence against the person, and correctly predicted 80.3 percent of IPV incidents involving an offence against the person and 41.5 percent of IPV incidents not involving an offence against the person (overall percentage correct=66.3%).

Family violence incidents

In the adjusted model, child victimisation was associated with 15.22 greater odds that the incident involved an offence against the person, and repeat victimisation was associated with decreased odds that the incident involved an offence against the person (OR=0.73). The presence of weapons and alcohol did not uniquely predict an offence against the person at FV incidents. The model accounted for 16 to 23 percent of the variance in prediction of an offence against the person at FV incidents (Cox & Snell R Square=0.16; Negelkerke R Square=0.23) and adequately fitted the model (Hosmer and Lemeshow Test >0.05). The model was biased towards predicting incidents involving an offence against the person with 100 percent of FV incidents that involved an offence against the person correctly predicted, compared with zero percent of those that did not.

Table 105 Binary logistic regression associated with an offence against the person at all incidents, ACT (n=5,064)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	2.12	166.76	8.30***	6.02–11.45	2.23	182.89	9.27***	6.71–12.80
Repeat victim (yes)	-0.53	59.11	0.59***	0.51–0.67	-0.52	54.83	0.59***	0.52–0.68
Weapon present (yes)	0.11	1.33	1.12	0.92–1.36	0.08	0.68	1.09	0.89–1.32
Alcohol (yes)					0.75	79.85	2.13***	1.80–2.51

*** statistically significant at p<0.001

Table 106 Binary logistic regression associated with an offence against the person at intimate partner violence incidents, ACT (n=2,995)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	1.00	17.30	2.73***	1.70–4.38	1.04	18.35	2.83***	1.76–4.56
Repeat victim (yes)	-0.69	65.27	0.50***	0.42–0.59	-0.66	58.53	0.51***	0.43–0.61
Weapon present (yes)	0.34	6.38	1.41*	1.08–1.83	0.29	4.48	1.34*	1.02–1.75
Alcohol (yes)					0.89	71.85	2.45***	1.99–3.01

* statistically significant at p<0.05. *** statistically significant at p<0.001

Table 107 Binary logistic regression associated with an offence against the person at family violence incidents, ACT (n=1,708)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	2.68	120.90	14.63***	9.07–23.60	2.72	123.37	15.22***	9.41–24.60
Repeat victim (yes)	-0.29	4.71	0.74*	0.57–0.97	-0.29	4.70	0.73*	0.57–0.97
Weapon present (yes)	-0.12	0.56	0.88	0.64–1.22	-0.13	0.62	0.88	0.63–1.22
Alcohol (yes)					0.28	3.25	1.33	0.97–1.81

* statistically significant at p<0.05. *** statistically significant at p<0.001

Repeat victims

Three separate binary logistic regressions were performed to examine if child victimisation, presence of weapons, and alcohol involvement were uniquely associated with involvement of a repeat victim (no vs yes) at all incidents (Table 108), IPV incidents (Table 109) and FV incidents (Table 110). Breach of FVOs and JOs were not included in the models as repeat victimisation was required for these breaches.

All incidents

In the adjusted model, child victimisation (OR=0.44) was associated with significantly decreased odds of the incident involving a repeat victim. Presence of weapons and alcohol involvement were not significantly associated with repeat victimisation. The model accounted for about two percent of the variance in involvement of a repeat victim (Cox & Snell R Square=0.02; Negelkerke R Square=0.02) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of incidents involving repeat victims.

Intimate partner violence incidents

In the adjusted model, alcohol involvement (OR=0.76) was associated with significantly decreased odds of the incident involving a repeat victim. Presence of weapons and child victimisation were not significantly associated with repeat victimisation. The model accounted for less than one percent of the variance in a repeat victim being involved (Cox & Snell R Square=0.005; Negelkerke R Square=0.007) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of IPV incidents involving repeat victims.

Family violence incidents

In the adjusted model, child victimisation (OR=0.46) was associated with significantly decreased odds of the incident involving a repeat victim. Presence of weapons and alcohol involvement were not significantly associated with repeat victimisation. The model accounted for less than two to three percent of the variance of a repeat victim being involved (Cox & Snell R Square=0.02; Negelkerke R Square=0.03) and adequately fitted the model (Hosmer and Lemeshow Test >0.05), but nevertheless correctly predicted zero percent of FV incidents involving repeat victims.

Table 108 Binary logistic regression associated with repeat victimisation at all incidents, ACT (n=5,064)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-0.80	60.36	0.45***	0.37–0.55	-0.81	62.44	0.44***	0.36–0.54
Weapon present (yes)	-0.17	3.15	0.84	0.70–1.02	-0.16	2.93	0.85	0.70–1.02
Alcohol involvement (yes)					-0.13	2.82	0.88	0.76–1.02

*** statistically significant at p<0.001

Table 109 Binary logistic regression associated with repeat victimisation at intimate partner violence incidents, ACT (n=2,995)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-0.03	0.03	0.97	0.67–1.40	-0.04	0.04	0.96	0.67–1.39
Weapon present (yes)	-0.23	3.28	0.80	0.6–1.02	-0.21	2.72	0.81	0.64–1.04
Alcohol involvement (yes)					-0.27	8.84	0.76**	0.63–0.91

** statistically significant at p<0.01.

Table 110 Binary logistic regression associated with repeat victimisation at family violence incidents, ACT (n=1,708)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Child victim (yes)	-0.79	32.09	0.45***	0.34–0.60	-0.78	30.16	0.46***	0.35–0.61
Weapon present (yes)	-0.05	0.10	0.95	0.69–1.21	-0.05	0.11	0.95	0.69–1.30
Alcohol involvement (yes)					0.11	0.54	1.12	0.83–1.50

*** statistically significant at p<0.001

ACT summary

In the Australian Capital Territory, most victims of intimate partner violence were female (74.6%) most commonly aged between 18 to 34 years. However, there was a significantly greater proportion of male FV victims (35.3%) than female FV victims. Most ACT victims lived in areas of SEIFA disadvantage with the proportion of victims in the third quintile being greater than in the second quintile.

Between 2009 and 2014, of the 5,064 DV incidents attended by police, 2,995 (59.1%) were IPV related and 1,708 (33.7%) were FV related. The highest proportions of both IPV and FV incidents were recorded in 2010, with incidents slightly reducing by 2013. Alcohol-related incidents were highest in 2011, remaining relatively stable over time, with greater proportions in IPV (27.6%). A very small proportion of incidents involved drugs (1.1%) between 2009 and 2014, with the highest incidence occurring in 2012 and 2013. Child involvement in incidents was more likely to occur in FV (32.2%) than IPV (4.8%), with the highest proportions occurring in 2011 (FV) and 2010 (IPV). The involvement of weapons in ACT incidents was relatively stable across time, with a slight increase (14% of total incidence) in 2013. Family violence incidents (15.9%) were more likely to involve weapons than those of IPV (12.6%). Incidents involving repeat victims were relatively stable between 2009 and 2014, with slightly higher proportions in 2011 and 2012.

A significantly greater proportion of IPV (41.1%) than FV (26.9%) involved a repeat victim. Higher proportions of DV incidents occurred between 6 and 9 pm. This trend was similar in FV and IPV incidents, with the exception of slightly more IPV occurring in the 9 pm to 3 am timeframe than FV.

Key correlates of domestic violence

Incidents involving a child victim (OR=0.33), breach of a family violence order (OR=0.20), or breach of a justice order (OR=0.27), were significantly less likely to involve alcohol. Incidents of intimate partner violence involving either a breach of an FVO (OR=0.17) or justice order (OR=0.20) were significantly less likely to involve alcohol. In FV incidents, the only significant predictor was the involvement of a child victim, which significantly decreased the odds of an incident being alcohol-related (OR=0.31).

When predicting child victimisation across all incidents, repeat victimisation (OR=0.53), breach of FVOs (OR=0.14), breach of justice orders (OR=0.27), and involvement of alcohol (OR=0.33) were all significantly associated with decreased odds that the incident involved a child victim. In IPV incidents, the only significant predictor was a breach of FVOs, which significantly decreased the odds that an incident involved alcohol (OR=0.23). In FV incidents, repeat victimisation (OR=0.49), breach of FVOs (OR=0.32), breach of justice orders (OR=0.14), and alcohol involvement (OR-0.31) were each associated with decreased odds that an incident involved a child victim.

When predicting repeat victimisation across all incidents, child victimisation (OR=0.44) was associated with significantly decreased odds of the incident involving a repeat victim. In intimate partner violence, alcohol involvement (OR=0.76) was associated with significantly decreased odds of the incident involving a repeat victim. In family violence, child victimisation (OR=0.46) was associated with significantly decreased odds of the incident involving a repeat victim.

New South Wales police data results

The following presents trends for domestic violence incidents attended by NSW police between 2009 and 2013 for individuals and incidents. These findings relate to DV incidents involving intimate partners and other family members and compare data related to intimate partner and family violence.

Individuals

Demographic and alcohol intoxication levels are presented for offenders and victims.

Offenders

During the study, NSW police recorded 120,094 episodes of offending at DV incidents, including 92,714 unique offenders. Some 17,984 (19.4%) recidivist offenders were involved in multiple incidents across the reporting period. Person and incident characteristics related to recidivist offenders and repeat victims are discussed in greater detail. Most incidents (88.5%) involved one offender, while on a small number of occasions up to 11 offenders were recorded at an incident (see Table 111). Family violence incidents were significantly more likely to involve multiple offenders compared with IPV incidents (p<0.001).

Table 111 Number of offenders recorded at FV, IPV and all incidents, NSW (n=112,937)

	FV		IPV		All incidents	
	n	%	n	%	n	%
0[a]	3,525	7.4	3132	4.3	6,762	5.3
1	40,051	84.4	65,901	91.3	106,071	88.5
2	3,373	7.1	2,955	4.1	6,337	5.6
3	371	0.8	124	0.2	499	0.4
4	87	0.2	24	<0.1	113	0.1
5	26	0.1	8	<0.1	34	<0.1
6+	14	<0.1	3	<0.1	17	<0.1

a: among these incidents, 68.8% (n=4,653) only had one victim recorded, 28.7% (n=1,944) had two victims recorded, and 2.28% (n=165) had more than two victims recorded. A total of 47.2% of incidents with 1 victim and 0 offenders recorded and 48.7% of incidents with 2 victims and 0 offenders recorded were IPV

Most offenders were male (77.0%) across all age groups (see Table 112). The greatest proportion of offenders was aged between 35 and 49 years (33.8%), while the lowest proportion were aged from five to 11 years (0.4%). A slightly greater proportion of male offenders (64.1%) than female offenders (57.0%) were aged between 25 and 49 years.

Table 112 Proportion of female, male and all offenders by age group, NSW (n=120,775)[a]

	Female		Male		All offenders	
Age (years)	n	%	n	%	n	%
5–11	89	19.8	361	80.2	450	0.4
12–17	3,799	36.9	6,504	63.1	10,303	8.5
18–24	5,623	24.5	17,320	75.5	22,943	19.0
25–34	7,248	20.9	27,495	79.1	34,743	28.8
35–49	8,781	21.5	32,063	78.5	40,844	33.8
50–59	1,677	20.3	6,573	79.7	8,250	6.8
60–69	448	18.6	1,961	81.4	2,409	2.0
70–84	132	17.8	608	82.2	740	0.6

a: among these incidents, 68.8% (n=4,653) only had one victim recorded, 28.7% (n=1,944) had two victims recorded, and 2.28% (n=165) had more than two victims recorded. A total of 47.2% of incidents with 1 victim and 0 offenders recorded and 48.7% of incidents with 2 victims and 0 offenders recorded were IPV

Table 113 presents the proportion of offenders in nine age groups separately for those involved in FV and IPV incidents. While the greatest proportion of offenders of both FV and IPV incidents were aged from 25 to 49 years, a greater proportion of offenders involved in FV compared with IPV incidents were aged between 12 and 17 years.

Table 113 Proportion of FV and IPV offenders in nine age groups, NSW (n=120,633)

	FV		IPV	
Age (years)	n	%	n	%
5–11	443	0.9	7	<0.1
12–17	8,817	18.2	1,476	2.0
18–24	10,152	21.0	12,739	17.6
25–34	10,509	21.7	24,197	33.5
35–49	13,408	27.7	27,407	37.9
50–59	3,513	7.3	4,731	6.5
60–69	1,120	2.3	1,280	1.8
70–84	343	0.7	398	0.6
85+	43	0.1	50	0.1

Note: type of violence was not categorised for 171 offenders. A total of 193 offenders who were recorded as aged between 0 and 4 years were excluded from this tabulation

Figure 39 and Figure 40 show age group the trends over time for offenders involved in FV or IPV-related incidence. For FV-related incidents, the rate of offenders per 10,000 population was highest in the 12 to 17 years age group, beginning at 30.4 in 2009 and rising to 33.7 in 2013. For IPV-related incidents, the rate of offenders per 10,000 population was highest in the 25 to 34 years age group, beginning at 48.2 in 2009 and lowering to 46.8 in 2013.

Figure 39 Offender age groups of FV rates per 10,000 population over reporting period, NSW

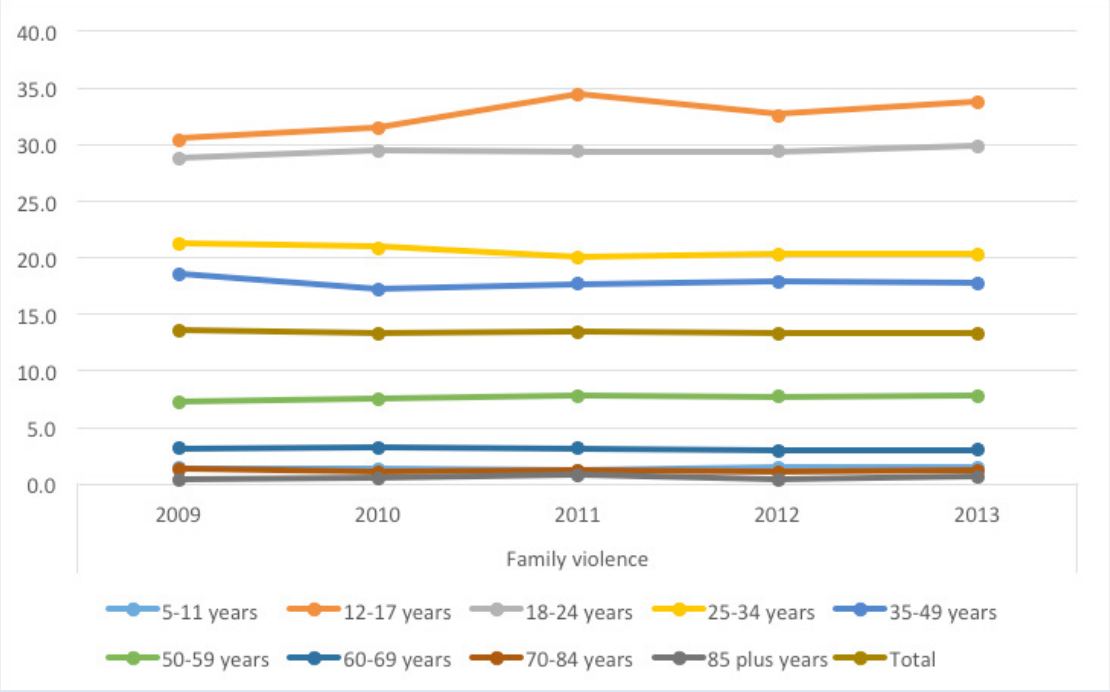
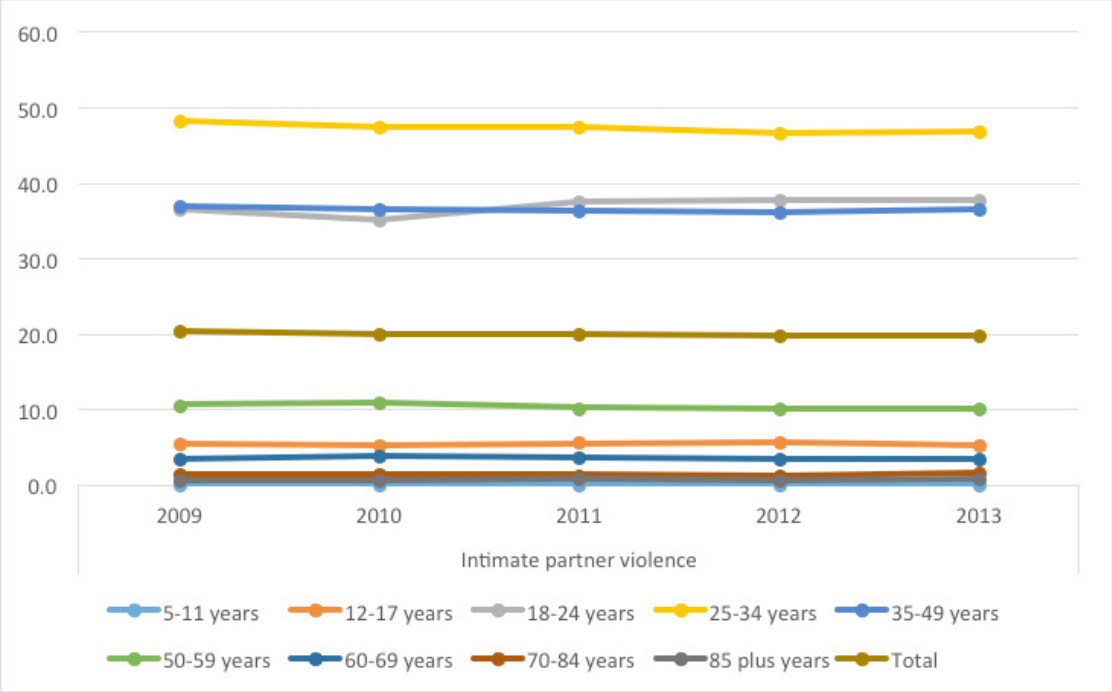


Figure 40 Offender age groups of IPV rates per 10,000 population over reporting period, NSW



Victims

A total of 144,053 episodes of victimisation were recorded across all domestic violence incidents in New South Wales during the reporting period, including 61,447 victims of family violence and 82,313 victims of intimate partner violence. This includes 115,418 unique victims and 18,636 repeat victims involved in multiple incidents across the reporting period. Most incidents involved one victim (86.5%), while less than one percent of cases involved more than three victims. Multiple victims were more likely to be recorded as being present at FV than IPV incidents ($p<0.001$). See Table 114.

Table 114 Number of victims recorded at FV, IPV and all incidents, NSW (n=144,053)

	FV		IPV		All incidents	
	n	%	n	%	n	%
1	37,980	80.0	65,420	90.7	103,400	86.5
2	7,971	16.8	6,038	8.4	14,009	11.7
3	1,093	2.3	482	0.7	1,575	1.3
4	273	0.6	149	0.2	422	0.4
5	89	0.2	35	<0.1	124	0.1
6+	41	0.1	23	<0.1	64	0.1

Table 115 presents the proportion of female and male victims across age groups, while Table 116 shows the proportion of FV and IPV victims across age groups. Most victims were female (68.3%). Compared with female victims, male victims were not concentrated in the 18 to 49 year age group but were much more spread out. In most age groups, female victims outnumbered male victims. However in the zero to 11 year age group, male victims outnumbered female victims.

Table 115 Proportion of female, male and all victims in 10 age groups, NSW (n=143,941)						
	Female[a]		Male[a]		All victims[b]	
Age (years)	n	%[a]	n	%[a]	n	%
0–4	925	46.0	1,060	52.8	2,009	1.4
5–11	1,641	42.7	2,195	57.2	3,839	2.7
12–17	8,745	63.1	5,104	36.8	13,852	9.6
18–24	20,686	75.1	6,859	24.9	27,559	19.1
25–34	26,176	73.9	9,251	26.1	35,444	24.6
35–49	29,729	69.3	13,113	30.6	42,880	29.8
50–59	6,900	58.9	4,810	41.1	11,717	8.1
60–69	2,376	52.7	2,127	47.2	4,508	3.1
70–84	1,077	55.2	872	44.7	1,950	1.4
85+	178	60.3	117	39.7	295	0.2

a: the sex of 122 victims was either unknown or not recorded

b: refers to the proportion of all victims within this age group

Table 116 Proportion of FV and IPV victims by age group, NSW (143,760)				
	FV		IPV	
Age (years)	n	%	n	%
0–4	1,104	1.8	888	1.1
5–11	3,027	4.9	810	1.0
12–17	10,134	16.5	3,708	4.5
18–24	10,180	16.6	17,329	21.1
25–34	9,121	14.8	26,234	31.9
35–49	15,604	25.4	27,188	33.0
50–59	7,160	11.7	4,532	5.5
60–69	3,331	5.4	1,168	1.4
70–84	1,553	2.5	396	0.5
85+	233	0.4	60	0.1

Note: incident type was not recorded for 293 victims

Figure 41 and Figure 42 below show age group trends over time for victims involved in incidents of family violence or intimate partner violence. For FV-related incidents, the rate of victims per 10,000 population was highest in the 18 to 24 years age group, beginning at 36.9 in 2009 and rising to 37.0 in 2013. For IPV-related incidents, the rate of victims per 10,000 population was highest in the 35 to 49 year age group, remaining relatively stable at 52.2 between 2009 and 2013.

Figure 41 Victim age groups of FV rates per 10,000 population over reporting period, NSW

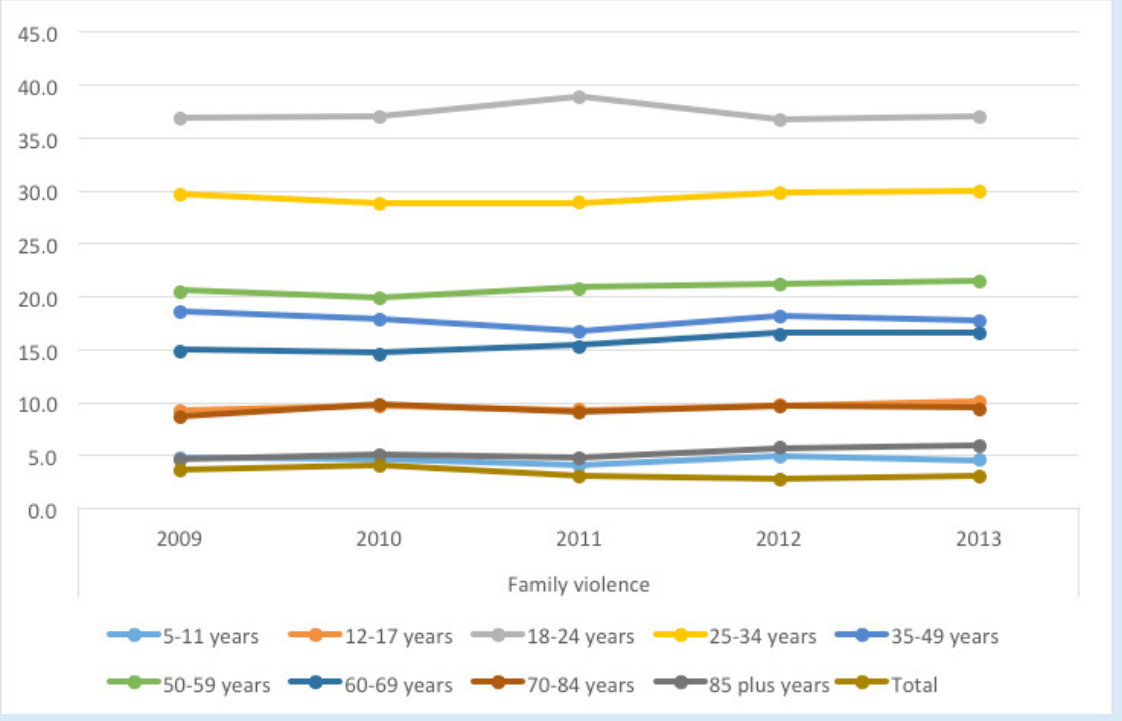
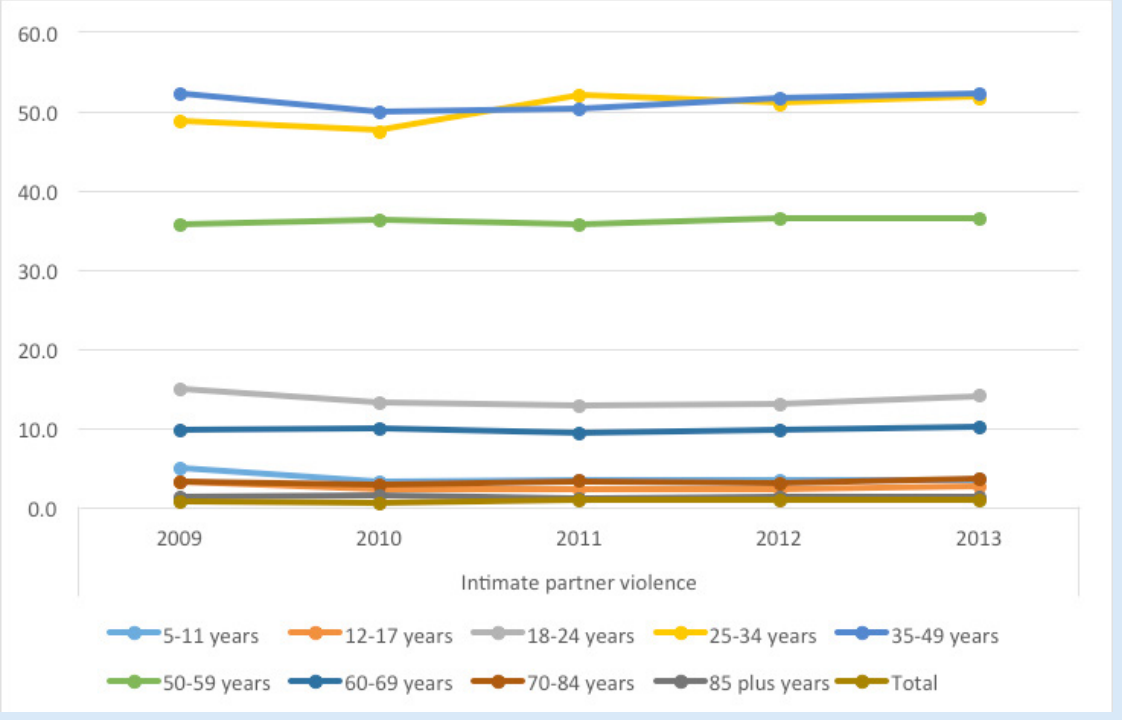


Figure 42 Victim age groups of IPV rates per 10,000 population over reporting period, NSW



A higher proportion of child victims of FV (52.5%) and IPV (70.7%) were female, with most child victims involved in FV-related incidents.

Table 117 Proportion and gender of FV and IPV incidents involving a child victim per year, NSW (n=19,700)

	FV				IPV			
	Female		Male		Female		Male	
	n	%	n	%	n	%	n	%
2009	1,510	37.3	1,280	31.6	886	21.9	363	9.0
2010	1,506	39.0	1,328	34.4	728	18.9	289	7.5
2011	1,526	39.1	1,370	35.1	707	18.1	293	7.5
2012	1,470	37.9	1,378	35.5	717	18.5	299	7.7
2013	1,465	36.5	1,418	35.3	780	19.4	336	8.4

Note: child victim gender was not recorded for 60 victims, and violence type was not recorded for 58 victims

As shown in Figure 42, IPV victims were most likely to be aged between 18 and 49 years. A small proportion of IPV victims were younger than 18 years (6.6%), probably indicating their presence at IPV incidents primarily involving parents/guardians. Compared with IPV, FV victims were spread more evenly across age groups and included a greater proportion of victims younger than 18 years.

Overall, females comprised 55.0 percent of FV victims and 78.3 percent of IPV victims. Figure 43 and Figure 44 show the proportion of female and male FV and IPV victims according to age group. The proportion of male victims was greater for FV compared with IPV in all age groups, except for those aged 85 years and older.

Figure 43 Proportion of female and male FV victims in 10 age groups, NSW (n=144,053)

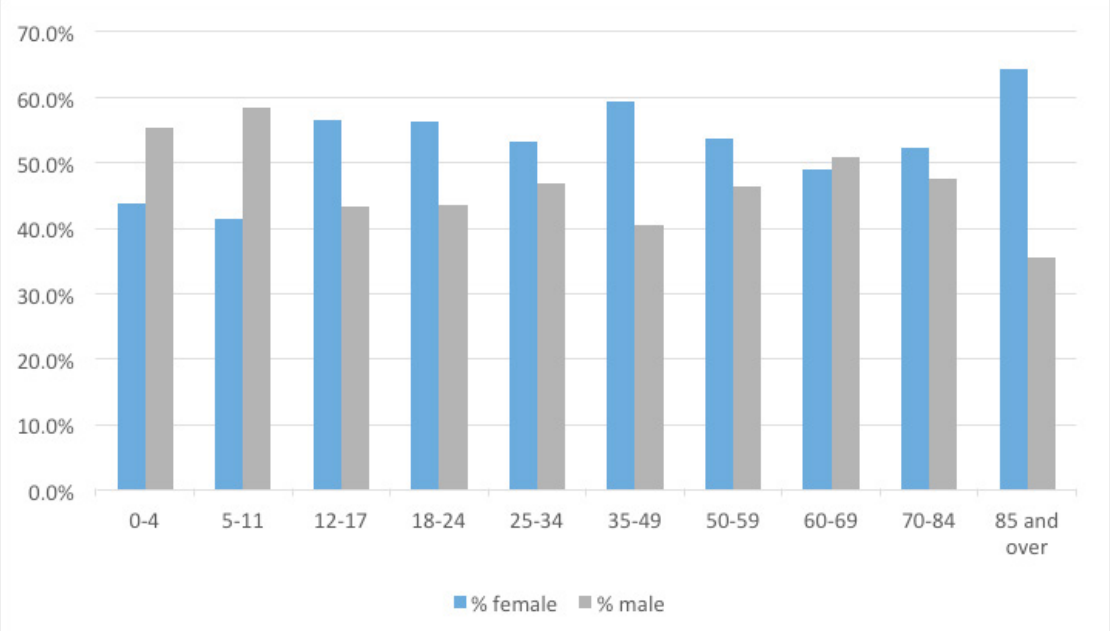
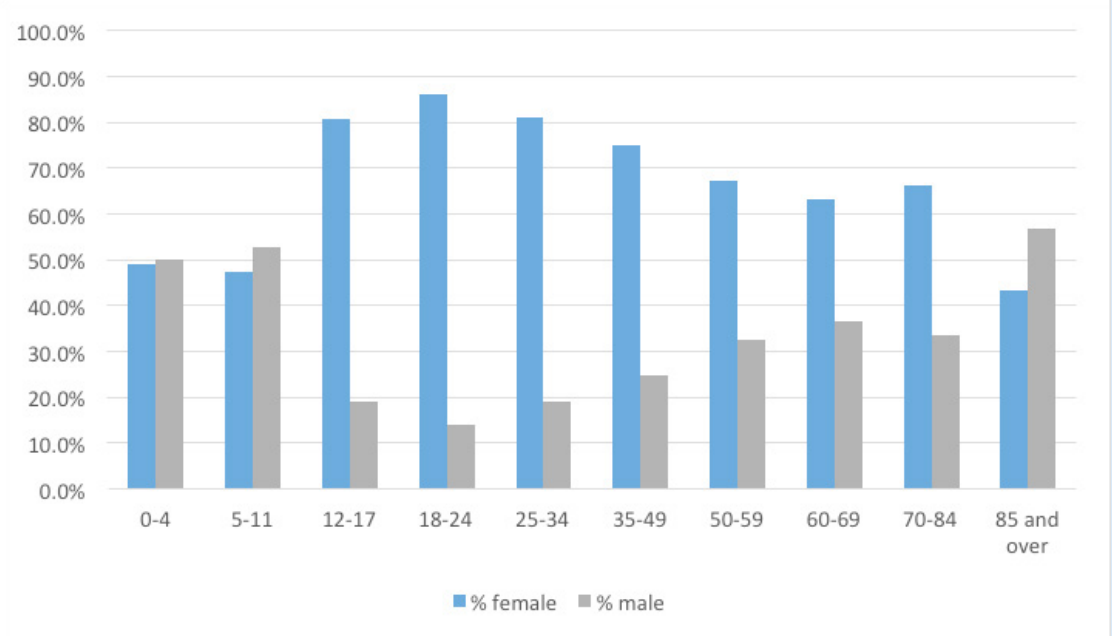


Figure 44 Proportion of female and male IPV victims in 10 age groups, NSW (n=144,053)



Incidents

New South Wales police attended 119,833 domestic violence incidents across the reporting period, including 72,147 IPV and 47,447 FV incidents. Of these, 239 incidents were flagged as DV, but the relationship between the victim and offender was unknown or not recorded. Table 118 shows that the proportion of FV and IPV incidents slightly increased across the five-year period. This is most evident for family violence incidents. At all years, there was a greater proportion of IPV than FV incidents. A 2X1 analysis to test the difference in the proportions per year found a significant difference ($p<0.001$). Comparing 2009 and 2013 also showed a significant increase ($p<0.001$).

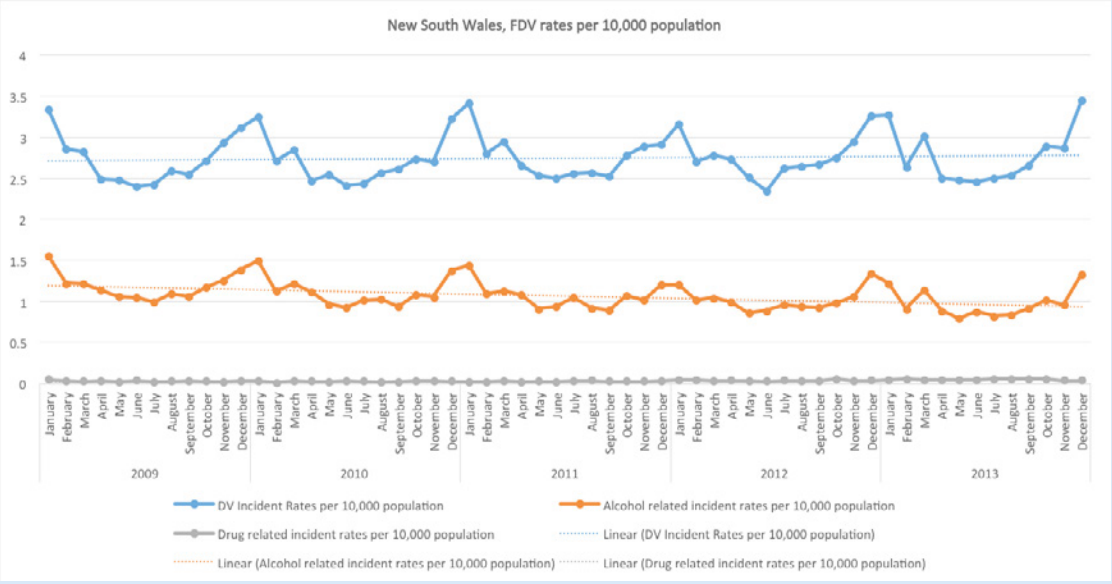
Table 118 Proportion of FV, IPV and all incidents per year, NSW (n=119,594)[a]

	FV		IPV		All incidents	
	n	%	n	%	n	%
2009	9,055	39.1	14,132	60.9	23,187	32.7
2010	9,213	39.5	14,099	60.5	23,312	32.5
2011	9,530	39.7	14,477	60.3	24,007	33.1
2012	9,716	39.9	14,616	60.1	24,332	33.2
2013	9,933	40.1	14,823	59.9	24,756	33.3

a: the incident type (IPV or FV) was unknown or not recorded for 239 incidents

Figure 45 shows that the rates of all FDV incidents per 10,000 people have remained consistent between 2009 and 2013. This trend is similar for alcohol-related incidents and drug-related incidents.

Figure 45 Alcohol, drug, and all incident rates per 10,000 population over reporting period, NSW



Socioeconomic disadvantage

Incident locations were classified into one of five levels of socioeconomic disadvantage according to the ABS Socio-Economic Indexes for Areas (SEIFA)—see Table 119.

Table 119 Proportion of FV, IPV and all incident locations according to socioeconomic disadvantage, NSW (n=119,594)

	FV		IPV		All incidents[a]	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	12,418	26.2	18,554	25.8	31,036	25.9
2	10,246	21.6	15,818	22.0	26,114	21.8
3	12,018	25.4	18,635	25.9	30,714	25.7
4	7,642	16.1	11,446	15.9	19,128	16.0
5 (least disadvantaged)	5,062	10.7	7,567	10.5	12,653	10.6

a: postcodes were either unavailable or invalid for 188 (0.2%) incidents, reducing the analytic sample to 119,645

Just over a quarter of all incidents (25.9%) took place in areas with the greatest socioeconomic disadvantage, and the smallest proportion of incidents (10.6%) in the least disadvantaged areas of New South Wales. No significant differences were found in the proportion of IPV versus FV incidents according to area level of socioeconomic disadvantage of ($p>0.05$).

Alcohol-related incidents

Table 120 shows that 38.8 percent of all FDV incidents were flagged as alcohol-related. 'Alcohol-related' incidents were indicated when attending officer/s flagged either the 'associated factor' or 'additional factor' fields of the reporting system as 'alcohol-related'. All other incidents were coded as not alcohol-related. At each year, a significantly greater proportion of IPV (43.7%) than FV (31.3%) incidents were alcohol-related ($p<0.001$, Phi=0.12). The proportion of alcohol-related incidents gradually decreased across the reporting period from 43.3 percent of all incidents in 2009, to 35.1 percent in 2013.

Table 120 Proportion of alcohol-related FV, IPV and all incidents per year, NSW (n=46,460)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2009	3,173	35	6,859	48.5	10,051	43.3
2010	3,013	32.7	6,515	46.2	9,549	41.0
2011	2,876	30.2	6,328	43.7	9,221	38.4
2012	2,922	30.1	6,010	41.1	8,949	36.8
2013	2,859	28.8	5,805	39.2	8,693	35.1

As shown in Figure 46, IPV incidents were more likely to be alcohol-related, across all levels of socioeconomic disadvantage. The largest difference can be seen in relation to incidents that took place in the least disadvantaged areas of New South Wales, where 43.8 percent of IPV compared with 27.9 percent of FV incidents were flagged as alcohol-related.

Figure 46 Proportion of alcohol-related FV and IPV incidents according to area level of socioeconomic disadvantage, NSW (n=119,406)

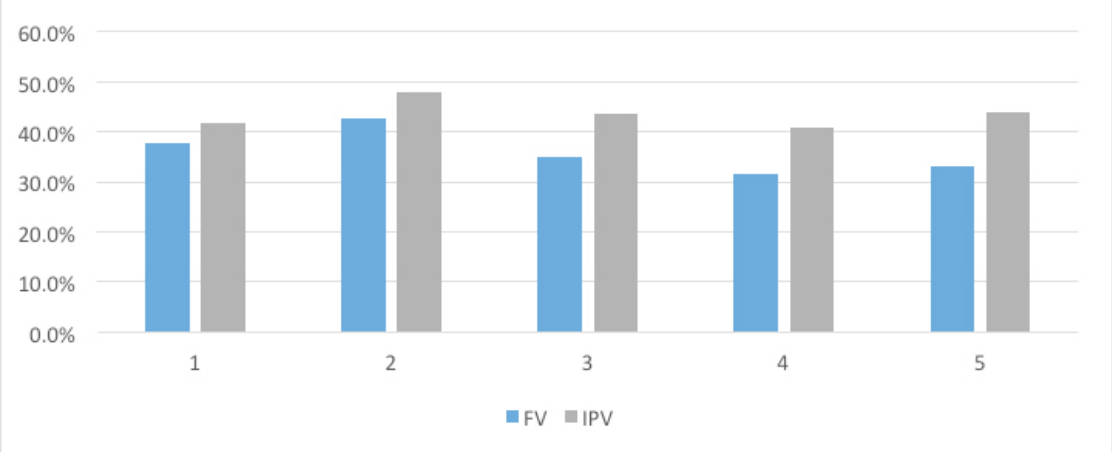


Table 121 Proportion of FV, IPV and all incidents where victim and/or offender were affected by alcohol, NSW (n=119,833)shows that victim(s) were affected by alcohol in 19.3 percent of incidents, and offenders in 32.7 percent of all incidents. Victims and offenders whose level of intoxication was classified as either 'slightly affected', 'moderately affected', 'well affected' or 'seriously affected' were classified as 'affected'. Those classified as either 'not affected' (ie they had been drinking but did not appear to be affected), or who indicated they had not consumed alcohol prior to the incident, were classified as 'not affected'. Both victim and offender were affected by alcohol in 15.4 percent of incidents. A significantly greater proportion of IPV incidents involved victim ($p<0.001$, Phi=0.10), offender ($p<0.001$, Phi=0.12), or both victim and offender ($p<0.001$, Phi=0.11) being affected by alcohol compared with FV incidents.

Table 121 Proportion of FV, IPV and all incidents where victim and/or offender were affected by alcohol, NSW (n=119,833)

	FV		IPV		All incidents	
Person/s affected by alcohol	n	%	n	%	n	%
Victim	6,935	14.6	16,150	22.4	23,166	19.3
Offender[a]	11,260	25.6	25,658	37.2	36,956	32.7
Victim and offender[a]	4,631	10.5	12,711	18.4	17,365	15.4

a: analysis excludes incidents where no offenders were recorded (n=6,762)

Drug-related incidents

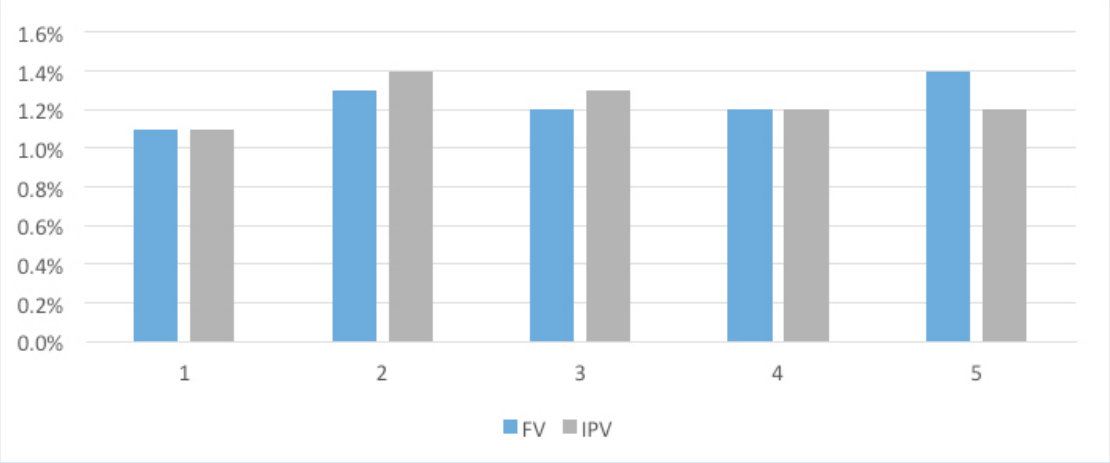
The study found few drug-related domestic violence incidents (1.2%; n=1,465). 'Drug-related' incidents were indicated when attending officer/s flagged either the 'associated factor' or 'additional factor' fields as 'drug-related'. As shown in Table 122 Proportion of drug-related FV, IPV and all incidents per year, NSW (n=119,833), while the proportion of drug-related incidents increased from 1.1 percent in 2009 to 1.7 percent in 2013, the smallest proportion of drug-related incidents (0.9%) was recorded in 2011. No significant difference was evident in the proportion of drug-related IPV (1.2%) compared with FV (1.2%) incidents (p>0.05).

Table 122 Proportion of drug-related FV, IPV and all incidents per year, NSW (n=119,833)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2009	114	1.3	149	1.1	263	1.1
2010	81	0.9	145	1.0	226	1.0
2011	94	1.0	132	0.9	226	0.9
2012	135	1.4	196	1.3	331	1.4
2013	159	1.6	255	1.7	414	1.7

Figure 47 Proportion of drug-related FV, IPV and all incidents according to area socioeconomic disadvantage level, NSW (n=119,645)shows the proportion of drug-related FV and IPV incidents that took place in areas of most, to least, socioeconomic disadvantage.

Figure 47 Proportion of drug-related FV, IPV and all incidents according to area socioeconomic disadvantage level, NSW (n=119,645)[a]



a: SEIFA quintiles range in descending order of disadvantage, where 1=most disadvantaged and 5=least disadvantaged

The proportion of drug-related incidents was consistent across areas of relative disadvantage (p>0.05). Similarly, no significant difference was evident between drug-related FV and IPV incidents across area levels of disadvantage (p>0.05).

Child witnesses

Children were present at almost half (47.8%, n=57,227) of all domestic violence incidents. As Table 123 shows, the proportion of child-witnessed FV and IPV incidents increased by more than six percent from 2009 to 2010, and then remained steady between 2010 and 2013. This initial increase is especially evident for FV incidents where there was a 10.6 percent rise between 2009 and 2010 in the number of incidents witnessed by one or more children.

Table 123 Proportion of child-witnessed FV, IPV and all incidents per year, NSW (n=57,227)						
	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2009	3,354	37.0	6,446	45.6	9,805	42.2
2010	4,381	47.6	6,961	49.4	11,347	48.6
2011	4,674	49.0	7,115	49.1	11,797	49.1
2012	4,798	49.4	7,262	49.7	12,072	49.5
2013	4,870	49.0	7,328	49.4	12,206	49.2

Table 124 Proportion of alcohol-related (46,460) and drug-related (n=1,460) incidents according to presence of child/ren, NSW shows the proportion of alcohol-related and drug-related incidents witnessed by children.

Table 124 Proportion of alcohol-related (46,460) and drug-related (n=1,460) incidents according to presence of child/ren, NSW								
	Alcohol-related incidents				Drug-related incidents			
	No child witnesses		Child witnesses		No child witnesses		Child witnesses	
	n	%	n	%	n	%	n	%
FV	9,968	39.3	4,875	22.1	392	1.5	191	0.9
IPV	18,645	50.3	12,872	36.7	474	1.3	403	1.1

Children were significantly less likely to witness alcohol-related incidents compared with those that were not alcohol-related ($p<0.001$).

In relation to FV incidents only, children were significantly more likely to witness drug-unrelated incidents than those involving illicit drugs ($p<0.001$, Phi=-0.03).

Table 125 Proportion of child-witnessed FV, IPV and all incidents according to area level of socioeconomic disadvantage, NSW (n=57,227)presents the proportion of child-witnessed incidents that took place across areas of relative disadvantage.

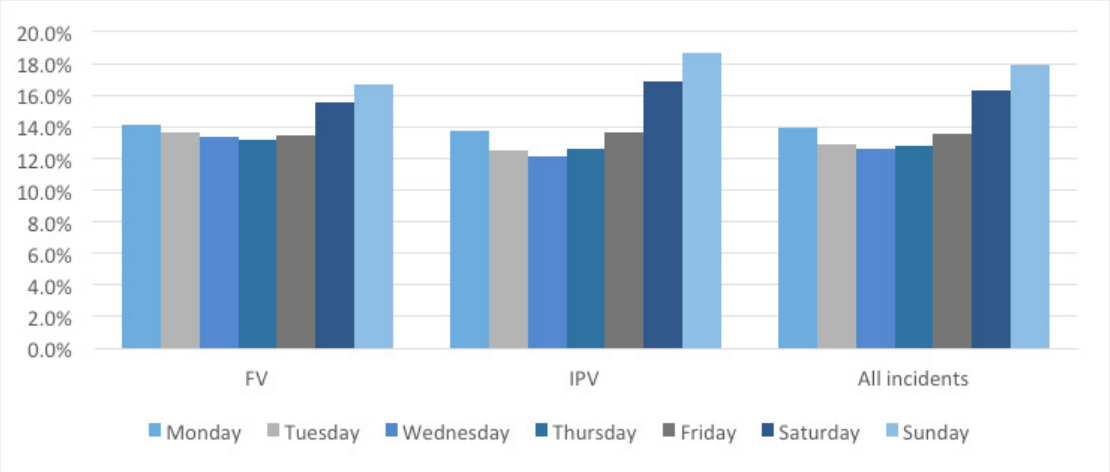
Table 125 Proportion of child-witnessed FV, IPV and all incidents according to area level of socioeconomic disadvantage, NSW (n=57,227)						
	FV		IPV		All incidents	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantage)	5,812	46.8	9,876	53.2	15,699	50.6
2	4,959	48.4	7,994	50.5	12,963	49.6
3	5,551	46.2	8,705	46.7	14,264	46.4
4	3,488	45.6	5,350	46.7	8,844	46.2
5 (least disadvantage)	2,244	44.3	3,138	41.5	5,385	42.6

The proportion of child-witnessed incidents decreased across areas of relative disadvantage. Compared with family violence, child-witnessed incidents of intimate partner violence were significantly more likely to occur in the two most socioeconomically disadvantaged areas of the state ($p<0.001$, Phi=0.06; $p<0.01$, Phi=0.02), and least likely in the most advantaged areas ($p<0.001$, Phi=-0.03).

Day and time of incident

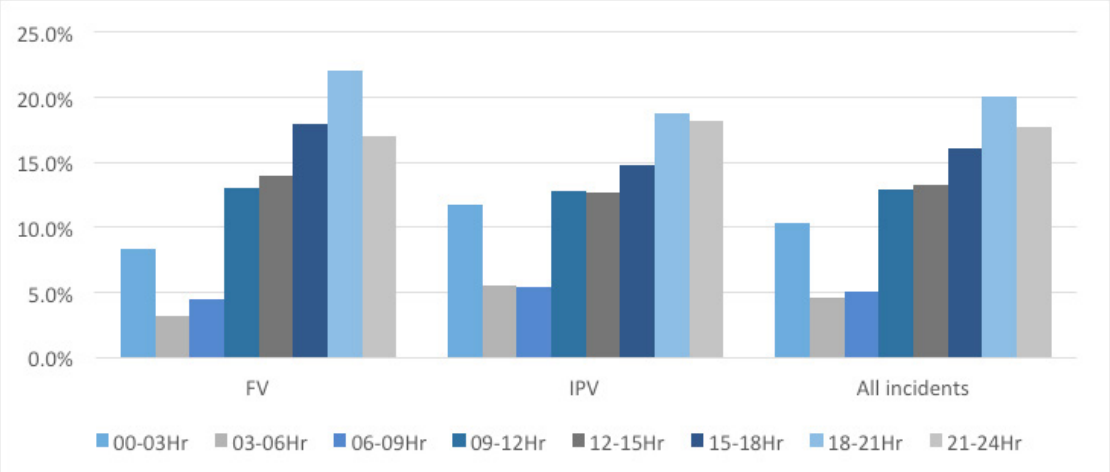
The day and time at which DV incidents occurred are shown in Figure 48 and Figure 49 respectively.

Figure 48 Proportion of FV, IPV and all incidents that took place on each day of the week, NSW (n=114,594)



Family and domestic violence incidents were more likely to take place on a Saturday (16.3%) and Sunday (17.9%) than on weekdays (12.6%–13.9%). This trend was consistent for both IPV and FV incidents. While significantly greater proportions of FV incidents took place between Monday and Thursday, and significantly greater proportions of IPV incidents took place on Saturday and Sunday, the effect size of each comparison was small (Phi=0.01–0.02).

Figure 49 Proportion of FV, IPV and all incidents that took place during each three-hour interval, NSW (n=114,594)



The proportion of incidents that took place during each three-hour interval generally increased over the daytime hours from 6 am to 9 pm, decreased somewhat between 9 pm and 12 am, and decreased again thereafter—see Figure 49. Incidents were least likely to occur from 3 to 6 am, and most likely to occur between 6 pm and 12 am.

Compared with FV, IPV incidents were significantly more likely to take place late in the day, between 9 pm and 9 am (Phi=0.02–0.05); FV incidents were significantly more likely to take place earlier, between 12 pm and 9 pm (Phi=-0.02–0.04).

When day of the week and time of day are considered together, the greatest proportion of family violence incidents took place between 6 and 9 pm regardless of day. Intimate partner violence incidents that took place between Sunday and Wednesday were most likely to occur between 6 and 9 pm; while IPV incidents on Thursday to Saturday most often took place between 9 pm and 12 am.

Alcohol-related incidents

Alcohol-related incidents were least likely to take place on a Monday, and most likely on a Saturday. Alcohol-related incidents most often occurred between 3 and 6 am, closely followed by 12 am to 3 am, and least often between 12 pm and 3 pm (see Table 126 and Table 127). A significantly greater proportion of alcohol-related intimate partner violence compared with family violence incidents occurred across each day of the week ($p<0.001$) and three-hour interval ($p<0.001$).

Table 126 Proportion of alcohol-related FV, IPV and all incidents that took place on each day of the week, NSW (n=46,460)

	FV		IPV		All incidents	
Day	n	%	n	%	n	%
Monday	1,551	23.1	3,327	33.6	4,889	29.4
Tuesday	1,587	24.6	3,171	35.2	4,766	30.8
Wednesday	1,740	27.4	3,329	38.1	5,081	33.6
Thursday	1,888	30.3	3,823	42.1	5,722	37.3
Friday	2,151	33.7	4,530	46.1	6,697	41.2
Saturday	3,072	41.6	6,625	54.5	9,718	49.6
Sunday	2,854	36.1	6,712	49.9	9,591	44.8

Table 127 Proportion of alcohol-related FV, IPV and all incidents that took place during three-hour intervals, NSW (n=46,460)

	FV		IPV		All incidents	
Hours	n	%	n	%	n	%
00–03	2,707	68.6	6,269	74.0	9,000	72.3
03–06	1,104	73.3	2,958	74.8	4,076	74.3
06–09	493	23.6	1,427	36.4	1,925	31.9
09–12	779	12.6	1,959	21.2	2,741	17.8
12–15	805	12.2	1,743	19.0	2,556	16.1
15–18	1,574	18.4	3,018	28.3	4,599	23.9
18–21	3,453	32.9	6,104	45.0	9,575	39.7
21–24	3,928	48.6	8,039	61.2	11,992	56.4

Alcohol-related IPV incidents between Monday and Friday most often took place between 9 pm and 12am, while alcohol-related IPV incidents on Saturdays took place most often between 9 pm and 3 am, and from 12 am to 3 am on Sundays. The highest proportion of alcohol-related assaults occurred between midnight and 6 am.

Similar trends were evident in the timing of alcohol-related family violence incidents, except for those occurring on Monday and Tuesday where they most often occurred between 6 pm and 12 am. These trends indicate that alcohol-related incidents were most likely to take place during night-time hours between 6 pm and 3 am. About two-thirds (61.5–68.6%) of all alcohol-related DV incidents occurred during these hours.

Drug-related incidents

No difference was evident in the proportion of drug-related incidents across day of the week or time of day (p>0.05).

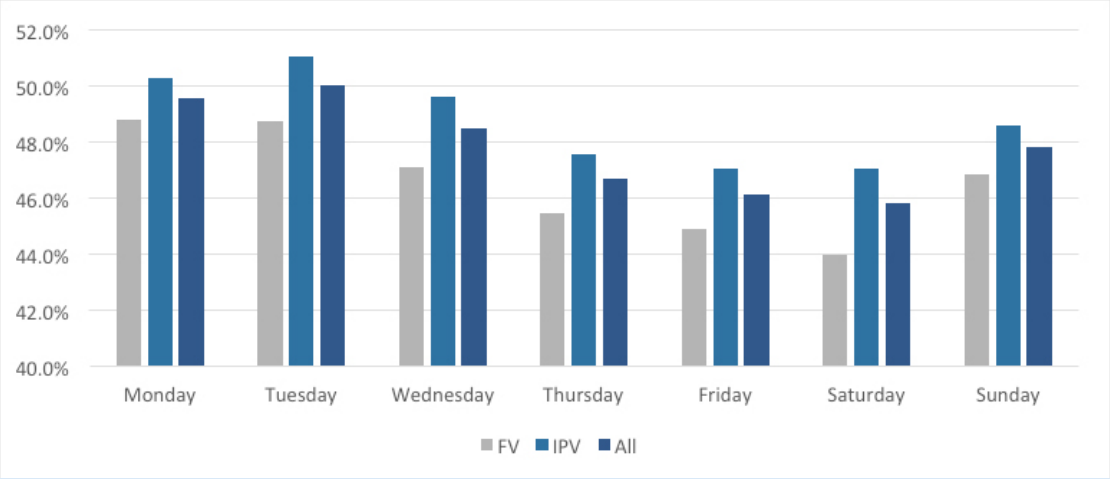
Socioeconomic disadvantage

No differences existed in the day or time that incidents occurred according to area level of socioeconomic disadvantage (p>0.05).

Child witnesses

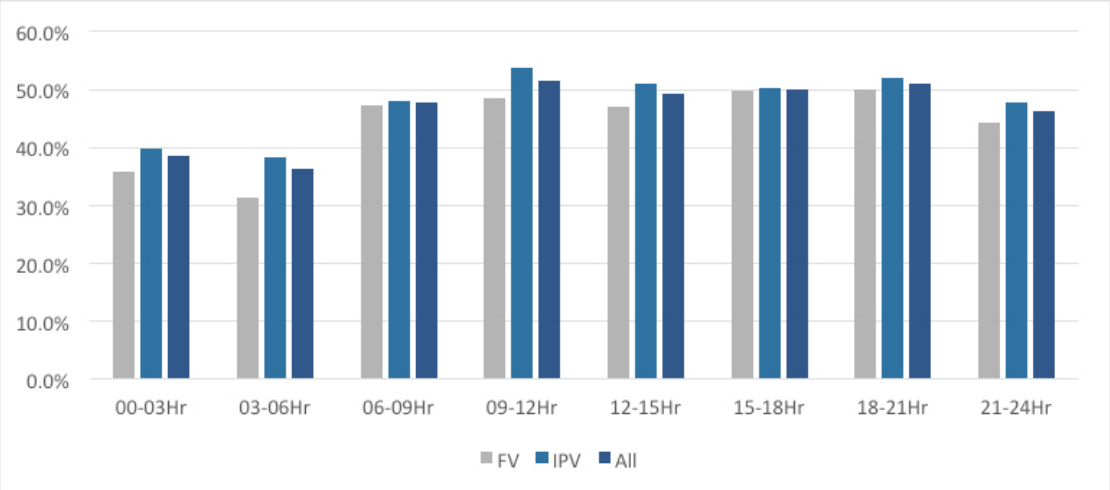
Child-witnessed incidents most often occurred on Monday and Tuesday, and least often on Friday and Saturday. Apart from incidents that occurred on Mondays, children witnessed a significantly greater proportion of IPV compared with FV incidents (ps<0.05, Phi=0.02–0.03)—see Figure 50.

Figure 50 Proportion of child-witnessed FV, IPV and all incidents per day of the week, NSW (n=119,833)



Child-witnessed incidents least often occurred between 12 am and 6 am. Except incidents that occurred either between 6 to 9 am or 3 to 6pm, children witnessed a significantly greater proportion of IPV incidents occurring at all other times compared with FV incidents (ps<0.05, Phi=0.02–0.07)—see Figure 51).

Figure 51 Proportion of child-witnessed FV, IPV and all incidents per time of day, NSW (n=119,833)



Offender recidivism and repeat victimisation

Less than half of all incidents involved recidivist offenders (37.5%) with no offender being recorded for 6,762 incidents. A similar proportion of incidents involved repeat victims (35.6%). Recidivism was indicated when an offender was involved in at least one other incident during the reporting period (2009–13). Repeat victimisation was indicated when a victim was involved in at least one other incident during that time. Most incidents involving a recidivist offender also involved a repeat victim (78.5%), compared with 21.5 percent of incidents that involved a repeat victim. Twenty-eight percent of incidents involved recidivist offenders and repeat victims who had been involved in at least one other incident together. Table 128 and Table 129 show that the proportion of incidents involving either a recidivist offender or repeat victim was greatest in 2011 and 2012, and smallest in 2009.

Intimate partner incidents were significantly more likely to involve recidivist offenders ($p<0.001$, Phi=0.05) and repeat victims ($p<0.001$, Phi=0.11), than FV incidents ($p<0.001$).

Table 128 Proportion of FV, IPV and all incidents involving recidivist offenders, NSW (n=44,987)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2009	2,995	33.1	5,363	37.9	8,364	36.0
2010	3,078	33.4	5,531	39.2	8,616	36.9
2011	3,332	35.0	5,902	40.8	9,247	38.5
2012	3,507	36.1	6,130	41.9	9,651	39.6
2013	3,320	33.4	5,774	39.0	9,109	36.7

Table 129 Proportion of FV, IPV and all incidents involving repeat victims, NSW (n=42,617)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2009	2,526	27.9	5268	37.3	7808	33.6
2010	2,591	28.1	5461	38.7	8065	34.5
2011	2,818	29.6	5,947	41.1	8,783	36.5
2012	2,987	30.7	6,231	42.6	9,235	37.9
2013	2,833	28.5	5,870	39.6	8,726	35.2

Substance involvement

Compared with incidents not flagged as substance-related, a significantly greater proportion of alcohol-related ($p<0.001$, Phi=0.04; $p<0.001$, Phi=0.05) and drug-related ($p<0.001$, Phi=0.03; $p<0.001$, Phi=0.04) incidents involved a recidivist offender or repeat victim ($p<0.001$). As shown in Table 130 and Table 131, alcohol use by either/or both victim and offender significantly increased the likelihood that the incident involved a recidivist offender or repeat victim ($ps<0.001$), with one exception. Alcohol use of offenders at FV incidents was not associated with involvement of repeat victims ($p>0.05$).

Table 130 Proportion of FV, IPV and all incidents involving recidivist offenders according to victim and offender alcohol use, NSW (n=113,071)

	Victim affected by alcohol				Offender affected by alcohol				Both affected by alcohol			
	No		Yes		No		Yes		No		Yes	
	n	%	n	%	n	%	n	%	n	%	n	%
FV[a]	3,701	13.4	2,491	15.3	6,683	24.1	4,577	28.2	2,704	9.8	1,927	11.9
IPV[a]	8,186	20.3	7,064	24.6	14,233	35.3	11,425	39.8	6,771	16.8	5,940	20.7
All	11,905	17.5	9,576	21.3	20,936	30.8	16,020	35.6	9,485	13.9	7,880	17.5

a: n=112,937

Table 131 Proportion of FV, IPV and all incidents involving repeat victims according to victim and offender alcohol use, NSW (n=119,833)

Table 130 Proportion of FV, IPV and all incidents involving recidivist offenders according to victim and offender alcohol use, NSW (n=113,071)

	Victim affected by alcohol[a]				Offender affected by alcohol[b]				Both affected by alcohol[b]			
	No		Yes		No		Yes		No		Yes	
	n	%	n	%	n	%	n	%	n	%	n	%
FV	4,496	13.3	2,439	17.7	7,949	25.5	3,311	26.0	3,040	9.7	1,591	12.5
IPV	8,783	20.3	7,367	25.6	14,763	35.6	10,895	39.5	6,859	16.6	5,852	21.2
All	13,328	17.3	9,838	23.1	22,737	31.3	14,219	35.2	9,913	13.6	7,452	18.5

a: for FV and IPV comparisons n=119,594

b: for FV and IPV comparisons n=112,937

Socioeconomic disadvantage

The proportion of incidents involving recidivist offenders or repeat victims varied across areas of relative socioeconomic disadvantage. Incidents involving recidivist offenders most often took place in the most disadvantaged areas and least often in the least disadvantaged areas. Incidents involving repeat victims showed a similar pattern.

The proportion of IPV incidents involving recidivist offenders or repeat victims was significantly greater compared with FV only for incidents occurring in areas of relative disadvantage (SEIFA quintiles 1–3; ps<0.001). Similarly, the proportion of IPV incidents involving repeat victims was significantly greater compared with FV across areas of relative disadvantage (ps<0.001). The size of this effect was largest for incidents occurring in areas of disadvantage (Phi=0.13, 0.13, 0.12, respectively) than in the more advantaged areas (Phi=0.09, 0.04).

Child witnesses

Less than half (40.5%) of child-witnessed incidents involved either a recidivist offender or repeat victim. Children were significantly more likely to witness FV than IPV incidents involving recidivist offenders or repeat victims (p<0.001, Phi=0.04–0.06).

Day of week

The proportion of incidents involving a recidivist offender was generally consistent across day of the week, and ranged from 38.4 percent (Sunday) to 41.6 percent (Thursday). Consistently, the proportion of incidents involving repeat victims was similar across the day of the week, and ranged from 34.1 percent (Sunday) to 37.2 percent (Thursday).

Time of day

The proportion of incidents involving either a recidivist offender or repeat victim was greatest between 3 and 9 am and relatively similar at all other times. The proportion of incidents involving a recidivist offender ($p<0.01$, Phi=0.03–0.07) or repeat victim ($p<0.001$, Phi=0.10–0.13) was greater for IPV compared with FV across the time of day.

Multivariate correlates of incident characteristics

The following explores multivariate predictors of domestic violence incident characteristics. A series of multivariate models were used to examine key person and incident characteristics that contributed unique variance to predicting:

- alcohol involvement;
- drug involvement;
- child witnesses;
- offender recidivism; and
- repeat victimisation.

Multivariate logistic regression models were conducted for all incidents and separately for FV and IPV incidents. Due to increased sensitivity of the Hosmer and Lemeshow Test of model fit with larger sample sizes, researchers referred to the Omnibus Tests of Model Coefficients to interpret model fit for all models.

Alcohol involvement

Three separate binary logistic regressions were performed to examine—if SEIFA disadvantage quintile; drug use; child presence at the incident; repeat offender; and repeat victim—contributed unique variance to the association between whether an incident was flagged as alcohol-related (no vs yes) at all incidents (Table 132), IPV incidents (Table 133) and FV incidents (Table 134).

All incidents

In the fully adjusted model (Step 3), incidents that involved repeat victims or offenders were 1.13 and 1.15 times more likely to be flagged as alcohol-related, while the presence of a child at the incident decreased the likelihood that an incident was alcohol-related by almost half (OR=0.53). Compared with those in the fifth (least disadvantaged) SEIFA quintile, incidents that that took place within the first to third (disadvantaged) quintiles were significantly more likely to be alcohol-related, while those in the fourth quintile were significantly less likely to be alcohol-related.

Overall the model accounted for three to four percent of the variance in whether or not an incident was alcohol-related (Cox & Snell R Square=0.03; Negelkerke R Square=0.04). It correctly predicted 12.6 percent of alcohol-related incidents (but 92.8% of incidents where alcohol was not reported). While steps one and two accounted for significant variance ($p<0.001$) the addition of drug use at Step 3 did not significantly contribute to predicting alcohol-related incidents ($p>0.05$).

Intimate family violence incidents

In the fully adjusted model (Step 3), incidents that involved repeat victims or offenders were 1.09 and 1.14 times more likely to be alcohol-related, while the presence of a child at the incident decreased the likelihood that an incident involved alcohol by almost half (OR=0.57). Compared with those in the fifth (least disadvantaged) SEIFA quintile, incidents that that took place within the first to third (disadvantaged) quintiles were significantly more likely to be alcohol-related, while those in the fourth quintile were significantly less likely to involve alcohol.

Overall, the model accounted for two to three percent of the variance in whether or not an incident was alcohol-related (Cox & Snell R Square=0.02; Negelkerke R Square=0.03) and correctly predicted 33.9 percent of alcohol-related IPV incidents (but 77.3% of alcohol-unrelated incidents). While Steps 1 and 2 accounted for significant variance ($p<0.001$) the addition of drug use at Step 3 did not significantly contribute to predicting alcohol-related IPV incidents ($p>0.05$).

Family violence incidents

In the fully adjusted model (Step 3), incidents that involved repeat offenders were 1.22 times more likely to be alcohol-related, while the presence of a child at the incident decreased the likelihood that an incident involved alcohol by more than half (OR=0.43). Unlike the overall model and the model predicting IPV incidents, involvement of repeat victims was not significantly associated with alcohol involvement. Drug use by either victim or offender increased the likelihood that the incident involved alcohol by 1.45 times. Only the third SEIFA disadvantage quintile predicted a greater likelihood of alcohol involvement, with the first (most disadvantaged) and fourth (second least disadvantaged) quintiles being associated with a significantly lower likelihood of alcohol involvement.

Overall, the model accounted for four to five percent of the variance in whether or not a family violence incident was alcohol-related (Cox & Snell R Square=0.04; Negelkerke R Square=0.05). It correctly predicted only 0.6 percent of alcohol-related FV incidents (but 99.7% of alcohol-unrelated incidents). All three steps accounted for significant variance in predicting alcohol-related FV incidents ($p<0.001$).

Table 132 Binary logistic regression associated with victim or offender alcohol use at incident (n=119,833)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.03	1.48	1.03	0.98–1.07	0.04	3.84	1.05	1.00–1.09	0.04	3.90	1.05*	1.00–1.09
2	0.21	87.58	1.24***	1.18–1.29	0.23	99.64	1.26***	1.20–1.32	0.23	99.66	1.26***	1.20–1.32
3	0.05	5.03	1.05*	1.01–1.10	0.05	5.40	1.05*	1.01–1.10	0.05	5.42	1.05***	1.01–1.10
4	-0.07	8.08	0.93**	0.89–0.98	-0.06	6.18	0.94*	0.89–0.99	-0.06	6.15	0.94*	0.90–0.99
5[a] (least disadvantage)												
Child present at incident (yes)					-0.64	2,629.75	0.53***	0.51–0.54	-0.64	2,626.53	0.53***	0.51–0.54
Repeat offender (yes)					0.14	83.05	1.15***	1.12–1.19	0.14	82.27	1.15***	1.12–1.19
Repeat victim (yes)					0.12	60.50	1.13***	1.10–1.17	0.12	60.42	1.13***	1.10–1.17
Drugs present at incident (yes)									0.08	2.32	1.09	0.98–1.21

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 133 Binary logistic regression associated with victim or offender alcohol use at intimate partner violence incidents (n=72,147)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.09	9.51	0.92**	0.87–0.97	-0.06	4.02	0.94*	0.89–1.00	-0.06	4.07	0.94*	0.89–1.00
2	0.16	32.12	1.18***	1.11–1.24	0.18	39.52	1.20***	1.13–1.28	0.18	39.54	1.20***	1.13–1.27
3	0.00	0.00	1.00	0.95–1.06	0.00	0.02	1.00***	0.95–1.06	0.00	0.02	1.00	0.95–1.06
4	-0.12	14.81	0.89***	0.84–0.94	-0.10	11.33	0.90***	0.85–0.96	-0.10	11.35	0.90***	0.85–0.96
5[a] (least disadvantage)												
Child present at incident (yes)					-0.56	1,301.12	0.57***	0.55–0.59	-0.56	1,301.64	0.57***	0.55–0.59
Repeat offender (yes)					0.13	324.52	1.14***	1.09–1.19	0.13	34.86	1.14***	1.09–1.19
Repeat victim (yes)					0.08	14.63	1.09***	1.04–1.13	0.08	14.70	1.09***	1.04–1.13
Drugs present at incident (yes)									-0.93	1.71	0.91	0.79–1.05

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 134 Binary logistic regression associated with victim or offender alcohol use at family violence incidents (n=47,447)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.23	36.41	1.26***	1.17–1.36	0.24	38.19	1.27***	1.18–1.37	0.24	38.78	1.27***	1.18–1.37
2	0.31	61.42	1.36***	1.26–1.46	0.33	70.58	1.40***	1.29–1.51	0.33	70.85	1.40***	1.29–1.51
3	0.13	10.94	1.14***	1.05–1.22	0.14	12.317	1.15***	1.06–1.24	0.14	12.51	1.15***	1.06–1.24
4	0.01	0.04	1.01	0.93–1.09	0.01	0.06	1.01	0.93–1.10	0.01	0.08	1.01	0.93–1.10
5[a] (least disadvantage)												
Child present at incident (yes)					-0.84	1,502.81	0.43***	0.41–0.45	-0.83	1,491.91	0.43***	0.42–0.45
Repeat offender (yes)					0.20	70.54	1.22***	1.16–1.28	0.20	68.50	1.22***	1.16–1.27
Repeat victim (yes)					0.03	1.44	1.03	0.98–1.08	0.03	1.45	1.03	0.98–1.08
Drugs present at incident (yes)									0.37	17.62	1.45***	1.22–1.72

statistically significant at $p<0.001$

a: reference category

Child witness

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim or offender were alcohol-affected; and whether or not an incident was drug-related, involved a repeat offender, or involved a repeat victim—contributed unique variance to the association between child presence (no vs yes) at all incidents (see Table 135), IPV incidents (see Table 136) and FV incidents (see Table 137).

All incidents

In the fully adjusted model (Step 3), all variables except the involvement of a repeat offender were significantly associated with child presence. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas with more socioeconomic disadvantage were significantly more likely to be witnessed by children, with the size of the odds ratio increasing with greater disadvantage. If the incident involved a repeat victim, the odds of a child being present were increased by 1.14. The victim (OR=0.41) and offender (OR=0.79) being affected by alcohol and drug involvement (OR=0.69) decreased the likelihood that a child was present at the incident.

The final model accounted for four to six percent of the variance in child presence at the incident (Cox & Snell R Square=0.04; Negelkerke R Square=0.06) and correctly predicted 69.8 percent of incidents children witnessed (and 45.9% of incidents that children did not witness). Each step accounted for significant variance in predicting the presence of a child at incidents (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), incidents that occurred in areas of greater disadvantage were significantly more likely to be witnessed by children compared with incidents that occurred in areas of least disadvantage. The size of the odds ratio generally increased with greater disadvantage. Involvement of a repeat victim or offender was not significantly associated with the presence of a child. If either the victim or the offender were affected by alcohol, or if the incident involved drugs, odds of the incident being witnessed by a child decreased (OR=0.89; OR=0.39; OR=0.83).

The final model accounted for five to six percent of the variance in child presence at the incident (Cox & Snell R Square=0.05; Negelkerke R Square=0.06) and correctly predicted 75.3 percent of incidents witnessed by children (and 42.1% of incidents children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), all predictors except the fourth SEIFA disadvantage quintile were significantly associated with child presence. Compared with incidents that occurred in areas of least disadvantage, children were significantly more likely to witness incidents that occurred in disadvantaged areas, with the size of the odds ratio increasing across areas of greater relative disadvantage. If the incident involved a repeat victim or a repeat offender, the odds of a child being present increased by 1.33 and 1.13, respectively. If either the victim or the offender were affected by alcohol, or if the incident involved drugs, odds of the incident being witnessed by a child decreased (OR=0.42; OR=0.59; OR=0.53).

The final model accounted for five to seven percent of the variance in child presence at the incident (Cox & Snell R Square=0.05; Negelkerke R Square=0.07) and correctly predicted 56.5 percent of incidents witnessed by children (and 60.4% of incidents children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

Table 135 Binary logistic regression associated with child presence at incident (n=119,833)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.33	229.01	1.39***	1.33–1.45	0.32	213.98	1.38***	1.32–1.44	0.34	234.17	1.41***	1.35–1.47
2	0.29	163.58	1.33***	1.28–1.39	0.28	152.88	1.32***	1.26–1.38	0.32	198.17	1.38***	1.32–1.45
3	0.16	55.65	1.18***	1.13–1.23	0.16	51.19	1.17***	1.12–1.22	0.17	60.41	1.19***	1.14–1.24
4	0.15	39.38	1.16***	1.11–1.22	0.15	37.41	1.16***	1.10–1.21	0.14	31.18	1.14***	1.09–1.20
5[a] (least disadvantage)												
Repeat offender (yes)					-0.01	0.15	0.99	0.96–1.02	0.01	0.58	1.01	0.98–1.04
Repeat victim (yes)					0.08	25.89	1.08***	1.05–1.11	0.13	69.05	1.14***	1.10–1.18
Offender alcohol-affected (yes)									-0.24	257.01	0.79***	0.76–0.81
Victim alcohol-affected (yes)									-0.90	2,312.34	0.41***	0.39–0.42
Drugs present at incident (yes)									-0.37	45.36	0.69***	0.62–0.77

*** statistically significant at $p<0.001$

a: reference category

Table 136 Binary logistic regression associated with child presence at intimate partner violence incidents (n=72,147)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.47	279.70	1.60***	1.52–1.70	0.48	290.97	1.62***	1.56–1.72	0.49	281.96	1.63***	1.54–1.72
2	0.36	156.36	1.43***	1.36–1.52	0.37	164.75	1.45***	1.37–1.54	0.41	186.87	1.50***	1.41–1.59
3	0.21	56.30	1.24***	1.17–1.31	0.22	60.60	1.25***	1.18–1.32	0.23	62.33	1.26***	1.19–1.33
4	0.21	48.27	1.24***	1.16–1.31	0.22	50.35	1.24***	1.17–1.32	0.20	40.71	1.22***	1.15–1.30
5[a] (least disadvantage)												
Repeat offender (yes)					-0.03	2.01	0.97	0.93–1.01	-0.02	0.52	0.98	0.94–1.03
Repeat victim (yes)					-0.04	3.49	0.96	0.92–1.00	0.00	0.01	1.00	0.96–1.05
Offender alcohol-affected (yes)									-0.11	34.96	0.87***	0.86–0.93
Victim alcohol-affected (yes)									-0.95	1,778.82	0.39***	0.37–0.40
Drugs present at incident (yes)									-0.18	6.79	0.83**	0.72–0.95

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 137 Binary logistic regression associated with child presence at family violence incidents (n=47,447)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.11	10.67	1.12***	1.05–1.20	0.09	6.06	1.09***	1.02–1.17	0.15	17.98	1.16***	1.08–1.25
2	0.17	22.94	1.19***	1.11–1.27	0.15	17.22	1.16***	1.08–1.25	0.22	36.81	1.25***	1.16–1.34
3	0.09	6.65	1.09**	1.02–1.17	0.08	4.73	1.08***	1.01–1.16	0.11	9.70	1.12**	1.04–1.20
4	0.05	1.86	1.05	0.98–1.13	0.04	1.28	1.04	0.96–1.12	0.05	1.50	1.05	0.97–1.13
5[a] (least disadvantage)												
Repeat offender (yes)					0.08	14.85	1.09***	1.04–1.13	0.12	27.95	1.13***	1.08–1.18
Repeat victim (yes)					0.25	118.10	1.29***	1.23–1.35	0.28	141.18	1.33***	1.27–1.39
Offender alcohol-affected (yes)									-0.53	426.10	0.59***	0.56–0.62
Victim alcohol-affected (yes)									-0.86	625.47	0.42***	0.40–0.45
Drugs present at incident (yes)									-0.63	46.51	0.53***	0.44–0.64

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Offender recidivism

Three separate binary logistic regressions were performed to examine if—SEIFA disadvantage quintile; whether the victim or offender was alcohol-affected; involved the presence of a child, and a repeat victim—contributed unique variance to the involvement of repeat offenders (no vs yes) at all incidents (Table 138), IPV incidents (Table 139) and FV incidents (Table 140).

All incidents

In the fully adjusted model (Step 3), all predictors except child presence were significantly associated with a repeat offender being involved. Compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of greater disadvantage were significantly more likely to involve a repeat offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. If the incident involved a repeat victim, the odds of the incident involving a repeat offender were increased by 16.13 times. The offender(s) being affected by alcohol increased the likelihood that the incident involved a repeat offender (OR=1.23), while the victim(s) being affected by alcohol decreased the likelihood that the incident involved a repeat offender (OR=0.93). The involvement of drugs (OR=1.76) was associated with a greater likelihood that the incident involved a repeat offender.

The final model accounted for 31 to 41 percent of the variance in predicting whether or not the incident involved a repeat offender (Cox & Snell R Square=0.31; Negelkerke R Square=0.41) and correctly predicted 70.5 percent of incidents that involved repeat offenders (and 87.3% of incidents that did not involve repeat offenders). Each step accounted for significant variance in predicting the involvement of a repeat offender (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of relative disadvantage were significantly more likely to involve a repeat offender. If the incident involved a repeat victim, the odds of the incident involving a repeat offender were increased 30.87 times. If the offender was affected by alcohol, and if the incident involved drugs, odds of the incident involving a recidivist offender increased by 1.17 and 1.77 times, respectively. The presence of a child at the incident, and victim intoxication, were not significantly associated with the incident involving a repeat offender.

The final model accounted for 41 to 55 percent of the variance in predicting incidents involving a repeat offender (Cox & Snell R Square=0.41; Negelkerke R Square=0.55) and correctly predicted 80.2 percent of incidents that involved repeat offenders (and 88.6% of incidents that did not involve repeat offenders). Each step accounted for significant variance in involvement of a repeat offender (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with the incident involving a repeat offender. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat offender. If the incident involved a repeat victim, the odds of the incident involving a repeat offender increased by 6.61 times. If a child was present at the incident, odds of the incident involving a repeat offender increased by 1.13 times. If the offender was affected by alcohol, odds of the incident involving a repeat offender increased (OR=1.34), but if the victim was affected by alcohol, odds of the incident involving a repeat offender decreased (OR=0.94). Also, drug involvement (OR=1.67) was associated with a greater likelihood that the incident involved a repeat offender.

The final model accounted for 18 to 24 percent of the variance in predicting whether or not a FV incident involved a repeat offender (Cox & Snell R Square=0.18; Negelkerke R Square=0.24) and correctly predicted 54.5 percent of incidents involving repeat offenders (and 85.3% of incidents not involving repeat offenders). Each step accounted for significant variance in predicting the involvement of a repeat offender (ps<0.001).

Table 138 Binary logistic regression predicting repeat offender involvement in all incidents (n=199,833)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.58	623.32	1.78***	1.71–1.87	0.34	145.04	1.41***	1.33–1.49	0.34	144.86	1.41***	1.33–1.49
2	0.56	548.77	1.74***	1.67–1.83	0.36	157.77	1.44***	1.36–1.52	0.36	151.41	1.43***	1.35–1.51
3	0.42	323.96	1.52***	1.45–1.59	0.28	95.31	1.32***	1.25–1.39	0.28	94.07	1.32***	1.25–1.39
4	0.24	87.50	1.27***	1.21–1.33	0.15	22.36	1.16***	1.09–1.23	0.15	23.03	1.16***	1.09–1.23
5[a] (least disadvantage)												
Child present at incident (yes)					-0.01	0.14	0.99	0.96–1.02	0.01	0.58	1.01	0.98–1.04
Repeat victim (yes)					2.78	32,203.85	16.13***	15.65–16.63	2.78	31,956.71	16.13***	15.65–16.63
Offender alcohol-affected (yes)									0.20	122.35	1.23***	1.18–1.27
Victim alcohol-affected (yes)									-0.07	10.75	0.93***	0.89–0.97
Drugs present at incident (yes)									0.56	71.49	1.76***	1.54–2.00

*** statistically significant at $p<0.001$

a: reference category

Table 139 Binary logistic regression predicting repeat offender involvement in intimate partner violence Incidents (n=72,147)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.70	547.56	2.01***	1.90–2.13	0.35	76.44	1.43***	1.32–1.54	0.36	77.30	1.43***	1.32–1.55
2	0.69	508.70	1.99***	1.87–2.11	0.42	103.09	1.52***	1.40–1.65	0.41	100.20	1.51***	1.40–1.64
3	0.52	305.45	1.69***	1.59–1.79	0.30	53.57	1.35***	1.24–1.46	0.30	53.25	1.34***	1.24–1.46
4	0.27	70.45	1.31***	1.23–1.40	0.10	5.45	1.11*	1.02–1.21	0.11	5.76	1.11*	1.02–1.21
5[a] (least disadvantage)												
Child present at incident (yes)					-0.03	1.98	0.97	0.93–1.01	-0.02	0.54	0.98	0.94–1.03
Repeat victim (yes)					3.43	25,189.35	30.93***	29.65–32.27	3.43	25,045.52	30.87***	29.59–32.21
Offender alcohol-affected (yes)									0.16	37.66	1.17***	1.11–1.23
Victim alcohol-affected (yes)									-0.03	0.96	0.97	0.91–1.03
Drugs present at incident (yes)									0.57	34.57	1.77***	1.46–2.14

*** statistically significant at $p<0.001$

a: reference category

Table 140 Binary logistic regression predicting repeat offender involvement in family violence incidents (n=47,447)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.39	112.53	1.48***	1.38–1.59	0.28	48.65	1.32***	1.22–1.43	0.28	46.43	1.32***	1.22–1.43
2	0.34	82.11	1.41***	1.31–1.52	0.26	38.74	1.29***	1.19–1.40	0.25	35.78	1.28***	1.18–1.39
3	0.25	45.44	1.29***	1.19–1.38	0.21	26.74	1.23***	1.14–1.34	0.21	25.78	1.23***	1.14–1.33
4	0.18	19.73	1.20***	1.11–1.29	0.16	13.22	1.17***	1.08–1.28	0.16	13.44	1.18***	1.08–1.28
5[a] (least disadvantage)												
Child present at incident (yes)						14.97	1.09***	1.04–1.13	0.12	38.63	1.13***	1.08–1.18
Repeat victim (yes)						6,568.76	6.57***	6.28–6.88	1.89	6,549.04	6.61***	6.32–6.92
Offender alcohol-affected (yes)									0.29	109.28	1.34***	1.27–1.41
Victim alcohol-affected (yes)									-0.10	8.40	0.90**	0.84–0.97
Drugs present at incident (yes)									0.52	30.41	1.68***	1.39–2.01

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Repeat victims

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim(s) or offender(s) were affected by alcohol; drug involvement; child presence; and the involvement of repeat offenders—contributed unique variance to predicting involvement of repeat victims (no vs yes) at all incidents (Table 141), IPV incidents (Table 142) and FV incidents (Table 143).

All incidents

In the fully adjusted model (Step 3), all predictors except drug involvement were significantly associated with the involvement of a repeat victim. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater disadvantage. If the incident involved a repeat offender, the odds of the incident involving a repeat victim increased by 16.13 times. If the victim was affected by alcohol, the odds of the incident involving a repeat victim increased by 1.50 times. Conversely, if the offender was affected by alcohol, the likelihood the incident involved a repeat victim decreased (OR=0.92).

The final model accounted for 31 to 42 percent of the variance in predicting whether or not the incident involved a repeat victim (Cox & Snell R Square=0.31; Negelkerke R Square=0.42). It correctly predicted 78.5 percent of incidents involving repeat victims (and 81.7% of incidents not involving repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Intimate partner incidents

In the fully adjusted model (Step 3), all predictors except child presence and drug involvement were significantly associated with whether or not an incident involved a repeat victim. Compared with incidents occurring in areas of least disadvantage, those that occurred in areas of greater disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing with greater disadvantage. If the incident involved a repeat offender, the odds of the incident involving a repeat victim increased by 30.87 times. If the victim was affected by alcohol the odds of the incident involving a repeat victim increased by 1.35 times, while the incident involving a repeat offender decreased the likelihood that the incident involved a repeat victim (OR=0.93). Drug involvement increased the likelihood that the incident involved a repeat victim by 1.21 times.

The final model accounted for 41 to 55 percent of the variance in predicting incidents involving a repeat victim (Cox & Snell R Square=0.41; Negelkerke R Square=0.55) and correctly predicted 83.4 percent of incidents that involved repeat victims (and 86.2% of incidents that did not involve repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), compared with incidents that occurred in the least disadvantaged areas, incidents that took place in areas of disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater relative disadvantage. No significant difference was evident between incidents that took place in the fourth and fifth (least disadvantaged) quintiles and whether or not a repeat victim was involved. If the incident involved a recidivist offender, the odds of the incident involving a repeat victim increased by 6.61 times. If the victim was affected by alcohol, the odds of the incident involving a repeat victim increased by 1.60 times, while the incident involving a repeat offender decreased the likelihood that the incident involved a repeat victim (OR=0.81). Drug involvement in the incident was not significantly associated with a repeat victim being involved.

The final model accounted for 16 to 23 percent of the variance in predicting whether or not an incident involved a repeat victim (Cox & Snell R Square=0.16; Negelkerke R Square=0.23) and correctly predicted 51.2 percent of incidents involving repeat victims (and 83.2% of incidents not involving repeat victims). Each step accounted for significant variance in predicting the involvement of a repeat victim (ps<0.001).

Table 141 Binary logistic regression predicting repeat victim Involvement in all incidents (n=119,833)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.62	675.77	1.87***	1.78–1.96	0.45	200.31	1.51***	1.43–1.60	0.40	190.65	1.50***	1.42–1.59
2	0.56	517.59	1.75***	1.67–1.84	0.34	126.25	1.40***	1.32–1.49	0.32	116.42	1.38***	1.30–1.47
3	0.42	302.26	1.52***	1.45–1.60	0.25	73.48	1.29***	1.21–1.36	0.25	69.93	1.28***	1.21–1.36
4	0.25	91.60	1.29***	1.22–1.35	0.16	25.77	1.18***	1.10–1.25	0.16	26.54	1.18***	1.11–1.26
5[a] (least disadvantage)												
Child present at incident (yes)					0.08	26.63	1.08***	1.05–1.12	0.13	70.59	1.11***	1.11–1.18
Repeat offender (yes)					2.78	32,204.22	16.13***	15.65–16.63	2.78	31,955.66	16.13***	15.65–16.63
Offender alcohol-affected (yes)									-0.09	21.43	0.92***	0.88–0.95
Victim alcohol-affected (yes)									0.41	325.52	1.50***	1.44–1.57
Drugs present at incident (yes)									0.11	2.92	1.12	0.98–1.28

*** statistically significant at $p<0.001$

a: reference category

Table 142 Binary logistic regression predicting repeat victim Involvement in intimate partner violence incidents (n=72,147)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.76	620.47	2.13***	2.01–2.26	0.52	158.23	1.68***	1.55–1.82	0.52	157.15	1.68***	1.55–1.82
2	0.69	495.53	1.99***	1.88–2.12	0.40	92.77	1.50***	1.38–1.63	0.40	89.74	1.49***	1.37–1.62
3	0.54	318.36	1.72***	1.62–1.83	0.34	69.88	1.41***	1.30–1.53	0.34	68.10	1.41***	1.30–1.52
4	0.33	97.80	1.39***	1.30–1.48	0.26	33.66	1.30***	1.19–1.42	0.26	34.75	1.30***	1.19–1.42
5[a] (least disadvantage)												
Child present at incident (yes)					-0.04	3.46	0.96	0.92–1.00	0.00	0.15	1.00	0.96–1.05
Repeat offender (yes)					3.43	25,189.30	30.93***	29.65-–32.27	3.43	25,045.17	30.87***	29.59–32.21
Offender alcohol-affected (yes)									-0.07	8.12	0.93**	0.88–0.98
Victim alcohol-affected (yes)									0.30	98.21	1.35***	1.27–1.44
Drugs present at incident (yes)									0.19	4.13	1.21*	1.01–1.47

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 143 Binary logistic regression predicting repeat victim involvement in family violence incidents (n=47,447)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.41	105.82	1.50***	1.39–1.62	0.28	42.88	1.33***	1.22–1.45	0.26	37.21	1.30***	1.20–1.42
2	0.33	66.60	1.39***	1.29–1.51	0.21	23.11	1.24***	1.13–1.35	0.20	19.81	1.22***	1.12–1.33
3	0.20	24.34	1.22***	1.13–1.32	0.10	5.63	1.11*	1.02–1.21	0.09	4.65	1.10*	1.01–1.20
4	0.12	7.56	1.13**	1.03–1.23	0.05	1.07	1.05	0.96–1.15	0.05	0.92	1.05	0.95–1.15
5a (least disadvantage)												
Child present at incident (yes)					0.25	120.25	1.29***	1.23–1.35	0.28	142.85	1.33***	1.27–1.39
Repeat offender (yes)					1.88	6,570.21	6.57***	6.28–6.88	1.89	6,549.45	6.61***	6.32–6.92
Offender alcohol-affected (yes)									-0.21	48.05	0.81***	0.76–0.86
Victim alcohol-affected (yes)									0.47	163.52	1.60***	1.49–1.72
Drugs present at incident (yes)									0.04	0.13	1.04	0.85–1.26

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

New South Wales summary

In New South Wales, most offenders were male (77.0%) falling into the 35 to 49 year age category, and most victims were female (68.3%) falling into the 18 to 49 year age category.

Offenders were mostly involved in IPV-related incidences (60.2%), with the majority involving only one offender (88.5%). Most victims were involved in incidences that were IPV-related (60.3%), with most incidences involving one or two victims (98.2%).

The SEIFA disadvantage index shows the proportion of incidents in the state was greatest in areas of the most disadvantage (1st quintile 25.9%, 5th quintile 10.6%).

Incident trends

Between 2009 and 2013, of the 119,833 domestic violence incidents attended by police, 72,147 (60.2%) were related to an intimate partner, and 47,447 (39.6%) were related to family violence. The highest proportions of both IPV and FV incidents were recorded in 2013, with incidents slightly increasing over time.

Alcohol-related incidents were highest in 2009, gradually decreasing across the reporting period from 43.3 percent of all incidents in 2009 to 35.1 percent in 2013. Incidents of intimate partner violence (26.3%) were more likely to be alcohol-related than FV-related incidents (12.4%). In 19.3 percent of all incidents, victims were affected by alcohol, and offenders in 32.7 percent. New South Wales is the only state to report a reduction in the number of alcohol-related IPV incidents attended.

A very small proportion of incidents involved drugs (1.2%) between 2009 and 2013 in New South Wales, with the highest incidence in 2013 (1.7%) and the lowest in 2009 (0.9%). Drug involvement was more likely to occur in areas of greater socioeconomic disadvantage.

Child witness to DV incidents occurred at comparable levels across FV and IPV, however there was a 10.6 percent rise between 2009 and 2010 in the number of FV incidents witnessed by one or more children. The highest proportions of child-witnessed incidents occurred in 2012 (49.4% FV, 49.7% IPV). Children were significantly more likely to witness unrelated alcohol incidents compared with those that were alcohol-related.

Less than half of all incidents involved recidivist offenders (37.5%) or repeat victims (35.6%), with the higher proportions of incidents involving a recidivist offender in 2011 and 2012 (35.0–36.1 FV, 40.8–41.9 IPV), and smallest in 2009 (33.1 FV, 37.9 IPV). Compared with incidents not flagged as substance-related, a significantly greater proportion of alcohol-related and drug-related incidents involved a recidivist offender or repeat victim.

Domestic violence incidents were more likely to take place on Saturday (16.3%) and Sunday (17.9%). Alcohol-related IPV incidents on Monday to Friday most often took place between 9 pm and 12 am, while alcohol-related incidents on Saturdays most often took place between 9 pm and 3 am, and from 12 am to 3 am on Sundays.

Key correlates of domestic violence

Repeat victims or offenders were 1.13 and 1.15 times more likely to be flagged as alcohol-related, while child presence at the incident decreased the likelihood that an incident was alcohol-related by almost half (OR=0.53). Compared with those in the fifth (least disadvantaged) SEIFA quintile, incidents that that took place within the first to third (disadvantaged) quintiles were significantly more likely to be alcohol-related, while those in the fourth quintile were significantly less likely to be alcohol-related. Intimate partner violence incidents involving repeat victims or offenders were 1.09 and 1.14 times more likely to be alcohol-related, while child presence at the incident decreased likelihood that an incident involved alcohol by almost half (OR=0.57). In FV incidents, repeat offenders were 1.22 times more likely to be alcohol-related, while child presence at the incident decreased likelihood that an incident involved alcohol by more than half (OR=0.43).

All variables except involvement of a repeat offender (repeat victim OR=1.14, offender alcohol affected OR=0.79, victim alcohol affected OR=0.41, drugs present OR=0.69) were significantly associated with child presence. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas with more socioeconomic disadvantage were significantly more likely to be witnessed by children, with the size of the odds ratio increasing with greater disadvantage. Incidents of intimate partner violence involving alcohol or drugs decreased the odds of the incident being witnessed by a child (OR=0.89; OR=0.39; OR=0.83). In FV incidents, if the incident involved a repeat victim or a repeat offender, the odds of a child being present increased by 1.33 and 1.13, respectively. If either the victim or the offender were affected by alcohol, or if the incident involved drugs, odds of the incident being witnessed by a child decreased (OR=0.42; OR=0.59; OR=0.53).

If the incident involved a repeat victim, the odds of the incident also involving a repeat offender were increased by 16.13 times. The offender(s) being affected by alcohol increased the likelihood that the incident involved a repeat offender (OR=1.23), while the victim(s) being affected by alcohol decreased the likelihood that the incident involved a repeat offender (OR=0.93). Drug involvement (OR=1.76) was associated with a greater likelihood that the incident involved a repeat offender. Compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of greater disadvantage were significantly more likely to involve a repeat offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. Incidents of intimate partner violence involving repeat victims increased the odds of the incident involving a repeat offender by 30.87 times. If the offender was affected by alcohol and if the incident involved drugs, odds of it involving a recidivist offender increased by 1.17 and 1.77 times, respectively. In family violence incidents, if the incident involved a repeat victim, the odds of it involving a repeat offender increased by 6.61 times. If a child was present at the incident, odds of the incident involving a repeat offender increased by 1.13 times. If the offender was affected by alcohol odds of the incident involving a repeat offender increased (OR=1.34), but if the victim was affected by alcohol odds of the incident involving a repeat offender decreased (OR=0.94). Drug involvement (OR=1.67) also was associated with a greater likelihood that the incident involved a repeat offender.

All factors except drug involvement (child present OR=1.11, repeat offender OR=16.13, offender alcohol-affected OR=0.92, victim alcohol-affected OR=1.50) were significantly associated with the involvement of a repeat victim. Compared with incidents that occurred in areas of least disadvantage, those taking place in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater disadvantage. Incidents of intimate partner violence involving a repeat offender increased the odds of it involving a repeat victim by 30.87 times. If the victim was affected by alcohol the odds of the incident involving a repeat victim increased by 1.35 times, while the incident involving a repeat offender decreased the likelihood that the incident involved a repeat victim (OR=0.93). Drug involvement increased the likelihood that the incident involved a repeat victim by 1.21 times. In family violence incidents, if the incident involved a recidivist offender, the odds of the incident involving a repeat victim increased by 6.61 times. If the victim was affected by alcohol the odds of the incident involving a repeat victim increased by 1.60 times, while the incident involving a repeat offender decreased the likelihood that the incident involved a repeat victim (OR=0.81).

Northern Territory police data results

The following sets out trends for domestic violence incidents attended by NT police between 2010 and 2014. They are presented separately for individuals and incidents. These findings relate to incidents of domestic violence involving intimate partners and other family members. They compare data related to IPV and FV.

Individuals

Demographic and alcohol intoxication are presented for offenders and victims.

Offenders

During the study period, NT police recorded 28,192 episodes of offending at DV incidents, including 12,001 unique offenders. Of all incidents recorded, 68.8 percent did not include offender or victim information due to state recording practices.

Most incidents (88.5%) involved one offender, and were IPV-related (77.7%) while up to eight offenders were recorded per incident (see Table 144). A slightly higher proportion of FV incidents (4.1%) involved two offenders compared with IPV incidents.

Table 144 Number of offenders recorded at incidents, NT (n=87,809)

	FV		IPV		All incidents	
	n	%	n	%	n	%
0	–	–	–	–	60,198	68.6
1	3,813	95.4	20,782	97.4	26,724	30.4
2	165	4.1	538	2.5	840	1.0
3	12	0.3	8	<0.1	35	<0.1
4	3	0.1	0	<0.1	8	<0.1
5	1	<0.1	0	<0.1	1	<0.1
6+	1	<0.1	2	<0.1	3	<0.1

Note: type of violence was not categorised for 2,439 offenders

Most offenders were male (82.3%) across all age groups (see Table 145). The greatest proportion of offenders were aged between 25 and 34 years (36.3%), while the lowest proportion were aged from five to 11 and from 70 to 84 years (0.1%).

Table 145 Proportion of female, male and all offenders by age group, NT (n=28,192)

	Female		Male		All offenders[a]	
Age (years)	n	%	n	%	n	%
5–11	1	4.5	21	95.5	22	0.1
12–17	224	24.0	709	76.0	933	3.3
18–24	959	16.2	4,959	83.8	5,918	21.0
25–34	1,700	16.6	8,538	83.4	10,238	36.3
35–49	1,828	19.2	7,691	80.8	9,519	33.8
50–59	248	19.2	1,046	80.8	1,294	4.6
60–69	13	7.1	169	92.9	182	0.6
70–84	7	20.0	28	80.0	35	0.1
85+	16	31.4	35	68.6	51	0.2

a: the n and % refer to the total number of offenders within this age group

Table 146 presents the proportion of offenders in nine age groups separately for those involved in FV and IPV incidents. While the greatest proportion of offenders of both FV and IPV incidents were aged between 25 and 49 years, a greater proportion of offenders involved in FV compared with IPV incidents were aged from 12 to 24 years.

Table 146 Proportion of FV and IPV offenders in nine age groups, NT (n=25,753)				
	FV		IPV	
Age (years)	n	%	n	%
5–11	9	0.2	1	<0.1
12–17	373	9.0	419	1.9
18–24	1,080	26.1	4,248	19.7
25–34	1,374	33.2	8,054	37.3
35–49	1,075	26.0	7,727	35.7
50–59	166	4.0	1,008	4.7
60–69	33	0.8	127	0.6
70–84	10	0.2	13	0.1
85+	16	0.4	20	0.1

Note: type of violence was not categorised for 2,439 offenders

Victims

A total of 27,583 episodes of victimisation were recorded across all domestic violence incidents in the Northern Territory during the reporting period. This includes 27,213 unique victims and 1,990 repeat victims involved in multiple incidents across the reporting period. Most incidents were IPV-related (77.3%) and involved one victim (29.1%), while less than one percent of cases involved more than three victims—see Table 147.

Table 147 Number of victims recorded at incidents, NT (n=87,778)						
	FV		IPV		All victims	
	n	%	n	%	n	%
0	–	–	–	–	60,195	68.6
1	3,181	79.6	20,467	95.9	25,529	29.1
2	650	16.3	832	3.9	1,800	2.1
3	105	2.6	26	0.1	181	0.2
4	45	1.1	4	<0.1	54	0.1
5	9	0.2	1	<0.1	12	<0.1
6+	5	0.1	1	<0.1	7	<0.1

Table 148 presents the proportion of female and male victims across age groups. Most victims were female (68.3%). Female victims tended to be older and concentrated in the 18 to 49 year age brackets, while male victims were younger concentrated in the zero to 11 year age group.

Table 148 Proportion of female, male and all victims in 10 age groups, NT (n=29,539[a])						
	Female		Male		All victims[b]	
Age (years)	n	%	n	%	n	%
0–4	170	44.0	216	56.0	386	1.3
5–11	201	49.4	206	50.6	407	1.4
12–17	1,323	83.9	253	16.1	1,576	5.3
18–24	5,544	90.4	589	9.6	6,133	20.8
25–34	8,062	85.8	1,336	14.2	9,398	31.8
35–49	7,539	80.0	1,884	20.0	9,423	31.9
50–59	1,066	65.0	573	35.0	1,639	5.5
60–69	243	51.8	226	48.2	469	1.6
70–84	44	59.5	30	40.5	74	0.3
85+	26	78.8	7	21.2	33	0.1

a: the sex of 1 victim was either unknown or not recorded

b: refers to the proportion of all victims within this age group

A higher proportion of child victims of FV (34.6%) and IPV (28.2%) were female, with most child victims involved in FV-related incidents—see Table 149.

Table 149 Proportion and gender of incidents involving a child victim per year, NT (n=19,700)								
	FV				IPV			
	Female		Male		Female		Male	
	n	%	n	%	n	%	n	%
2010	127	29.3	92	21.2	149	34.4	6	1.4
2011	139	28.8	101	20.9	183	37.9	6	1.2
2012	125	26.4	90	19.0	190	40.2	7	1.5
2013	139	27.3	130	25.5	166	32.5	15	2.9
2014	140	29.8	120	25.5	132	28.1	5	1.1

Note: type of violence was not recorded for 307 child victims

Incidents

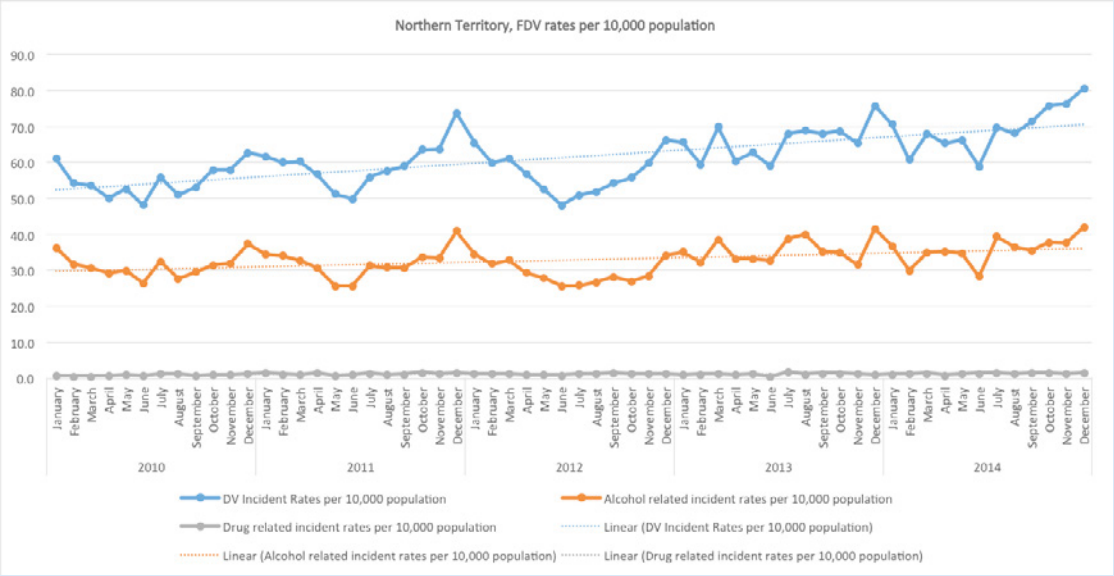
Northern Territory police attended 87,806 domestic violence incidents across the reporting period, including 21,331 IPV, 3,995 FV incidents, and 62,480 uncategorised incidents. Table 150 shows that the proportion of FV and IPV incidents increased across the five-year period. This is most evident for the incidents without offender or victim details that are unable to be categorised into FV of IPV incidents. At all years, there was a greater proportion of IPV than FV incidents.

Table 150 Proportion of FV, IPV and all incidents per year, NT (n=87,806)

	FV		IPV		Uncategorised		All incidents	
	n	%	n	%	n	%	n	Rate per 10,000
2010	675	4.4	3,826	25.2	10,695	70.4	15,196	659.8
2011	732	4.4	3,912	23.5	11,994	72.1	16,638	715.0
2012	752	4.6	4,098	25.0	11,530	70.4	16,380	684.5
2013	964	5.0	4,959	25.7	13,349	69.3	19,272	793.6
2014	872	4.3	4,536	22.3	14,912	73.4	20,320	833.7

Figure 52 below shows the rates of all FDV incidents per 10,000 people has increased between 2010 and 2014. This trend is consistent for alcohol- and drug-related incidents.

Figure 52 Alcohol, drug, and all incident rates per 10,000 population over reporting period, NT



Socioeconomic disadvantage

Incident locations were classified into one of five levels of socioeconomic disadvantage according to the ABS Socio-Economic Indexes for Areas (SEIFA)—see Table 151.

Table 151 Proportion of FV, IPV and all incident locations[a] according to socioeconomic disadvantage (n=85,401)

SEIFA disadvantage quintile	FV		IPV		Uncategorised		All incidents	
	n	%	n	%	n	%	n	%
1 (most disadvantage)	878	22.9	4,024	19.5	9,704	15.9	14,606	17.1
2	829	21.7	5,331	25.8	12,735	20.9	18,895	22.1
3	374	9.8	1,671	8.1	7,527	12.4	9,572	11.2
4	1,445	37.8	7,572	36.6	23,908	39.3	32,925	38.6
5 (least disadvantage)	301	7.9	2,072	10.0	7,030	11.5	9,403	11.0

a: postcodes were either unavailable or invalid for 2,408 (2.7%) incidents, reducing the analytic sample to 85,401

More than a third of all incidents (39.2%) took place in areas with the greatest socioeconomic disadvantage, and the smallest proportion of incidents (11%) in the least disadvantaged areas of the Northern Territory. A significant difference was evident in the proportion of IPV versus FV incidents according to area level of socioeconomic disadvantage (p<0.001, Phi=0.05).

Alcohol-related incidents

Overall, 53.6 percent of all DV incidents were flagged as alcohol-related. Table 152 shows that at each year, a significantly greater proportion of IPV (67.2%) than FV (55.2%) incidents were alcohol-related (p<0.001, Phi=-0.09). The proportion of alcohol-related incidents gradually decreased across the reporting period from 57.0 percent of all incidents in 2010 to 51.6 percent in 2014.

Table 152 Proportion of alcohol-related FV, IPV and all incidents per year, NT (n=46,943)

	FV		IPV		Uncategorised		All incidents	
Year	n	%	n	%	n	%	n	%
2010	389	57.6	2,672	69.8	5,585	52.4	8,646	57.0
2011	401	54.8	2,619	67.0	5,946	49.7	8,966	54.0
2012	408	54.3	2,696	65.8	5,351	46.5	8,455	51.7
2013	559	58.0	3,368	67.9	6,472	48.6	10,399	54.1
2014	447	51.4	2,973	65.6	7,057	47.4	10,477	51.6

Note: an alcohol-related flag was not provided for 165 incidents

As shown in Figure 53, IPV incidents were more likely to be alcohol-related, across all levels of socioeconomic disadvantage. The largest difference can be seen in relation to incidents that took place in the least disadvantaged areas of NT, where 60.6 percent of IPV compared with 48.2 percent of FV incidents were flagged as alcohol-related.

Figure 53 Proportion of alcohol-related FV and IPV incidents according to area level of socioeconomic disadvantage, NT (n=85,225)

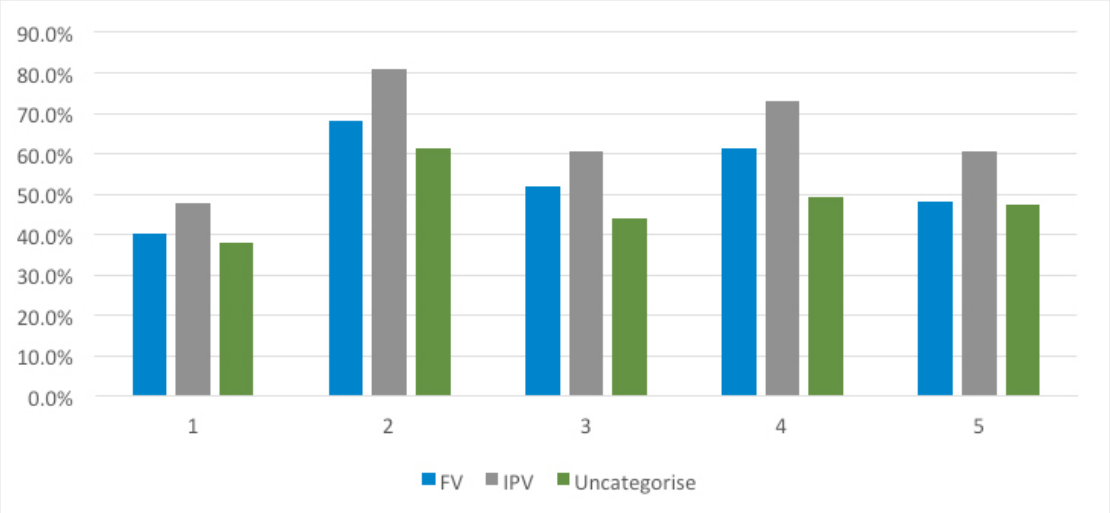


Table 153 shows that victim(s) were affected by alcohol in only 0.7 percent of incidents, and offenders, in 13.3 percentof incidents. Incident participants other than the victim and offender were affected by alcohol in 39.5 percent of incidents.

Table 153 Proportion of FV, IPV and all incidents where victim and/or offender were affected by alcohol, NT (n=87,630)								
Person/s affected by alcohol	FV		IPV		Uncategorised		All incidents	
	n	%	n	%	n	%	n	%
Victim	88	2.2	275	1.3	282	0.5	645	0.7
Offender	1,254	31.4	7,963	37.3	2,452	3.9	11,669	13.3
Other participants	862	21.6	6,090	28.6	27,620	44.3	34,572	39.5

Note: alcohol involvement was not provided for 176 incidents

Drug-related incidents

There were few drug-related domestic violence incidents (1.8%; n=1,608). As Table 154 shows, the proportion of drug-related incidents increased from 1.6 percent in 2010 to 1.8 percent in 2014. No significant difference was evident in the proportion of drug-related IPV compared with FV incidents (p>0.05).

Table 154 Proportion of drug-related FV, IPV and all incidents per year, NT (n=87,630)								
Year	FV		IPV		Uncategorised		All incidents	
	n	%	n	%	n	%	n	%
2010	20	3.0	114	3.0	110	1.0	244	1.6
2011	40	5.5	148	3.8	147	1.2	335	2.0
2012	32	4.3	169	4.1	129	1.1	330	2.0
2013	34	3.5	163	3.3	131	1.0	328	1.7
2014	40	4.6	162	3.6	169	1.1	371	1.8

Table 155 shows the proportion of drug-related FV and IPV incidents that took place in areas of most to least socioeconomic disadvantage.

Table 155 Proportion of drug-related FV, IPV and all incidents according to area socioeconomic disadvantage level, NT (n=119,645)								
SEIFA disadvantage quintile	FV		IPV		Uncategorised		All incidents	
	n	%	n	%	n	%	n	%
1 (most disadvantaged)	27	16.6	108	14.8	96	14.4	231	14.8
2	21	12.9	104	14.2	92	13.8	217	13.9
3	14	8.6	103	14.1	97	14.5	214	13.7
4	82	50.3	301	41.2	293	43.9	676	43.3
5 (least disadvantaged)	19	11.7	114	15.6	90	13.5	223	14.3

The proportion of drug-related incidents significantly differed across areas of relative disadvantage (p<0.001, Phi=0.03), and a significant difference was evident between drug-related FV and IPV incidents across area levels of disadvantage (p<0.001, Phi=0.05).

Child witnesses

Children were present at a small proportion (15.5%, n=13,544) of all domestic violence incidents. As Table 156 shows, the proportion of child-witnessed FV and IPV incidents decreased slightly from 2010 to 2014. A significant difference was evident in the proportion of child-witnessed IPV compared with FV incidents (p<0.001, Phi=0.16).

Table 156 Proportion of child-witnessed FV, IPV and all incidents per year, NT (n=13,544)

	FV		IPV		Uncategorised		All incidents	
Year	n	%	n	%	n	%	n	%
2010	238	35.3	610	15.9	1,677	15.8	2,525	16.7
2011	254	34.7	638	16.3	1,643	13.8	2,535	15.3
2012	240	31.9	630	15.4	1,479	12.9	2,349	14.4
2013	304	31.5	774	15.6	1,828	13.7	2,906	15.1
2014	311	35.7	798	17.6	2,120	14.3	3,229	15.9

Note: child present was not provided for 230 incidents

Table 157 shows the proportion of alcohol-related and drug-related incidents witnessed by children.

Table 157 Proportion of alcohol-related (46,880) and drug-related (n=1,608) incidents according to presence of child/ren, NT

	Alcohol-related incidents				Drug-related incidents			
	No child witnesses		Child witnesses		No child witnesses		Child witnesses	
	n	%	n	%	n	%	n	%
FV	1,615	61.0	589	43.8	113	4.3	53	3.9
IPV	12,470	69.8	1,858	53.9	584	3.3	172	5.0
Uncategorised	27,195	50.8	3,153	36.1	553	1.0	133	1.5

Note: child present was not provided for 230 incidents. Drug involvement was not provided for 176 incidents

Incidents witnessed by children were significantly less likely to be alcohol-related than incidents not witnessed by children ($p<0.001$, Phi=-0.10). Table 158 presents the proportion of child-witnessed incidents that took place across areas of relative disadvantage.

Table 158 Proportion of child-witnessed FV, IPV and all incidents according to area level of socioeconomic disadvantage, NT (n=13,183)

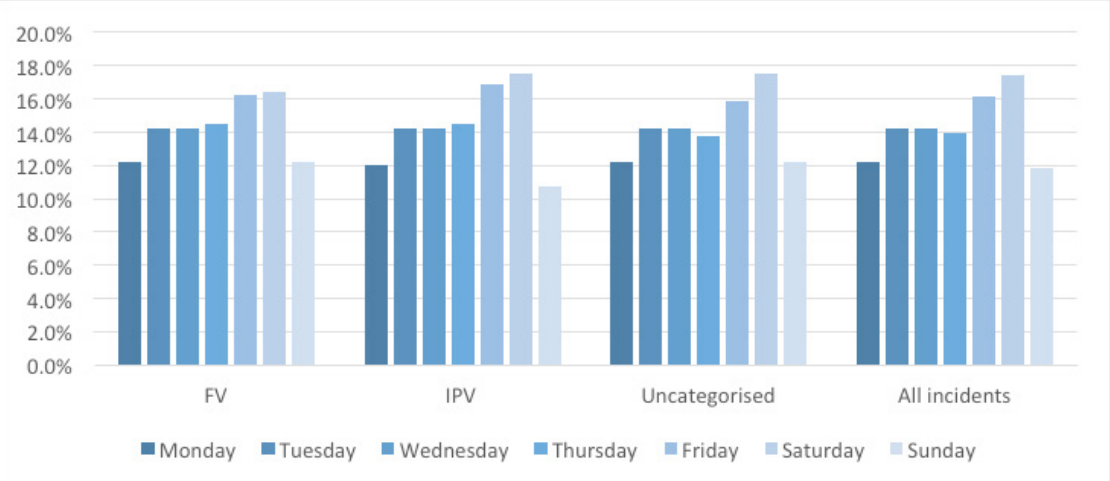
SEIFA disadvantage quintile	FV		IPV		Uncategorised		All incidents	
	n	%	n	%	n	%	n	%
1 (most disadvantage)	344	39.2	836	20.8	1,271	13.1	2,451	16.8
2	259	31.2	692	13.0	1,476	11.6	2,427	12.8
3	165	44.1	398	23.8	1,570	20.9	2,133	22.3
4	451	31.2	1,127	14.9	3,438	14.4	5,016	15.2
5 (least disadvantage)	78	25.9	288	13.9	790	11.2	1,156	12.3

The proportion of child-witnessed incidents remained steady across areas of relative disadvantage, with the highest proportion in the third quintile. Child-witnessed incidents were significantly more likely to occur in all but the fourth quintile of socioeconomic disadvantage—first ($p<0.001$, Phi=0.02), second ($p<0.001$, Phi=-0.04), third ($p<0.001$, Phi=0.07), and fifth ($p<0.001$, Phi=-0.03).

Day and time of incident

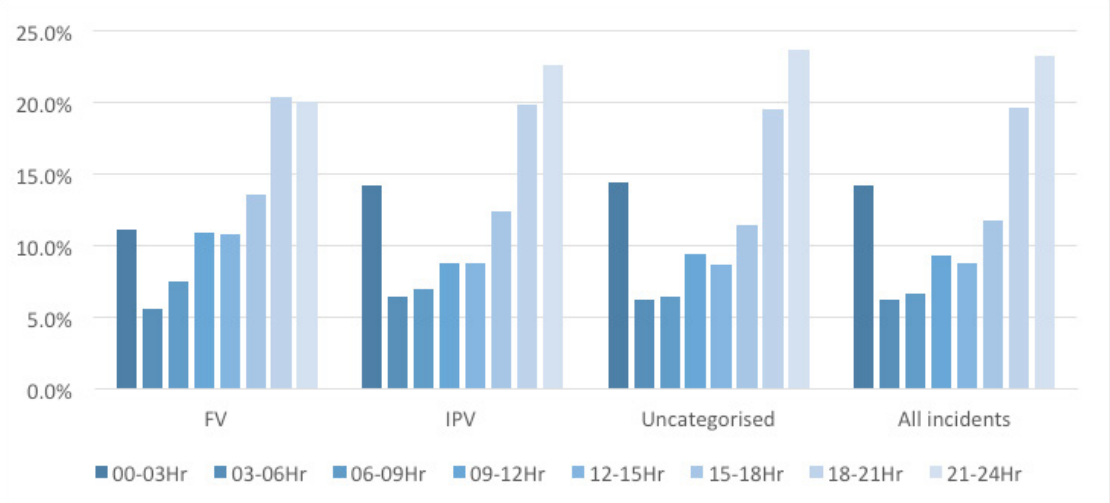
The day and time at which FDV incidents occurred are shown in Figure 54 and Figure 55, respectively.

Figure 54 Proportion of FV, IPV and all incidents that took place on each day of the week, NT (n=87,791)



Family and domestic violence incidents were more likely to take place on a Saturday (16.1%) and Sunday (17.5%) than on weekdays (11.9–14.2%). This trend was consistent for both IPV and FV incidents.

Figure 55 Proportion of FV, IPV and all incidents that took place during each three-hour interval, NT (n=114,594)



The proportion of incidents that took place during each three-hour interval generally increased over the daytime hours from 6 am to 9 pm, peaking at 12 am. Incidents were least likely to occur between 3 and 6 am, and most likely to occur from 6 pm to 12 am.

When day of the week and time of day are considered together, the greatest proportion of FV incidents took place between 9 pm and 12 am regardless of day and type of incident.

Alcohol-related incidents

Alcohol-related incidents were least likely on a Monday, and most likely on a Saturday (see Table 159). Further, alcohol-related incidents most often occurred from 12 am to 3 am, closely followed by 3 to 6 am, and least often between 9 am and 12 pm (see Table 160). There was a significantly greater proportion of alcohol-related IPV compared with FV incidents across each day of the week ($p<0.001$), and each three-hour interval ($p<0.001$).

Table 159 Proportion of alcohol-related FV, IPV and all incidents that took place on each day of the week, NT (n=46,932)

	FV		IPV		Uncategorised		All incidents	
Day	n	%	n	%	n	%	n	%
Monday	199	40.9	1,472	57.5	2,926	38.4	4,597	43.1
Tuesday	324	57.0	1,973	65.2	4,036	45.5	6,333	50.8
Wednesday	309	54.3	2,028	66.9	4,310	48.7	6,647	53.4
Thursday	342	59.2	2,171	70.4	4,372	51.1	6,885	56.3
Friday	393	60.7	2,609	72.6	5,245	53.2	8,247	58.5
Saturday	417	63.6	2,767	74.0	6,289	57.6	9,473	61.8
Sunday	220	45.1	1,308	57.2	3,222	42.2	4,750	45.7

Table 160 Proportion of alcohol-related FV, IPV and all incidents that took place during three-hour intervals, NT (n=46,932)

	FV		IPV		Uncategorised		All incidents	
Hour	n	%	n	%	n	%	n	%
00–03	359	80.5	2,502	82.5	6,145	68.4	9,006	72.3
03–06	185	82.2	1,074	78.5	2,674	69.0	3,933	71.9
06–09	122	40.9	709	47.6	1,263	31.3	2,094	36.0
09–12	111	25.6	647	34.7	1,003	17.2	1,761	21.6
12–15	105	24.4	726	38.9	1,005	18.5	1,836	23.8
15–18	209	38.5	1,626	61.6	2,444	34.2	4,279	41.4
18–21	491	60.4	3,132	74.1	6,376	52.3	9,999	58.0
21–24	622	77.5	3,912	80.9	9,490	64.2	14,024	68.7

Drug-related incidents

A significant difference was evident in the proportion of drug-related incidents across the time of day (p=0.002, Phi=0.02), but with no difference in the day of the week.

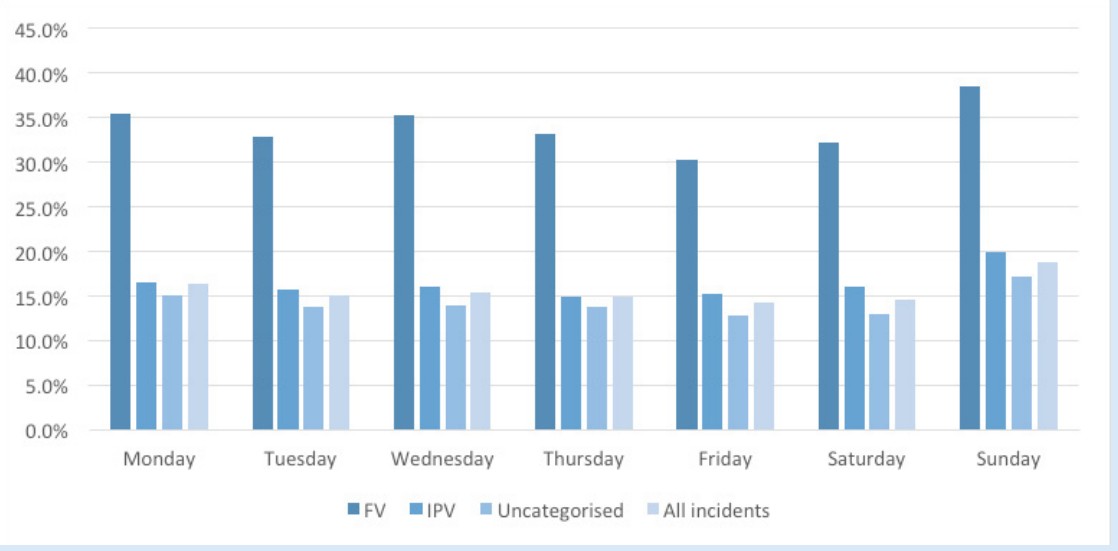
Socioeconomic disadvantage

Differences existed across the time and day with incidents occurring according to the area level of socioeconomic disadvantage (p<0.001, Phi=0.13, Phi=0.07).

Child witnesses

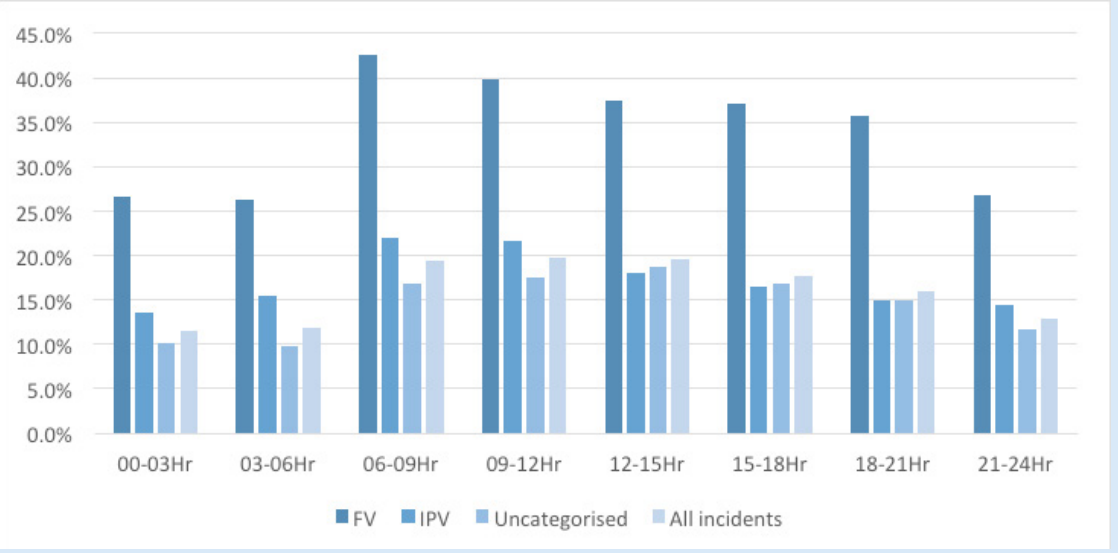
Child-witnessed incidents most often occurred on a Monday and Tuesday and least often on a Friday and Saturday. Child witnessing significantly differed across the day of the week (p<0.001, Phi=0.03)—see Figure 56.

Figure 56 Proportion of child-witnessed FV, IPV and all incidents per day of the week, NT (n=27,088)



Child-witnessed incidents least often occurred between 12 am and 6 am. Child witnessing significantly differed across the time of day (p<0.001, Phi=0.09)—see Figure 57.

Figure 57 Proportion of child-witnessed FV, IPV and all incidents per time of day, NT (n=13,544)



Offender recidivism and repeat victimisation

Less than half of all incidents involved recidivist offenders (24.6%) or repeat victims (23.7%). No offender or victim was recorded for 60,197 incidents. Recidivism was indicated when an offender was involved in at least one other incident between 2010 and 2014. Repeat victimisation was indicated when a victim was involved in at least one other incident during that same period. However, of those incidents that did include offender details, 78.4 percent involved repeat offenders and 75.6 percent involved repeat victims. Tables 161 and 162 show that the proportion of incidents involving either a recidivist offender or repeat victim was greatest in 2013 and 2012, and smallest in 2014.

Intimate partner violence incidents were significantly more likely to involve recidivist offenders (p<0.001, Phi=-0.20) and repeat victims (p<0.001, Phi=-0.24), than family violence incidents.

Table 161 Proportion of FV, IPV and all incidents involving recidivist offenders, NT (n=87,809)								
	FV		IPV		Uncategorised		All incidents	
Year	n	%	n	%	n	%	n	%
2010	418	61.9	3,176	83.0	262	2.4	3,856	25.4
2011	450	61.5	3,282	83.9	255	2.1	3,987	24.0
2012	440	58.5	3,473	84.8	257	2.2	4,170	25.5
2013	596	61.8	4,116	83.0	351	2.6	5,063	26.3
2014	535	61.4	3,704	81.7	324	2.2	4,563	22.5

Table 162 Proportion of FV, IPV and all incidents involving repeat victims, NT (n=87,809)								
	FV		IPV		Uncategorised		All incidents	
Year	n	%	n	%	n	%	n	%
2010	366	54.2	3,084	80.6	234	2.2	3,684	24.2
2011	369	50.4	3,226	82.5	208	1.7	3,803	22.9
2012	386	51.3	3,417	83.4	238	2.1	4,041	24.7
2013	544	56.4	4,063	81.9	316	2.4	4,923	25.5
2014	504	57.8	3,605	79.5	282	1.9	4,391	21.6

Multivariate correlates of incident characteristics

The following looks at multivariate predictors of domestic violence incident characteristics. A series of multivariate models were conducted to examine key person and incident characteristics that contributed unique variance to predicting:

- alcohol involvement;
- drug involvement;
- child witnesses;
- offender recidivism; and
- repeat victimisation.

Multivariate logistic regression models were conducted for all incidents and separately for FV and IPV incidents. Due to increased sensitivity of the Hosmer and Lemeshow Test of model fit with larger sample sizes, researchers referred to the Omnibus Tests of Model Coefficients to interpret model fit for all models.

Alcohol involvement

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; drug use; repeat offender; and repeat victim—contributed unique variance to the association between whether an incident was flagged as alcohol-related (no vs yes) at all incidents (Table 163), IPV incidents (Table 164) and FV incidents (Table 165).

All incidents

In the fully adjusted model (Step 3), incidents that involved repeat victims or offenders were 1.37 and 1.46 times more likely to be flagged as alcohol-related, while the presence of a child at the incident decreased the likelihood that an incident was alcohol-related by almost half (OR=0.51). Compared with those in the fifth (least disadvantaged) SEIFA quintile, incidents that took place within the second, third and fifth quintiles were significantly more likely to be alcohol-related, while those in the first quintile were significantly less likely to be alcohol-related.

Overall the model accounted for nine to 13 percent of the variance in whether or not an incident was alcohol-related (Cox & Snell R Square=0.09; Negelkerke R Square=0.13) and correctly predicted 85.7 percent of alcohol-related incidents. All three steps accounted for significant variance ($p<0.001$) in predicting alcohol-related incidents.

Intimate partner violence incidents

In the fully adjusted model (Step 3), incidents that involved repeat victims or offenders were 1.22 and 1.39 times more likely to be alcohol-related, while child presence at the incident decreased the likelihood that an incident involved alcohol by almost half (OR=0.54).

Overall, the model accounted for eight to 11 percent of the variance in whether or not an incident was alcohol-related (Cox & Snell R Square=0.08; Negelkerke R Square=0.11) and correctly predicted 94.5 percent of alcohol-related IPV incidents (but 16% of alcohol-unrelated incidents). All three steps accounted for significant variance ($p<0.001$) in predicting alcohol-related incidents.

Family violence incidents

In the fully adjusted model (Step 3), incidents that involved repeat offenders or victims were 1.43 or 1.67 times more likely to be alcohol-related, while child presence at the incident decreased the likelihood that an incident involved alcohol by more than half (OR=0.51).

Overall, the model accounted for nine to 13 percent of the variance in whether or not a family violence incident was alcohol-related (Cox & Snell R Square=0.09; Negelkerke R Square=0.13) and correctly predicted 76.8 percent of alcohol-related FV incidents (but 48.2% of alcohol-unrelated incidents). All three steps accounted for a significant variance in predicting alcohol-related FV incidents ($p<0.001$).

Table 163 Binary logistic regression associated with victim or offender alcohol use at incident, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1	-0.47	95.22	0.62***	0.57–0.69	-0.42	73.85	0.66***	0.59–0.72	-0.42	70.95	0.66***	0.6–0.73
2	0.97	376.80	2.63***	2.39–2.9	0.95	347.28	2.57***	2.33–2.84	0.96	353.58	2.6***	2.35–2.87
3	-0.01	0.03	0.99	0.88–1.11	0.11	3.33	1.12	0.99–1.26	0.11	3.35	1.12	0.99–1.26
4	0.52	130.76	1.68***	1.54–1.84	0.54	133.41	1.71***	1.56–1.87	0.54	135.23	1.72***	1.57–1.88
5[a]												
Child present at incident (yes)					-0.66	397.89	0.52***	0.48–0.55	-0.67	402.23	0.51***	0.48–0.55
Repeat offender (yes)					0.32	62.48	1.38***	1.27–1.49	0.32	61.69	1.37***	1.27–1.49
Repeat victim (yes)					0.38	95.27	1.46***	1.35–1.58	0.38	95.15	1.46***	1.35–1.58
Drugs present at incident (yes)									0.29	15.27	1.34***	1.16–1.55

*** statistically significant at $p<0.001$

a: reference category

Table 164 Binary logistic regression associated with victim or offender alcohol use at intimate partner violence incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1	-0.51	87.05	0.6***	0.54–0.67	-0.49	76.12	0.62***	0.55–0.69	-0.48	73.56	0.62***	0.56–0.69
2	1.01	313.78	2.74***	2.45–3.06	0.97	286.47	2.64***	2.36–2.96	0.98	291.29	2.67***	2.39–2.99
3	-0.01	0.00	1	0.87–1.14	0.07	1.06	1.07	0.94–1.23	0.07	1.02	1.07	0.94–1.23
4	0.56	117.55	1.76***	1.59–1.94	0.56	113.45	1.75***	1.58–1.94	0.56	115.01	1.76***	1.58–1.95
5[a]												
Child present at incident (yes)					-0.61	231.67	0.54***	0.5–0.59	-0.62	234.84	0.54***	0.50–0.59
Repeat offender (yes)					0.20	12.27	1.23***	1.09–1.37	0.20	12.13	1.22***	1.09–1.37
Repeat victim (yes)					0.33	35.08	1.39***	1.25–1.55	0.33	35.04	1.39***	1.25–1.55
Drugs present at incident (yes)									0.28	10.49	1.32***	1.12–1.57

*** statistically significant at $p<0.001$

a: reference category

Table 165 Binary logistic regression associated with victim or offender alcohol use at family violence incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1	-0.33	5.84	0.72*	0.56–0.94	-0.23	2.67	0.8	0.61–1.05	-0.22	2.46	0.81	0.61–1.06
2	0.84	37.34	2.32***	1.77–3.03	0.87	37.53	2.38***	1.81–3.15	0.88	38.40	2.41***	1.83–3.18
3	0.15	0.91	1.16	0.86–1.57	0.35	4.84	1.42*	1.04–1.95	0.36	5.03	1.43*	1.05–1.96
4	0.53	17.29	1.7***	1.32–2.18	0.58	19.56	1.79***	1.38–2.31	0.58	19.74	1.79***	1.39–2.32
5[a]												
Child present at incident (yes)					-0.67	85.01	0.51***	0.45–0.59	-0.67	84.89	0.51***	0.45–0.59
Repeat offender (yes)					0.36	23.22	1.44***	1.24–1.66	0.36	22.57	1.43***	1.23–1.65
Repeat victim (yes)					0.51	48.98	1.67***	1.45–1.93	0.51	48.56	1.67***	1.45–1.93
Drugs present at incident (yes)									0.28	2.59	1.32	0.94–1.86

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Child witness

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim or offender was alcohol affected; whether or not an incident was drug-related, involved a repeat offender, or involved a repeat victim—contributed unique variance to the association between child presence (no vs yes) at all incidents (Table 166), IPV incidents (Table 167) and FV incidents (Table 168).

All incidents

In the fully adjusted model (Step 3), all variables except involvement of a repeat offender were significantly associated with child presence. Similar to trends in prediction of alcohol involvement, incidents that occurred in areas of the third quintile were more likely to be witnessed by children than other areas. If the incident involved a repeat victim, the odds of a child being present decreased by 0.69. Alcohol presence also decreased the likelihood that a child was present at the incident (OR=0.51), while being affected by drugs increased this likelihood (OR=1.50).

The final model accounted for five to eight percent of the variance in child presence at the incident (Cox & Snell R Square=0.05; Negelkerke R Square=0.08), but only correctly predicted 0.3 percent of incidents children witnessed (and 99.9% of incidents that children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), the third quintile of disadvantage was highly associated with child presence at the incident. Involvement of a repeat offender was not significantly associated with the presence of a child unlike repeat victim involvement (OR=0.83). If the incident involved drugs, odds of the incident being witnessed by a child increased (OR=1.59), while alcohol involvement decreased the likelihood (OR=0.54).

The final model accounted for two to four percent of the variance in child presence at the incident (Cox & Snell R Square=0.02; Negelkerke R Square=0.04), but correctly predicted zero percent of incidents witnessed by children (and 100% of incidents children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

FV incidents

In the fully adjusted model (Step 3), all predictors except repeat offender and drug involvement were significantly associated with child presence. Both the involvement of repeat victims (OR=0.81) and the presence of alcohol (OR=0.51) decreased the likelihood of a child being present at the incident. The final model accounted for four to five percent of the variance in child presence at the incident (Cox & Snell R Square=0.04; Negelkerke R Square=0.04) and correctly predicted 7.3 percent of incidents children witnessed (and 97% of incidents children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

Table 166 Binary logistic regression associated with child presence at incident

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.57	79.40	1.77***	1.56–2	0.57	78.58	1.76***	1.56–2	0.51	62.87	1.67***	1.47–1.9
2	0.07	1.02	1.07	0.94–1.21	0.11	2.83	1.12	0.98–1.27	0.26	15.80	1.3***	1.14–1.48
3	0.75	107.10	2.13***	1.84–2.45	0.73	100.28	2.08***	1.8–2.4	0.75	103.75	2.12***	1.84–2.45
4	0.18	8.14	1.19**	1.06–1.34	0.19	9.71	1.21**	1.07–1.37	0.28	20.38	1.32***	1.17–1.49
5[a] (least disadvantage)												
Repeat offender (yes)					-0.03	0.36	0.97	0.89–1.07	0.02	0.17	1.02	0.93–1.12
Repeat victim (yes)					-0.43	92.64	0.65***	0.6–0.71	-0.37	68.58	0.69***	0.63–0.75
Alcohol present at incident (yes)					-1.42	526.97	0.24***	0–0	-0.67	402.67	0.51***	0.48–0.55
Drugs present at incident (yes)									0.40	26.73	1.50***	1.29–1.75

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 167 Binary logistic regression associated with child presence at intimate partner violence incidents

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.49	42.53	1.63***	1.4–1.88	0.49	42.85	1.63***	1.41–1.89	0.43	32.73	1.54***	1.33–1.78
2	-0.08	1.11	0.92	0.8–1.07	-0.06	0.59	0.94	0.81–1.09	0.09	1.35	1.09	0.94–1.27
3	0.66	59.49	1.94***	1.64–2.29	0.66	58.44	1.93***	1.63–2.28	0.67	59.21	1.94***	1.64–2.3
4	0.08	1.26	1.08	0.94–1.25	0.09	1.61	1.1	0.95–1.26	0.18	6.12	1.2*	1.04–1.38
5[a] (least disadvantage)												
Repeat offender (yes)					-0.01	0.02	0.99	0.86–1.14	0.02	0.06	1.02	0.88–1.17
Repeat victim (yes)					-0.23	11.57	0.79***	0.7–0.91	-0.19	7.46	0.83**	0.72–0.95
Alcohol present at incident (yes)					-1.64	478.89	0.19***	0–0	-0.62	235.30	0.54***	0.5–0.58
Drugs present at incident (yes)									0.46	25.09	1.59***	1.32–1.90

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 168 Binary logistic regression associated with child presence at family violence incidents

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.61	16.82	1.84***	1.38–2.46	0.61	16.58	1.83***	1.37–2.46	0.57	14.37	1.77***	1.32–2.38
2	0.26	2.99	1.3	0.97–1.75	0.29	3.68	1.34	0.99–1.8	0.43	7.59	1.53**	1.13–2.07
3	0.81	23.54	2.26***	1.63–3.14	0.80	22.68	2.23***	1.6–3.1	0.86	25.26	2.36***	1.69–3.29
4	0.26	3.24	1.29	0.98–1.71	0.27	3.62	1.31	0.99–1.74	0.37	6.29	1.44*	1.08–1.92
5[a] (least disadvantage)												
Repeat offender (yes)					0.04	0.32	1.04	0.9–1.21	0.10	1.73	1.11	0.95–1.29
Repeat victim (yes)					-0.29	15.50	0.75***	0.65–0.86	-0.21	7.95	0.81**	0.7–0.94
Alcohol present at incident (yes)					-0.93	43.86	0.4***	0–0	-0.67	84.89	0.51***	0.45–0.59
Drugs present at incident (yes)									-0.02	0.01	0.98	0.7–1.39

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Offender recidivism

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim or offender was alcohol-affected; child presence; and repeat victim—contributed unique variance to the involvement of repeat offenders (no vs yes) at all incidents (Table 169), IPV incidents (Table 170) and FV incidents (Table 171).

All incidents

In the fully adjusted model (Step 3), only repeat victim (OR=24.58) and alcohol involvement (OR=1.37) were significantly associated with an increased involvement of a repeat offender.

The final model accounted for 11 to 15 percent of the variance in predicting whether or not the incident involved a repeat offender (Cox & Snell R Square=0.11; Negelkerke R Square=0.15) and correctly predicted 88.1 percent of incidents that involved repeat offenders (and 35.5% of incidents that did not involve repeat offenders). Each step accounted for significant variance in predicting involvement of a repeat offender (ps<0.001).

IPV incidents

In the fully adjusted model (Step 3), only the second quintile of disadvantage (OR=1.36), repeat victim (OR=63.86) and alcohol involvement (OR=1.23) were significantly associated with an increased involvement of a repeat offender.

The final model accounted for 34 to 57 percent of the variance in predicting incidents involving a repeat offender (Cox & Snell R Square=0.34; Negelkerke R Square=0.57) and correctly predicted 80.2 percent of incidents that involved repeat offenders (and 94.1% of incidents that did not involve repeat offenders). Each step accounted for significant variance in involvement of a repeat offender (ps<0.001).

FV incidents

In the fully adjusted model (Step 3), involvement of a repeat victim (OR=4.67), drug involvement (OR=1.57) and alcohol involvement (OR=1.43) were significantly associated with an increased involvement of a repeat offender. Incidents occurring in the third quintile of disadvantage (OR=0.70) significantly decreased the likelihood of involvement of a repeat offender.

The final model accounted for 14 to 19 percent of the variance in predicting whether or not a family violence incident involved a repeat offender (Cox & Snell R Square=0.14; Negelkerke R Square=0.19) and correctly predicted 70.1 percent of incidents involving repeat offenders (and 66.1% of incidents not involving repeat offenders). Each step accounted for significant variance in predicting the involvement of a repeat offender (ps<0.001).

Table 169 Binary logistic regression predicting repeat offender involvement in all incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.05	0.82	0.95	0.85–1.06	-0.02	0.11	0.98	0.85–1.13	0.01	0.02	1.01	0.88–1.17
2	0.45	61.28	1.56***	1.4–1.75	0.19	7.12	1.21**	1.05–1.4	0.14	3.68	1.15	1–1.33
3	-0.22	10.71	0.81***	0.71–0.92	-0.05	0.38	0.95	0.8–1.12	-0.06	0.50	0.94	0.8–1.11
4	0.12	5.50	1.13*	1.02–1.25	0.02	0.09	1.02	0.9–1.16	-0.01	0.04	0.99	0.87–1.13
5[a] (least disadvantage)												
Child present at incident (yes)					-0.03	0.42	0.97	0.89–1.06	0.02	0.14	1.02	0.93–1.12
Repeat victim (yes)									3.20	6,966.11	24.58***	22.8–26.5
Alcohol present at incident (yes)									0.32	62.30	1.37***	1.27–1.49
Drugs present at incident (yes)									0.18	2.86	1.19	0.97–1.47

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 170 Binary logistic regression predicting repeat offender involvement in intimate partner violence incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.04	0.33	1.04	0.91–1.19	0.03	0.08	1.03	0.85–1.25	0.06	0.30	1.06	0.87–1.29
2	0.60	75.95	1.83***	1.6–2.09	0.34	11.68	1.4***	1.16–1.7	0.31	9.46	1.36**	1.12–1.65
3	-0.09	1.29	0.91	0.78–1.07	0.04	0.13	1.04	0.83–1.32	0.04	0.12	1.04	0.82–1.32
4	0.26	16.94	1.3***	1.15–1.47	0.14	2.33	1.15	0.96–1.38	0.12	1.68	1.13	0.94–1.35
5[a] (least disadvantage)												
Child present at incident (yes)					-0.01	0.04	0.99	0.86–1.13	0.01	0.02	1.01	0.88–1.16
Repeat victim (yes)									4.16	5,904.87	63.86***	57.43–71
Alcohol present at incident (yes)									0.21	12.84	1.23***	1.1–1.38
Drugs present at incident (yes)									0.10	0.48	1.11	0.83–1.48

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 171 Binary logistic regression predicting repeat offender involvement in family violence incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.14	1.02	0.87	0.66–1.14	-0.13	0.71	0.88	0.66–1.18	-0.09	0.38	0.91	0.68–1.22
2	0.08	0.29	1.08	0.82–1.42	-0.09	0.38	0.91	0.68–1.23	-0.15	0.92	0.86	0.64–1.17
3	-0.40	6.19	0.67*	0.49–0.92	-0.34	4.03	0.71*	0.51–0.99	-0.36	4.38	0.7*	0.5–0.98
4	-0.10	0.55	0.91	0.7–1.17	-0.19	1.88	0.82	0.63–1.09	-0.24	2.77	0.79	0.6–1.04
5[a] (least disadvantage)												
Child present at incident (yes)					0.04	0.31	1.04	0.9–1.21	0.10	1.80	1.11	0.95–1.29
Repeat victim (yes)									1.54	445.71	4.67***	4.04–5.38
Alcohol present at incident (yes)									0.36	22.75	1.43***	1.23–1.66
Drugs present at incident (yes)									0.45	5.43	1.57*	1.07–2.28

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Repeat victims

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim(s) or offender(s) were affected by alcohol; drug involvement; child presence; and involvement of repeat offenders—contributed unique variance to predicting involvement of repeat victims (no vs yes) at all incidents (Table 172), IPV incidents (Table 173) and FV incidents (Table 174).

All incidents

In the fully adjusted model (Step 3), all predictors except drug involvement and the first quintile of disadvantage were significantly associated with the involvement of a repeat victim. If the incident involved a repeat offender, the odds of the incident involving a repeat victim increased by 24.58 times. If the victim was affected by alcohol the odds of the incident involving a repeat victim increased by 1.46 times, while if a child was present, the odds decreased (OR=0.69).

The final model accounted for 12 to 16 percent of the variance in predicting whether or not the incident involved a repeat victim (Cox & Snell R Square=0.12; Negelkerke R Square=0.16) and correctly predicted 77.3 percent of incidents involving repeat victims (and 58.1% of incidents not involving repeat victims). Each step accounted for significant variance in predicting the involvement of a repeat victim (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), the second quintile of disadvantage (OR=1.35), involvement of a repeat offender (OR=63.85), and alcohol involvement (OR=1.4) increased the likelihood of a repeat victim. Child presence decreased this likelihood (OR=0.83).

The final model accounted for 34 to 56 percent of the variance in predicting incidents involving a repeat victim (Cox & Snell R Square=0.34; Negelkerke R Square=0.56) and correctly predicted 96 percent of incidents that involved repeat victims (and 73.2% of incidents that did not involve repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), the second quintile of disadvantage (OR=1.44), involvement of a repeat offender (OR=4.67), and alcohol involvement (OR=1.67) increased the likelihood of a repeat victim. Child presence decreased this likelihood (OR=0.81).

The final model accounted for 15 to 20 percent of the variance in predicting whether or not an incident involved a repeat victim (Cox & Snell R Square=0.15; Negelkerke R Square=0.20) and correctly predicted 77.9 percent of incidents involving repeat victims (and 58.1% of incidents not involving repeat victims). Each step accounted for significant variance in predicting the involvement of a repeat victim (ps<0.001).

Table 172 Binary logistic regression predicting repeat victim involvement in all incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.05	0.99	0.95	0.85–1.05	0.00	0.00	1	0.87–1.15	0.04	0.34	1.04	0.91–1.19
2	0.51	88.59	1.67***	1.5–1.86	0.41	35.51	1.51***	1.32–1.73	0.34	24.18	1.41***	1.23–1.61
3	-0.28	19.13	0.76***	0.67–0.86	-0.19	5.36	0.83*	0.71–0.97	-0.20	5.75	0.82*	0.7–0.97
4	0.17	11.78	1.19***	1.08–1.31	0.17	7.23	1.19**	1.05–1.35	0.13	4.01	1.14*	1–1.29
5[a] (least disadvantage)												
Child present at incident (yes)					-0.43	93.71	0.65***	0.6–0.71	-0.37	67.96	0.69***	0.63–0.75
Repeat offender (yes)					3.23	7,124.52	25.25***	23.43–27.22	3.20	6,968.18	24.58***	22.8–26.5
Alcohol present at incident (yes)									0.38	96.76	1.46***	1.36–1.58
Drugs present at incident (yes)									-0.02	0.03	0.98	0.81–1.19

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 173 Binary logistic regression predicting repeat victim involvement in intimate partner violence incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.04	0.28	1.04	0.91–1.18	0.03	0.10	1.03	0.85–1.25	0.07	0.55	1.07	0.89–1.3
2	0.59	78.02	1.8***	1.58–2.05	0.36	13.83	1.43***	1.18–1.72	0.30	9.55	1.35**	1.12–1.63
3	-0.15	3.51	0.86	0.74–1.01	-0.15	1.71	0.86	0.69–1.08	-0.15	1.74	0.86	0.69–1.08
4	0.26	17.79	1.29***	1.15–1.46	0.16	3.34	1.18	0.99–1.4	0.13	1.96	1.13	0.95–1.35
5[a] (least disadvantage)												
Child present at incident (yes)					-0.23	11.68	0.79***	0.7–0.91	-0.19	7.45	0.83**	0.73–0.95
Repeat offender (yes)					4.17	5,965.40	64.82***	58.31–72.06	4.16	5,905.01	63.85***	57.43–70.99
Alcohol present at incident (yes)									0.33	36.27	1.4***	1.25–1.56
Drugs present at incident (yes)									-0.02	0.02	0.98	0.75–1.29

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 174 Binary logistic regression predicting repeat victim involvement in family violence incidents, NT

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.10	0.51	0.91	0.7–1.18	-0.01	0.01	0.99	0.74–1.31	0.02	0.02	1.02	0.77–1.35
2	0.41	9.04	1.5**	1.15–1.96	0.46	9.85	1.58**	1.19–2.11	0.36	6.02	1.44*	1.08–1.92
3	-0.28	3.24	0.76	0.56–1.03	-0.10	0.38	0.9	0.65–1.25	-0.14	0.71	0.87	0.62–1.21
4	0.18	2.03	1.2	0.93–1.54	0.27	3.79	1.31	1–1.71	0.20	2.00	1.22	0.93–1.59
5[a] (least disadvantage)												
Child present at incident (yes)					-0.29	15.52	0.75***	0.64–0.86	-0.21	7.90	0.81**	0.7–0.94
Repeat offender (yes)					1.59	480.49	4.88***	4.24–5.63	1.54	445.76	4.67***	4.04–5.38
Alcohol present at incident (yes)									0.51	48.67	1.67***	1.45–1.93
Drugs present at incident (yes)									0.17	0.92	1.19	0.84–1.68

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Northern Territory summary

Northern Territory police attended 87,806 family and domestic violence incidents across the reporting period (2010–14), including 21,331 IPV, 3,995 FV, and 62,480 uncategorised incidents. The rate increased per 10,000 of FDV incidents across that period from 659.8 per 10,000 in 2010 to 833.7 in 2014 although this increase was not linear. Most offenders were male (82.3%) and most victims were female (68.3%). Both offenders and victims were concentrated within the 18 to 49 year age bracket.

More than half (53.6%) of the FDV incidents were flagged as alcohol-related. Intimate partner violence incidents were significantly more likely to be flagged as alcohol-related than FV incidents (67.2% vs 55.2%, p<0.001, Phi=-0.09). The proportion of alcohol-related incidents gradually decreased across the reporting period from 57.0 percent of all incidents in 2010 to 51.6 percent in 2014. Key alcohol-related findings include:

- In 13.3 percent of all incidents offenders were affected by alcohol (IPV: 37.3%; FV: 31.4%), and victims in 0.7 percent of incidents (IPV: 1.3%; FV: 2.2%). Incident participants other than the offender and the victim were judged to be affected by alcohol in 39.5 percent of all incidents (IPV: 28.6%; FV: 21.6%).
- Alcohol-related incidents were most likely to occur on a Friday (IPV: 72.6% alcohol-related: FV: 60.7% alcohol-related) and Saturday (IPV: 74.0% alcohol-related; FV: 63.6% alcohol-related) and least likely on a Sunday (IPV: 57.2% alcohol-related; FV: 45.1% alcohol-related) and Monday (IPV: 57.5% alcohol-related; FV: 40.9% alcohol-related). Alcohol-related incidents most often occurred between 12 am and 3 am (72.3% alcohol-related) and 3 and 6 am (71.9% alcohol-related), and least often between 9 am and 12 pm (21.6% alcohol-related).

Findings from the multivariate models include:

- Controlling for socioeconomic disadvantage, child presence, and drug presence, incidents involving repeat victims (IPV: OR=1.39, 95%CI=1.25–1.55; FV: OR=1.67, 95%CI=1.45–1.93) or recidivist offenders (IPV: 1.22, 95%CI=1.09–1.37; FV: OR=1.43, 95%CI=1.23–1.65) were associated with increased likelihood that the incident was alcohol-related.
- Controlling for socioeconomic disadvantage, drug presence, repeat victim, and offender recidivism, incidents where a child was present were significantly less likely to involve alcohol (IPV: OR=0.54, 95%CI=0.50–0.59; FV: OR=0.51, 95%CI=0.45–0.59).
- Controlling for socioeconomic disadvantage, repeat victim, offender recidivism, and child presence, IPV incidents (but not FV incident) involving drugs were 1.32 times more likely to involve alcohol (OR=1.32, 95%CI=1.12–1.57).

There were few drug-related incidents (1.8%). The proportion of drug-related incidents increased from 1.6 percent in 2010 to 1.8 percent in 2014, but peaked in 2011 (2.0% drug-related) and 2012 (2.0% drug-related). No significant difference was evident in the proportion of drug-related IPV compared with FV incidents (p >0.05). Key drug-related findings include:

- Controlling for socioeconomic disadvantage, child presence, and alcohol presence, FV incidents (but not IPV incidents) that were drug-related were 1.57 times more likely to involve a recidivist offender (OR=1.57, 95%CI=1.07–2.28). Conversely, drug presence was not significantly associated with whether a repeat victim was involved in the incident.
- Controlling for socioeconomic disadvantage, child presence, recidivist offender, repeat victim, and alcohol presence, IPV incidents (but not FV incidents) that involved drugs were 1.59 times more likely to be witnessed by a child (OR=1.59, 95%CI=1.32–1.90).

Queensland police data results

The following sets out trends for family and domestic violence incidents attended by Queensland police between 1 January 2010 and 11 December 2015. They are shown separately for individuals and incidents. These findings relate to domestic violence incidents involving intimate partners and other family members. They compare data related to intimate partner violence and family violence.

Individuals

Demographic and alcohol intoxication levels are presented for offenders and victims.

Offenders

During the study, Queensland police recorded 345,075 episodes of offending at DV incidents they attended, including 155,381 unique offenders. A total of 63,627 (40.9%) recidivist offenders were involved in multiple incidents across the reporting period. Most incidents (96.0%) involved one offender, while up to seven offenders were recorded per incident (see Table 175). Family violence incidents were significantly more likely to involve multiple offenders compared with IPV incidents ($p<0.001$, Phi=0.01).

Table 175 Number of offenders recorded at FV, IPV and all incidents, Qld (n=329.013)[a]

	FV		IPV		All incidents	
	n	%	n	%	n	%
1	45,837	95.6	45,837	95.6	315,784	96.0
2	1,969	4.1	1,969	4.1	13,027	4.0
3+	122	0.2	122	0.2	202	0.1

a: offender data was unavailable for 1,688 incidents

Most offenders were male (76.9%) across all age groups (see Table 176). The greatest proportion of offenders was aged between 35 and 49 years (35.7%), with more than 90 percent of offenders aged between 18 and 24 years.

Table 176 Proportion of female, male and all offenders by age group, Qld (n=344,749)

	Female[a]		Male[a]		All offenders[b]	
Age (years)	n	%	n	%	n	%
12–17	1,487	34.2	2,856	65.8	4,344	1.3
18–24	18,572	26.1	52,534	73.9	71,128	20.6
25–34	25,301	22.0	89,839	78.0	115,183	33.4
35–49	27,247	22.1	95,802	77.9	123,099	35.7
50–59	5,407	23.6	17,492	76.4	22,907	6.6
60–69	1,277	20.3	5,015	79.7	6,292	1.8
70–84	295	17.5	1,389	82.5	1,684	0.5
85+	17	15.2	95	84.8	112	0.0

a: excludes 14 respondents and 16 partners whose gender was described as other (ie not male or female). The sex of 138 offenders was either unknown or not recorded

b: the n and % refer to the total number of offenders within this age group

A significantly higher proportion of IPV offenders (78.8%) were male compared with FV offenders (69.4%, p<0.001, Phi=0.08). Table 177 shows that across each age group, males comprised most offenders for both FV and IPV incidents. Males also made up a significantly higher proportion of IPV offenders compared with FV offenders in all age groups, except the 12 to 17 year, and 85 year and over age groups (p>0.05).

Table 177 Proportion of DV and IPV offenders that are male, Qld (n=301,682)

	FV		IPV	
Age (years)	n	%	n	%
12–17	344	67.2	1951	64.9
18–24	12,436	73.1	33,207	74.3
25–34	10,260	73.3	69,656	79.1
35–49	8,385	64.5	76,347	80.1
50–59	2,434	60.3	12,566	81.2
60–69	839	61.0	3,353	87.7
70–84	239	66.2	869	89.0
85+	23	74.2	52	89.7

Table 178 presents the proportion of offenders in eight age groups separately for those involved in FV and IPV incidents. The greatest proportion of FV offenders were aged between 18 and 25 years and the greatest proportion of IPV offenders were aged from 35 to 49 years.

Table 178 Proportion of FV and IPV offenders in eight age groups, Qld (n=301,790)

	FV		IPV	
Age (years)	n	%	n	%
12–17	513	1.0	3007	1.2
18–24	17,017	33.8	44,707	17.8
25–34	14,000	27.8	88,085	35.0
35–49	13,014	25.8	95,296	37.9
50–59	4,038	8.0	15,486	6.2
60–69	1,376	2.7	3,825	1.5
70–84	361	0.7	976	0.4
85+	31	0.1	58	0.0

Note: type of violence was not categorised for 138 offenders

Victims

A total of 346,592 episodes of victimisation were recorded across all DV incidents in Queensland during the reporting period, including 51,072 victims of FV and 303,085 victims of IPV (the incident type—IPV or FV—was unknown or not recorded for 43,507 victims). The number of episodes includes 164,240 unique victims and 64,854 repeat victims involved in multiple incidents across the reporting period. Most incidents involved one victim (95.7%). Multiple victims were more likely to be recorded as being present at FV than IPV incidents (p<0.001, Phi=0.03)—see Table 179.

Table 179 Number of victims recorded at FV, IPV and all incidents, Qld (n=329,573)						
	FV		IPV		All incidents	
	n	%	n	%	n	%
1	45,437	94.6	23,1351	96.1	315,527	95.7
2	2,418	5.0	9,317	3.9	13,759	4.2
3+	158	0.3	40	0.0	287	0.1

Note: victim data not available for 1,128 incidents

Table 180 presents the proportion of female and male victims across age groups, while Table 181 shows the proportion of FV and IPV victims across age groups. Most victims were female (76.2%). Almost equal proportions of male and females were represented in the zero to four, and five to 11 year age groups, but females comprised most of all other age groups.

Table 180 Proportion of female, male and all victims in 10 age groups, Qld (n=346,426)						
	Female[a]		Male[a]		All victims[b]	
	n	%	n	%	n	%
0–4	37	50.7	36	49.3	74	0.0
5–11	47	56.6	36	43.4	83	0.0
12–17	6,436	90.0	712	10.0	7,149	2.1
18–24	58,912	81.9	13,016	18.1	71,953	20.8
25–34	84,769	78.5	23,200	21.5	108,044	31.2
35–49	87,136	74.1	30,483	25.9	117,672	34.0
50–59	18,405	66.5	9,283	33.5	27,700	8.0
60–69	6,069	61.1	3,864	38.9	9,934	2.9
70–84	2,113	60.7	1,369	39.3	3,482	1.0
85+	202	60.3	133	39.7	335	0.1

a: the sex of 184 victims was either unknown or not recorded.

b: refers to the proportion of all victims within this age group

Table 181 Proportion of FV and IPV victims by age group, Qld (302,971)				
	FV		IPV	
Age (years)	n	%	n	%
0–4	30	0.1	23	0.0
5–11	36	0.1	25	0.0
12–17	588	1.2	5,307	2.1
18–24	9,323	18.3	53,374	21.2
25–34	8,097	15.9	87,868	34.9
35–49	15,536	30.4	87,933	34.9
50–59	10,179	19.9	13,347	5.3
60–69	4,953	9.7	3,218	1.3
70–84	2,087	4.1	776	0.3
85+	214	0.4	57	0.0

Note: incident type was not recorded for 184 victims

More than two-thirds of IPV victims were aged between 25 and 49 years, while most FV victims were aged between 18 and 59 years.

Figures 58 and 59 show the proportion of female and male FV and IPV victims according to age group. Males comprised the greater proportion of FV victims under 11 years, but females made up most FV victims in all other age groups. For IPV, males comprised most victims aged 85 and over, but females comprised most IPV victims in all other age groups.

Figure 58 Proportion of female and male FV victims in 10 age groups, Qld (n=51,030)

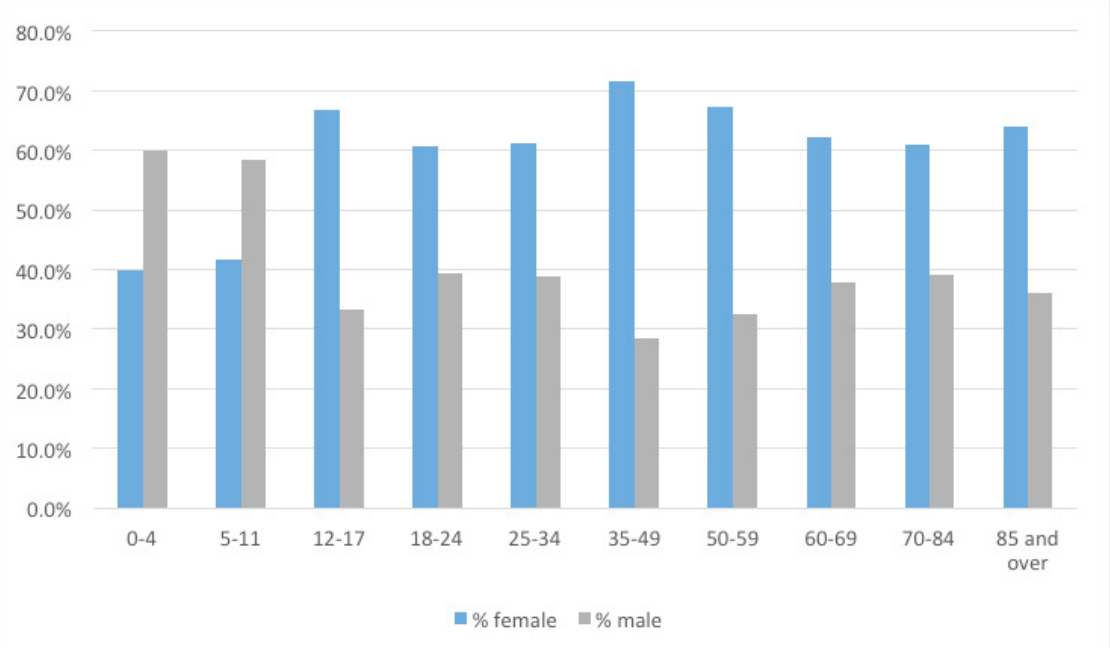
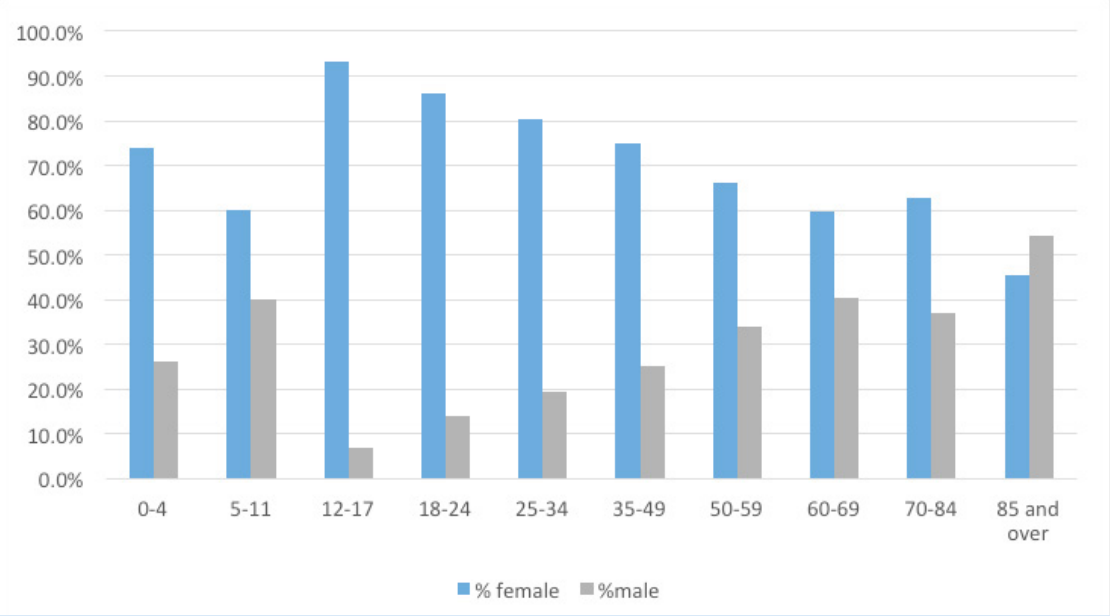


Figure 59 Proportion of female and male IPV victims in 10 age groups, Qld (n=251,793)



Incidents

Queensland police attended 330,701 DV incidents across the reporting period, including 241,086 IPV and 48,077 FV incidents. Of these, 41,538 incidents were flagged as DV, but the relationship between the victim and the perpetrator was not recorded or unknown. Table 182 shows that the proportion of incidents that were FV increased slightly across the six-year period. The rate of DV incidents per 10,000 people gradually increased over the reporting period. At all years, there was a greater proportion of IPV than FV incidents (p=<0.05-<0.001, Phi=-0.01–0.02).

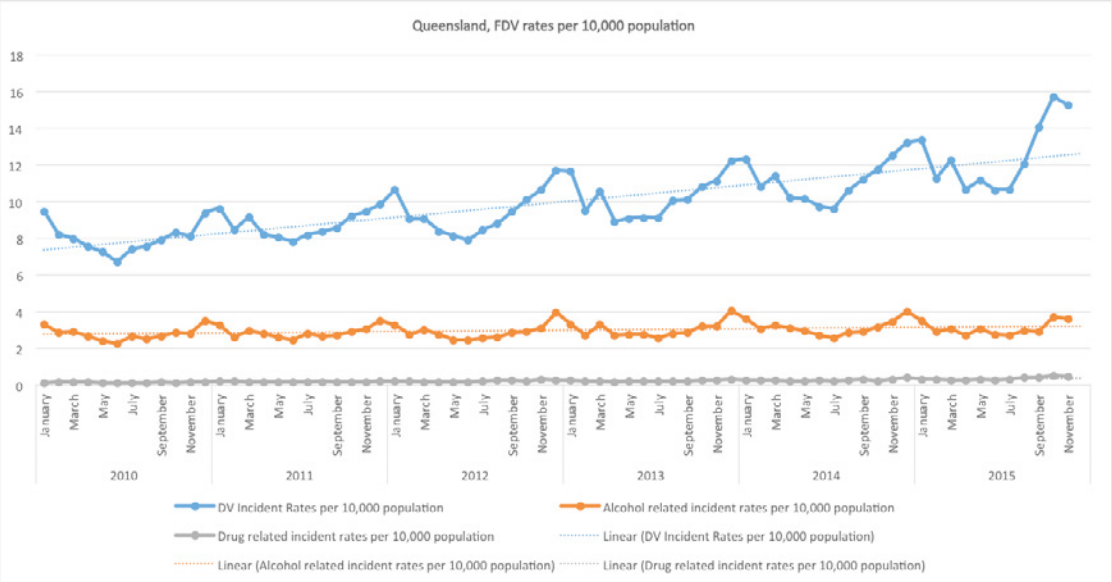
Table 182 Proportion of FV, IPV and all incidents per year, Qld (n=330,701)[a]

	FV		IPV		All incidents	
	n	%	n	%	n	%
2010	5,602	14.9	31,975	85.1	42,640	96.1
2011	6,459	15.5	35,131	84.5	47,523	105.2
2012	7,193	15.9	38,103	84.1	51,902	112.6
2013	8,611	17.0	42,093	83.0	57,411	122.5
2014	10,262	17.8	47,343	82.2	63,564	133.8
2015	9,950	17.6	46,441	82.4	67,661	141.9

a: the rate per thousand includes incidents where the incident type (IPV or FV) was unknown, n=41,538

Figure 60 shows that the rates of all FDV incidents per 10,000 people have increased between 2010 and 2015. Trends are also presented for alcohol- and drug-related incidents.

Figure 60 Alcohol, drug, and all incident rates per 10,000 population over reporting period, Qld



Socioeconomic disadvantage

Incident locations were classified into one of five levels of socioeconomic disadvantage according to the ABS Socio-Economic Indexes for Areas (SEIFA)—see Table 183.

Table 183 Proportion of FV, IPV and all incident locations according to socioeconomic disadvantage, Qld (n=325,092)

	FV		IPV		All incidents[a]	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	10,177	21.6	48,601	20.4	68,202	21.0
2	10,182	21.6	52,297	22.0	70,062	21.6
3	9,956	21.1	49,833	21.0	65,595	20.2
4	11,674	24.7	58,775	24.7	79,970	24.6
5 (least disadvantaged)	5,213	11.0	28,202	11.9	41,263	12.7

a: postcodes were either unavailable or invalid for 5,609 (1.7%) incidents, reducing the analytic sample to 325,092

The smallest proportion of incidents (12.7%) took place in the least disadvantaged areas of Queensland, but almost a quarter (24.6%) of incidents took place in the second-least disadvantaged areas of Queensland. A similar proportion of IPV and FV incidents took place in each area of socioeconomic disadvantage.

Alcohol-related incidents

Table 184 shows that 35.4 percent of DV incidents were flagged as alcohol-related. Victim and offender alcohol intoxication was not available for 25,763 (7.8%) of incidents and were excluded from analyses relating to alcohol intoxication. Incidents were flagged as alcohol-related if police officers identified either the victim or the offender as alcohol-affected. Victim or offender alcohol intoxication marked as 'unknown' or 'not affected' were coded as 'no' for alcohol affected. The proportion of incidents that were alcohol-related gradually decreased across the reporting period from 41.0 percent in 2010 to 30.3 percent in 2015. This difference was statistically significant ($p<0.001$, Phi=-0.11). Overall, a significantly greater proportion of IPV (35.6%) than FV incidents (34.8%) were alcohol-related ($p<0.001$); however, the size of the effect was very small (Phi=0.006).

Table 184 Proportion of alcohol-related FV, IPV and all incidents per year, Qld (n=304,937)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	2,110	40.2	12,618	41.4	16,054	41.0
2011	2,233	36.5	13,152	39.2	17,010	38.7
2012	2,258	33.5	13,512	37.2	17,546	36.7
2013	2,877	35.3	14,211	35.3	18,855	35.4
2014	3,309	34.4	15,010	33.2	19,865	33.5
2015	2,940	31.5	13,148	30.0	18,678	30.3

As shown in Figure 61, IPV incidents were more likely to be alcohol-related, across all levels of socioeconomic disadvantage ($p<0.01$) except the area of the most disadvantage, where FV incidents were more likely to involve alcohol ($p<0.001$). However, effect sizes were very small (Phi's<0.02).

Figure 61 Proportion of alcohol-related FV and IPV incidents according to area level of socioeconomic disadvantage, Qld (n=271,192)

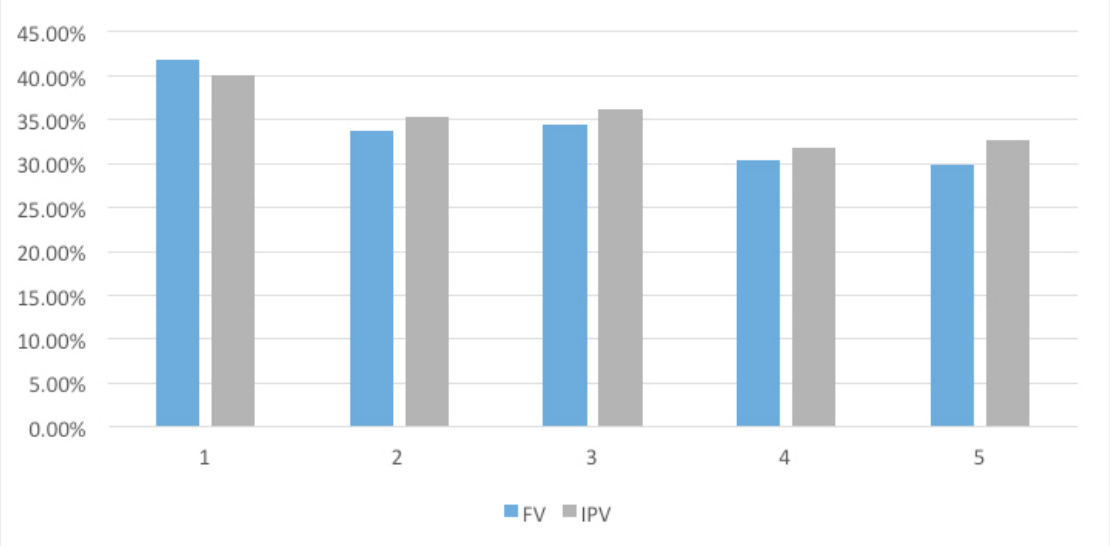


Table 185 shows that victim(s) were affected by alcohol in 19.6 percent of incidents, and offenders in 32.3 percent of all incidents. Both victim and offender were affected by alcohol in 16.4 percent of incidents. A significantly greater proportion of IPV incidents involved victim (p<0.001, Phi=-0.02), offender (p<0.001, Phi=-0.01), or both victim and offender (p<0.001, Phi=-0.03) being affected by alcohol compared with FV incidents. Effect sizes were very small.

Table 185 Proportion of FV, IPV and all incidents where victim and/or offender were affected by alcohol, Qld (n=330,701)

	FV		IPV		All incidents	
Person/s affected by alcohol	n	%	n	%	n	%
Victim	7,861	17.5	45,750	20.1	59,300	19.6
Offender	14,272	31.6	74,482	32.5	98,506	32.3
Victim and offender	6,406	14.2	38,581	16.9	49,798	16.4

Drug-related incidents

Three percent (n=9,230) of DV incidents were flagged as drug-related. Victim and offender drug intoxication information was not available for 25,763 (7.8%) of incidents and was excluded from analyses relating to drug intoxication. Incidents were flagged as drug-related if either the victim or the offender was identified by police officers as drug-affected, including by a 'volatile substance'. Victim or offender drug intoxication marked as 'unknown' or 'not affected' were coded as 'no' for alcohol-affected. As Table 186 shows, the proportion of drug-related incidents increased significantly from 2010 to 2015 (p<0.001, Phi=0.03). This increase was especially apparent for family violence, which increased 2.1 percent over the six-year period (p<0.001, Phi=0.04). Overall, a significantly higher proportion of FV incidents (4.6%) were drug-related than IPV incidents (2.7%) (p<0.001, Phi=0.04).

Table 186 Proportion of drug-related FV, IPV and all incidents per year, Qld (n=304,937)						
	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	211	4.0	667	2.2	953	2.4
2011	235	3.8	835	2.5	1,168	2.7
2012	279	4.1	1,021	2.8	1,429	3.0
2013	390	4.8	1,078	2.7	1,608	3.0
2014	415	4.3	1,309	2.9	1,858	3.1
2015	566	6.1	1,307	3.0	2,214	3.6

Table 187 shows that victim(s) were affected by drugs in 0.7 percent of incidents and offenders in 2.4 percent of all incidents. Both victim and offender were affected by alcohol in 0.4 percent of incidents. A significantly greater proportion of IPV incidents involved either victim ($p<0.001$, Phi=-0.01) or both victim and offender ($p<0.001$, Phi=-0.01) being affected by drugs, compared with FV incidents, and a significantly greater proportion of FV incidents involved the offender affected by drugs compared with IPV incidents ($p<0.001$, Phi=0.05). Effect sizes for these comparisons were very small.

Table 187 Proportion of FV, IPV and all incidents where victim and/or offender were affected by drugs, Qld (n=330,701)						
	FV		IPV		All incidents	
Person/s affected by drugs	n	%	n	%	n	%
Victim	202	0.5	1,835	0.8	2,253	0.7
Offender	1,975	4.4	5,306	2.3	8,100	2.4
Victim and offender	81	0.2	924	0.4	1,123	0.4

Table 188 shows the proportion of drug-related FV and IPV incidents that took place in areas of most to least socioeconomic disadvantage.

Table 188 Proportion of drug-related FV, IPV and all incidents according to area socioeconomic disadvantage level, Qld (n=300,682)						
	FV		IPV		All incidents	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	401	4.2	1,189	2.6	1,807	2.9
2	430	4.4	1,359	2.7	1,959	3.0
3	426	4.5	1,255	2.6	1,830	2.9
4	537	4.9	1,585	2.8	2,319	3.1
5 (least disadvantaged)	276	5.9	782	3.0	1,229	3.5

The proportion of drug-related incidents was highest in the area of least disadvantage, especially for family violence where there was a 1.7 percent difference in the proportion of drug-related incidents between the most and least disadvantaged areas ($p<0.001$, Phi=0.04). A significantly higher proportion of FV incidents were drug-related across all levels of disadvantage than IPV ($p<0.001$, Phi=0.04–0.06).

Child victim

A child victim was defined as a person under the age of 18 years at the time of the incident. A child was a victim in 2.2 percent of domestic violence incidents, including 2.2 percent of IPV incidents, 1.2 percent of FV incidents, and 3.0 percent of incidents where the relationship between the victim and the perpetrator was unknown or not recorded. For intimate partner violence the relationship between the child victim and the offender was an intimate partnership (eg boyfriend/girlfriend, spouse, ex, etc). Table 189 shows that the proportion of incidents involving a child victim decreased over the reporting period but only by 0.3 percent from 2010 to 2015. Victim age was not available, or invalid for 162 incidents.

Table 189 Proportion of child-witnessed FV, IPV and all incidents per year, Qld (n=329,411)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	91	1.6	710	2.2	982	2.3
2011	85	1.3	806	2.3	1,101	2.3
2012	96	1.3	955	2.5	1,255	2.4
2013	94	1.1	883	2.1	1,168	2.0
2014	106	1.0	995	2.1	1,263	2.0
2015	123	1.2	906	2.0	1,318	2.0

Table 190 shows that intimate partner violence (p<0.001, Phi=-0.04) and family violence (P<0.01, Phi=-0.01) incidents that involved child victims were significantly less likely to involve alcohol than those incidents that did not involve child victims. Family violence, but not IPV, incidents, were also significantly less likely to involve drugs if the incident was witnessed by a child compared with when an incident was not witnessed by a child (p<0.01. The size of this effect was very small (Phi=0.01).

Table 190 Proportion of incidents with child victims that were alcohol-related and drug- related, Qld (n=303,864)

	Alcohol-related incidents				Drug-related incidents			
	No child victim		Child victim		No child victim		Child victim	
	n	%	n	%	n	%	n	%
FV	15,545	34.9	155	28.4	2,081	4.7	12	2.2
IPV	80,413	35.9	1,085	21.6	6,060	2.7	143	2.8
All incidents	106,192	35.7	1,486	22.9	9,020	3.0	180	2.8

Table 191 presents the proportion of incidents involving child victims that took place across areas of relative disadvantage.

Table 191 Proportion of FV, IPV and all incidents involving child victims according to area level of socioeconomic disadvantage, Qld (n=57,227)

	FV		IPV		All incidents	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	147	1.4	1,443	3.0	1,969	2.9
2	130	1.3	1,089	2.1	1,483	2.1
3	105	1.1	1,165	2.3	1,468	2.2
4	143	1.2	1,059	1.8	1,392	1.7
5 (least disadvantaged)	59	1.1	408	1.4	627	1.5

The proportion of IPV incidents that involved a child victim generally increased with more disadvantage and was highest in the area of most disadvantage and lowest in the area of least disadvantage (p<0.001, Phi=-0.05). Conversely, the proportion of FV incidents involving a child victim was similar across each level of disadvantage (p>0.05).

Contravention of Queensland's Domestic and Family Violence Prevention Act (DFVPA)

Almost one in three (31.2%) of DV incidents involved a contravention of the state's *Domestic and Family Violence Prevention Act 2012*. A higher proportion of IPV incidents (36.6%) involved a contravention of the Act than FV incidents (19.2%, p<0.001, Phi=-0.14). Table 192 shows the proportion of incidents involving a contravention of the Act increased over the reporting period.

Table 192 Proportion of FV, IPV and all incidents per year by contravention the DFVPA Qld (n=330,701)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	917	16.4	10,598	33.1	12,144	28.5
2011	1,034	16.0	12,256	34.9	14,059	29.6
2012	1,258	17.5	13,732	36.0	16,038	30.9
2013	1,624	18.9	15,320	36.4	17,892	31.2
2014	2,115	20.6	17,433	36.8	20,339	32.0
2015	2,293	23.0	18,984	40.9	22,843	33.8

Table 193 shows that a smaller proportion of IPV (p<0.001, Phi=-0.01) and FV (p<0.001; Phi=-0.03) incidents involving a contravention of the Act were alcohol-related compared with incidents not involving breaches. Similarly, a lower proportion of IPV incidents that involved a breach were drug-related compared with IPV incidents that did not involve a contravention (p<0.001, Phi=-0.01). Conversely, a higher proportion of FV incidents involving a contravention were drug-related compared with FV incidents that did not involve a contravention of the Act (p<0.01, Phi=0.01)—see Table 194). However, all effect sizes for these comparisons were very small.

Table 193 Proportion of FV and IPV incidents involving a contravention of the DFVPA that were alcohol-related, Qld (n=304,937)

	No DFVPO breach		DFVPO breach	
Age (years)	n	%	n	%
FV	12,770	35.5	2,957	32.0
IPV	50,978	36.1	30,673	34.8
All incidents	72,703	32.0	35,305	34.2

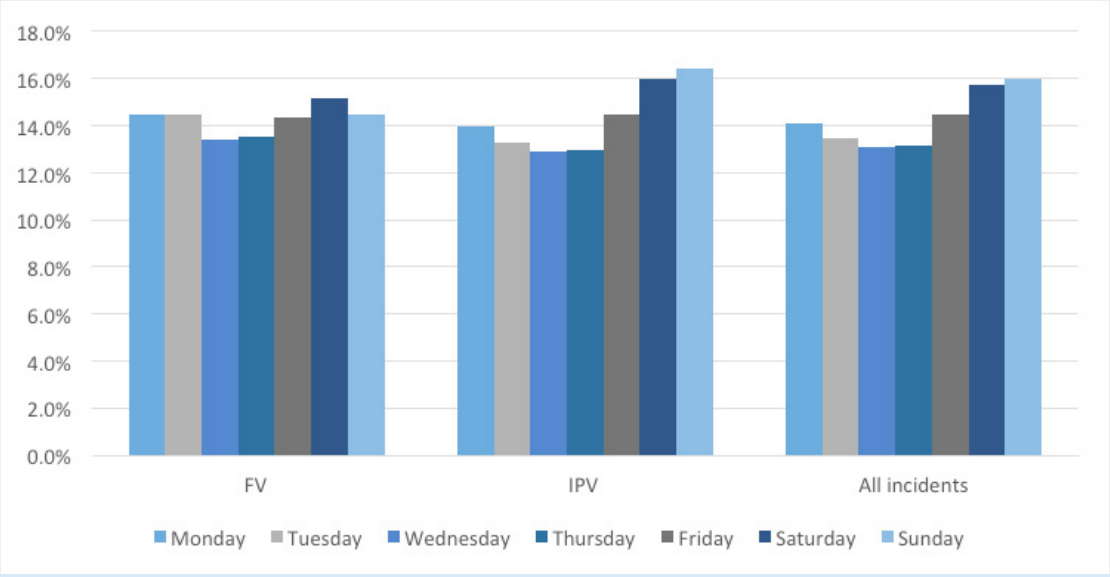
Table 194 Proportion of FV and IPV incidents involving a contravention of the DFVPA that were drug-related, Qld (n=304,937)

	No DFVPO breach		DFVPO breach	
Age (years)	n	%	n	%
FV	1,611	4.5	485	5.3
IPV	4,010	2.8	2,207	2.5
All incidents	6,383	5.3	2,847	2.8

Day and time of incident

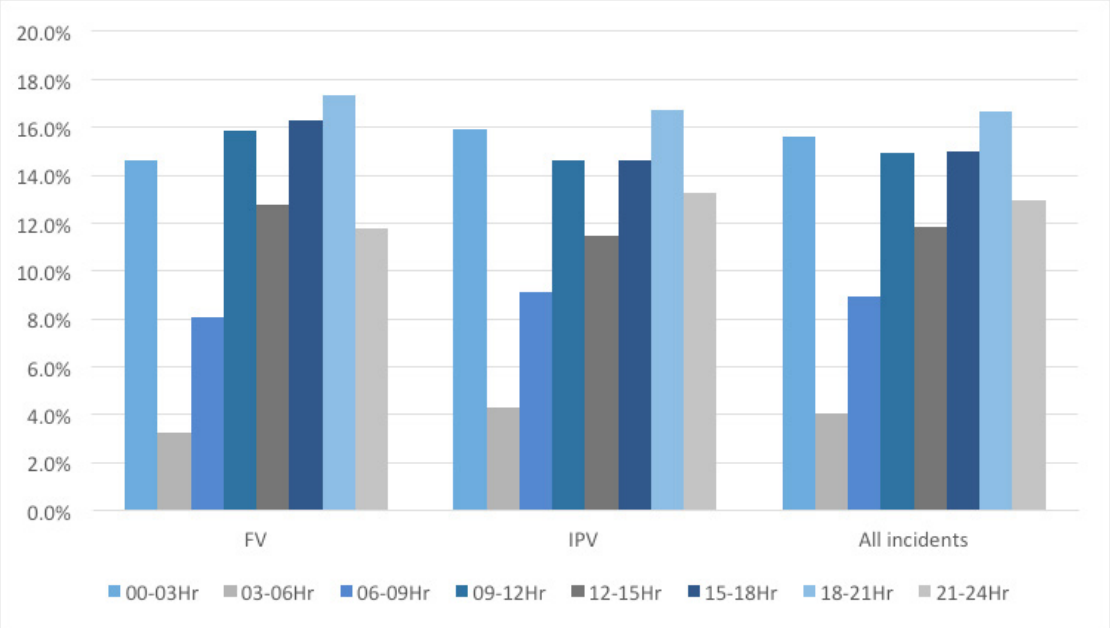
Figures 62 and 63 show respectively the day and time at which DV incidents occurred.

Figure 62 Proportion of FV, IPV and all incidents that took place on each day of the week, Qld (n=330,701)



Domestic violence incidents were more likely to take place on a Saturday (15.7%) and Sunday (16.0%) than on weekdays (13.1%–14.4%). This trend was consistent for both IPV and FV incidents. While significantly greater proportions of FV incidents took place between Monday and Thursday, and significantly greater proportions of IPV incidents took place on Saturday and Sunday, the effect size of each comparison was small (Phi=0.01–0.02).

Figure 63 Proportion of FV, IPV and all incidents that took place during each three-hour interval, Qld (n=330,701)



The proportion of incidents that took place during each three-hour interval generally increased over the daytime hours from 9 am to 9 pm, decreased between 9 pm and 12 am, increased from 12 am to 3 am, and was lowest between 3 and 9 am. This trend was consistent for IPV and FV incidents.

Compared with family violence, IPV incidents were significantly more likely to take place late in the evening and early morning between 9 pm and 9 am; while family violence incidents were significantly more likely to occur during the day from 9 am to 9 pm. However, all effects sizes were very small (Phi=0.01–0.02).

These trends remained similar when day of the week and time of day were considered together, although a higher proportion of IPV and FV incidents that occurred on Saturday and Sunday took place between 12 am and 6 am than incidents that occurred from Monday to Friday. For family violence, the proportion of incidents that took place from 12 am to 6 am increased from 16.4 to 17.5 percent between Monday and Friday to 20.6 to 20.8 percent during Saturday and Sunday. For IPV, the proportion of incidents that took place from 12 am to 6 am increased from 17.6 to19.3 percent between Monday and Friday to 23.7 percent during Saturday and Sunday.

Alcohol-related incidents

Alcohol-related incidents were least likely on Monday, and most likely on a Saturday (see Table 195). Alcohol-related incidents most often occurred between 3 to 6 am and 9 pm to 12 am, and least often from 9 am to 12 pm (see Table 196). A similar proportion of alcohol-related IPV compared with FV incidents occurred across each day of the week apart from on Mondays, where IPV incidents (24.7%) were significantly more likely to be alcohol-related than FV incidents (23.3%, $p<0.05$). The size of this effect was very small (Phi=-0.01). Incidents of intimate partner violence were significantly more likely to be alcohol-related from 12 am to 3 am ($p<0.001$, Phi=-0.03), while family violence incidents were significantly more likely to be alcohol-related from 3 to 6 am ($p<0.001$, Phi=0.04), 6 to 9 am ($p<0.01$, Phi=0.02) and 9 to 12 pm ($p<0.001$, Phi=0.03).

Table 195 Proportion of alcohol-related FV, IPV and all incidents that took place on each day of the week, Qld (n=304,937)

	FV		IPV		All incidents	
Day	n	%	n	%	n	%
Monday	1,530	23.3	7,884	24.7	10,456	24.5
Tuesday	1,734	26.6	8,102	26.8	10,870	26.7
Wednesday	1,882	31.2	9,134	31.1	12,209	31.1
Thursday	2,066	34.0	9,896	33.6	13,228	33.5
Friday	2,446	37.9	12,714	38.3	16,744	38.0
Saturday	3,360	48.4	17,905	48.2	23,682	48.3
Sunday	2,709	40.8	16,016	41.9	20,819	41.8

Table 196 Proportion of alcohol-related FV, IPV and all incidents that took place during three-hour intervals, Qld (n=304,937)

	FV		IPV		All incidents	
Hours	n	%	n	%	n	%
00–03	2,326	35.5	14,239	39.6	18,398	39.4
03–06	1,017	68.3	6,360	63.1	8,174	63.8
06–09	701	19.3	3,632	17.3	4,793	17.5
09–12	730	10.3	3,457	10.5	4,650	10.4
12–15	1,048	18.3	4,554	17.5	6,209	17.6
15–18	2,378	32.3	10,873	32.4	14,619	32.2
18–21	3,919	49.4	19,065	48.8	25,518	48.8
21–24	3,608	66.7	19,471	62.9	25,647	63.4

Generally, across all days of the week alcohol-related incidents were least likely to take place between 6 am and 12 pm, and most likely to take place in the evening/early morning between 6 pm and 6 am. Alcohol-related IPV and FV incidents occurring between Monday and Friday were most likely to occur from 9 pm to 12 am, while alcohol-related IPV and FV incidents occurring on Saturday and Sunday were most likely to take place from 3 to 6 am, with 75 to 80 percent of incidents occurring during this timeframe flagged as alcohol-related.

Drug-related incidents

Drug-related incidents were least likely to occur on Mondays and Wednesdays, and most likely to take place on Saturdays and Sundays (Table 197). Drug-related incidents were least likely to take place between 12 am and 3 am, and from 9 am to 12 pm. They were most likely to take place between 3 and 6 am, and from 6 pm to 12 pm (Table 198).

Table 197 Proportion of drug-related FV, IPV and all incidents that took place on each day of the week, Qld (n=304,937)

	FV		IPV		All incidents	
Day	n	%	n	%	n	%
Monday	275	4.2	807	2.5	1,195	2.8
Tuesday	301	4.6	764	2.5	1,178	2.9
Wednesday	260	4.3	723	2.5	1,101	2.8
Thursday	285	4.7	760	2.6	1,155	2.9
Friday	283	4.4	887	2.7	1,301	3.0
Saturday	372	5.4	1,134	3.0	1,668	3.4
Sunday	320	4.8	1,142	3.0	1,632	3.3

Table 198 Proportion of drug-related FV, IPV and all incidents that took place during three-hour intervals, Qld (n=304,937)

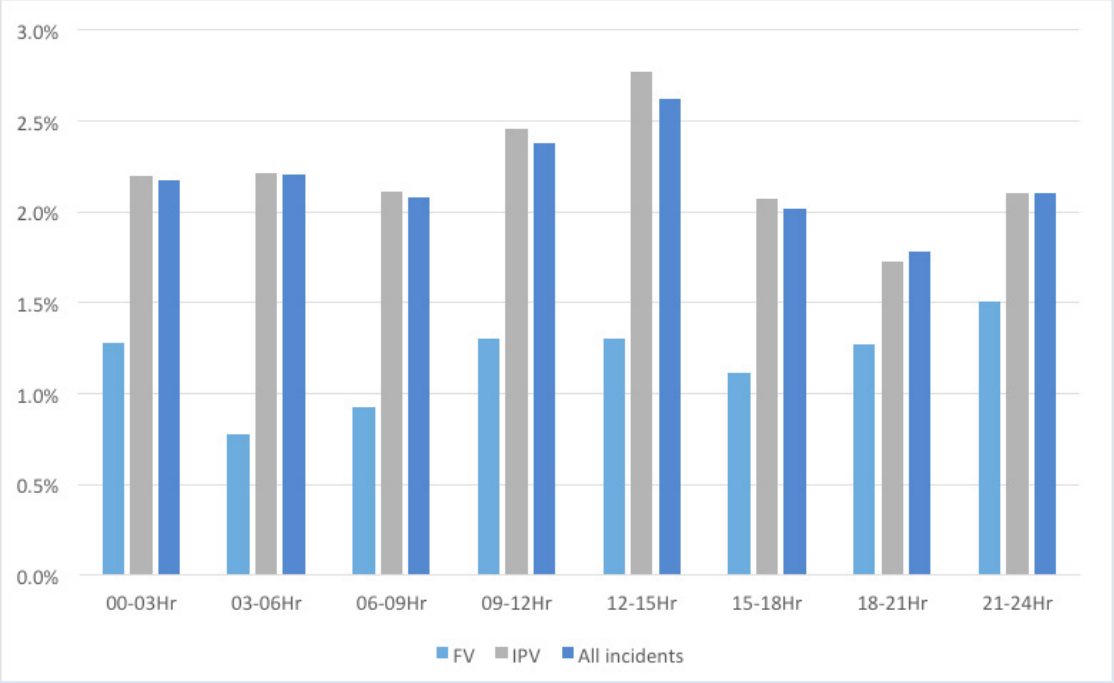
	FV		IPV		All incidents	
Hours	n	%	n	%	n	%
00–03	194	3.0	807	2.2	1,096	2.3
03–06	75	5.0	400	4.0	540	4.2
06–09	196	5.4	575	2.7	841	3.1
09–12	264	3.7	672	2.0	1,054	2.4
12–15	241	4.2	676	2.6	1,026	2.9
15–18	347	4.7	953	2.8	1,423	3.1
18–21	435	5.5	1,169	3.0	1,800	3.4
21–24	344	6.4	965	3.1	1,450	3.6

Child victim

Incidents of intimate partner violence that involved a child victim most often occurred on Monday and Tuesday (2.4%) compared with other days of the week (2.0%–2.2%, p<0.001); however, the size of this effect was very small (Phi=0.01). No significant difference was evident in the proportion of incidents that involved a child victim across each day of the week.

Incidents of IPV involving a child victim were most likely to take place between 9 am and 12 pm, and from 12 pm to 3 pm. They were least likely to occur between 6 and 9 pm. Conversely, FV incidents were least likely to take place from 3 to 6 am, and from 6 to 9 am (see Figure 64).

Figure 64 Proportion of FV, IPV and all incidents involving a child victim per time of day, Qld (n=329,411)



Offender recidivism and repeat victimisation

Of all domestic violence incidents, 73.4 percent involved recidivist offenders and 71.5 percent involved repeat victims. Recidivism was indicated when an offender was involved in at least one other incident during the reporting period, 2010–15. Repeat victimisation was indicated when a victim was involved in at least one other incident during that same period. Most (93.2%) incidents that involved repeat victims also involved repeat offenders. Incidents of IPV compared with FV were significantly more likely to involve recidivist offenders (77.3% vs 68.2%, p<0.001, Phi=-0.08) and repeat victims (76.4% vs 61.3%, p<0.001, Phi=-0.13). The proportion of incidents involving either a recidivist offender or repeat victim increased between 2010 and 2012, remained steady until 2014 and significantly decreased in 2015 (p<0.001)—see Tables 199 and 200.

Table 199 Proportion of FV, IPV and all incidents involving recidivist offenders, Qld (n=329,013)[a]

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	3,632	65.0	22,961	71.8	29,540	69.5
2011	4,330	67.1	26,947	76.7	34,916	73.7
2012	4,889	68.9	29,672	78.9	38,490	75.4
2013	5,909	68.7	33,129	78.8	42,968	75.2
2014	7,070	69.0	37,061	78.4	47,635	75.1
2015	6,861	69.0	36,100	77.8	49,216	72.9

a: 1,688 incidents had no offender data

Table 200 Proportion of FV, IPV and all incidents involving repeat victims, Qld (n=329,573)[a]

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	3,239	57.8	22,703	71.0	28,784	67.7
2011	3,900	60.4	26,577	75.7	33,890	71.5
2012	4,492	62.7	29,556	78.0	37,822	73.5
2013	5,297	61.5	32,692	77.7	41,777	73.0
2014	6,402	62.5	36,610	77.4	46,364	73.1
2015	6,118	61.6	35,648	76.8	47,652	70.6

a: 1,128 incidents had no victim data

Substance involvement

Family violence incidents involving recidivist offenders were significantly more likely to be flagged as alcohol-related compared with incidents that did not involve recidivist offenders (71.6% vs 66.8%, p<0.001, Phi=0.05). As shown in Table 201, FV incidents involving a recidivist offender were significantly more likely to involve an offender affected by alcohol (p<0.001, Phi=0.05). For both IPV and FV, a similar proportion of incidents that involved a repeat victim were flagged as alcohol-related, and involved either a victim or offender who was alcohol-affected, compared with incidents that did not involve a repeat victim (Table 202).

Table 201 Proportion of FV, IPV and all incidents involving recidivist offenders according to victim and offender alcohol use, Qld (n =303,309)

	Victim affected by alcohol				Offender affected by alcohol				Both affected by alcohol			
	No		Yes		No		Yes		No		Yes	
	n	%	n	%	n	%	n	%	n	%	n	%
FV	22,685	61.5	4,812	61.3	19,060	61.7	8,724	61.2	23,792	61.7	3,865	60.4
IPV	139,531	76.8	3,5061	76.8	119,274	77.1	56,814	76.4	145,993	76.9	29,375	76.3
All	176,204	72.8	43,262	73.1	150,366	73.1	71,162	72.4	184,467	72.9	36,093	72.7

Table 202 Proportion of FV, IPV and all incidents involving repeat victims according to victim and offender alcohol use, Qld (n=303,989)

	Victim affected by alcohol				Offender affected by alcohol				Both affected by alcohol			
	No		Yes		No		Yes		No		Yes	
	n	%	n	%	n	%	n	%	n	%	n	%
FV	22,685	61.5	4,812	61.3	19,060	61.7	8,724	61.2	23,792	61.7	3,865	60.4
IPV	139,531	76.8	3,5061	76.8	119,274	77.1	56,814	76.4	145,993	76.9	29,375	76.3
All	176,204	72.8	43,262	73.1	150,366	73.1	71,162	72.4	184,467	72.9	36,093	72.7

Socioeconomic disadvantage

Tables 203 and 204 show that the proportion of incidents involving recidivist offenders or repeat victims varied across areas of relative socioeconomic disadvantage. Incidents involving recidivist offenders most often took place in areas of most disadvantage, and least often in the least disadvantaged areas. Incidents involving repeat victims showed a similar pattern.

Table 203 Proportion of FV, IPV and all incidents involving recidivist offenders according to socioeconomic disadvantage, Qld (n=323,469)

	FV		IPV		All incidents	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	2,767	72.7	40,143	82.9	53,488	78.9
2	3,171	68.8	41,429	79.4	53,194	76.3
3	3,119	68.6	38,643	77.7	48,942	75.0
4	4,024	65.4	42,766	72.9	55,569	69.8
5 (least disadvantaged)	1,967	62.2	20,019	71.2	27,195	66.2

Table 204 Proportion of FV, IPV and all incidents involving repeat victims according to socioeconomic disadvantage, Qld (n=324,025)

	FV		IPV		All incidents	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	3,386	66.7	39,860	82.1	52,482	77.2
2	3,896	61.7	40,993	78.5	51,785	74.1
3	3,799	61.8	38,245	76.9	47,660	72.9
4	4,926	57.7	42,175	71.9	53,887	67.6
5 (least disadvantaged)	2,359	54.7	19,671	69.8	26,142	63.6

Day of week

The proportion of incidents involving a recidivist offender was generally consistent across day of the week, and ranged from 72.8 percent (Sunday) to 74.6 percent (Thursday). Consistently, the proportion of incidents involving repeat victims was similar across day of the week, and ranged from 70.5 percent (Sunday) to 72.7 percent (Thursday).

Time of day

The proportion of FV incidents involving either a recidivist offender or repeat victim was greatest from 3 to 9 am, smallest from 12 am to 3 am, and relatively similar at all other times. For IPV, the proportion of incidents involving a recidivist offender or repeat victim was relatively similar from 3 am to 12 pm, and lowest from 12 am to 3 am.

Multivariate correlates of incident characteristics

The following outlines multivariate predictors of domestic violence incident characteristics. A series of multivariate models were conducted to examine key person and incident characteristics that contributed unique variance to predicting:

- alcohol involvement;
- offender recidivism;
- repeat victimisation; and
- contravention of the DFVP Act.

Multivariate logistic regression models were conducted for all incidents and separately for FV and IPV incidents. Due to increased sensitivity of the Hosmer and Lemeshow Test of model fit with larger sample sizes, researchers referred to the Omnibus Tests of Model Coefficients to interpret model fit for all models.

Alcohol involvement

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; drug use; recidivist offender; repeat victim; and contravention of the DFVPA—contributed unique variance to the association between whether an incident was alcohol-related (ie either the victim, and/or the perpetrator was judged to be affected by alcohol—no vs yes) at all incidents (Table 205), IPV incidents (Table 206) and FV incidents (Table 207).

All incidents

In the fully adjusted model (Step 3), incidents that involved recidivist offenders were 1.11 times more likely to be alcohol-related, while incidents that involved repeat victims were less likely to involve alcohol (OR=0.93). Incidents involving a contravention of the DFVPA were also less likely to be alcohol-related (OR=0.89). Incidents that were drug-related were 1.57 times more likely to be alcohol-related. Finally, compared with those in the least disadvantaged areas, incidents that took place in the most disadvantaged areas were 1.44 times more likely to involve alcohol.

Despite accounting for little variance overall in predicting an alcohol-related incident (Cox & Snell R Square=0.007; Negelkerke R Square=0.009), each step accounted for significant variance in predicting alcohol-related incidents ($p<0.001$).

Intimate partner violence incidents

In the fully adjusted model (Step 3), recidivist offender and repeat victims were not significantly associated with whether incidents were alcohol-related. Incidents involving a contravention of the DFVPA were also less likely to be alcohol-related (OR=0.92). Incidents that were drug-related were 1.60 times more likely to be alcohol-related. Finally, compared with those in the least disadvantaged areas, incidents that took place in the most disadvantaged areas were 1.40 times more likely to involve alcohol.

Despite accounting for little variance overall in predicting an alcohol-related incident (Cox & Snell R Square=0.006; Negelkerke R Square=0.008), each step accounted for significant variance in predicting alcohol-related incidents ($p<0.001$).

Family violence incidents

In the fully adjusted model (Step 3), incidents involving recidivist offenders were 1.33 times more likely to involve alcohol, while incidents involving repeat victims were significantly less likely to involve alcohol (OR=0.91). Incidents involving a contravention of the Act were also less likely to be alcohol-related (OR=0.79). Incidents that were drug-related were 1.54 times more likely to be alcohol-related. Finally, compared with those in three least disadvantaged areas, incidents that took place in the most disadvantaged areas were 1.18 to 1.66 times more likely to involve alcohol.

Despite accounting for little variance overall in predicting an alcohol-related incident (Cox & Snell R Square=0.01; Negelkerke R Square=0.02), each step accounted for significant variance in predicting alcohol-related incidents ($p<0.001$).

Table 205 Binary logistic regression associated with victim or offender alcohol use at incident, Qld (n=298,266)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.35	631.57	1.42***	1.39–1.46	0.36	646.15	1.43***	1.39–1.47	0.36	658.63	1.44***	1.4–1.48
2	0.15	111.40	1.16***	1.13–1.19	0.15	114.42	1.16***	1.13–1.2	0.15	118.81	1.17***	1.13–1.2
3	0.16	133.69	1.18***	1.15–1.21	0.17	138.33	1.18***	1.15–1.22	0.17	143.12	1.19***	1.15–1.22
4	-0.03	4.43	0.97*	0.95–1	-0.03	4.73	0.97*	0.94–1	-0.03	4.16	0.97*	0.95–1
5[a] (least disadvantage)												
Recidivist offender (yes)					0.11	74.99	1.12***	1.09–1.14	0.10	64.69	1.11***	1.08–1.14
Repeat victim (yes)					-0.08	40.33	0.92***	0.9–0.95	-0.08	38.41	0.93***	0.9–0.95
Contravene DFVPA (yes)					-0.12	169.22	0.89***	0.87–0.91	-0.11	158.32	0.89***	0.88–0.91
Drug-related (yes)									0.45	439.90	1.57***	1.51–1.64

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: reference category

Table 206 Binary logistic regression associated with victim or offender alcohol use at intimate partner violence incidents (n=225,799)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.32	392.51	1.38***	1.34–1.43	0.33	411.92	1.39***	1.35–1.44	0.34	418.91	1.40***	1.36–1.45
2	0.12	56.42	1.13***	1.09–1.17	0.13	60.44	1.13***	1.1–1.17	0.13	62.36	1.14***	1.1–1.17
3	0.15	88.54	1.17***	1.13–1.20	0.16	93.05	1.17***	1.13–1.21	0.16	95.88	1.17***	1.14–1.21
4	-0.04	5.30	0.96*	0.93–0.99	-0.04	5.47	0.96*	0.93–0.99	-0.04	5.15	0.96*	0.93–1
5[a] (least disadvantage)												
Recidivist offender (yes)					0.02	1.54	1.02	0.99–1.06	0.02	0.89	1.02	0.98–1.05
Repeat victim (yes)					-0.03	3.58	0.97	0.94–1	-0.03	3.75	0.97	0.94–1
Contravene DFVPA (yes)					-0.08	69.70	0.92***	0.9–0.94	-0.08	63.91	0.92***	0.9–0.94
Drug-related (yes)									0.47	322.82	1.60***	1.52–1.68

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: reference category

Table 207 Binary logistic regression associated with victim or offender alcohol use at family violence incidents (n=44,266)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.52	185.75	1.68***	1.56–1.81	0.50	168.89	1.65***	1.53–1.77	0.51	174.89	1.66***	1.54–1.79
2	0.18	20.91	1.19***	1.11–1.29	0.16	16.72	1.17***	1.09–1.26	0.17	18.32	1.18***	1.09–1.27
3	0.21	28.18	1.23***	1.14–1.32	0.19	23.87	1.21***	1.12–1.3	0.20	25.71	1.22***	1.13–1.31
4	0.03	0.58	1.03	0.96–1.11	0.02	0.16	1.02	0.94–1.09	0.02	0.30	1.02	0.95–1.1
5[a] (least disadvantage)												
Recidivist offender (yes)					0.29	141.74	1.34***	1.28–1.41	0.28	131.03	1.33***	1.26–1.39
Repeat victim (yes)					-0.10	16.94	0.91***	0.87–0.95	-0.09	16.10	0.91***	0.87–0.95
Contravene DFVPA (yes)					-0.23	73.06	0.79***	0.75–0.83	-0.24	73.38	0.79***	0.75–0.83
Drug-related (yes)									0.43	87.55	1.54***	1.4–1.68

*** statistically significant at $p<0.001$

a: reference category

Offender recidivism

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim or offender was alcohol-affected; repeat victim; and drug use—contributed unique variance to the involvement of repeat offenders (no vs yes) at all incidents (Table 208), IPV incidents (Table 209) and FV incidents (Table 210). Contravention of the DFVPA was also not included in the model given that offender recidivism was needed for a contravention of the Act to take place.

All incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with involvement of a recidivist offender. Compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of greater disadvantage were significantly more likely to involve a recidivist offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. If the incident involved a repeat victim, the odds of the incident involving a repeat offender were increased by 44.25 times. The offender(s) being affected by alcohol increased the likelihood that the incident involved a repeat offender (OR=1.17), while the victim(s) being affected by alcohol decreased the likelihood that the incident involved a repeat offender (OR=0.86). Drug involvement (OR=1.68) was associated with a greater likelihood that the incident involved a repeat offender.

The final model accounted for 38 to 56 percent of the variance in predicting whether or not the incident involved a repeat offender (Cox & Snell R Square=0.38; Negelkerke R Square=0.56) and correctly predicted 91.0 percent of incidents that involved repeat offenders (and 81.6% of incidents that did not involve repeat offenders). Each step accounted for significant variance in predicting involvement of a repeat offender (ps<0.001).

IPV incidents

In the fully adjusted model (Step 3), compared with incidents that occurred in areas of least disadvantage, incidents that occurred in three areas of greatest disadvantage were significantly more likely to involve a recidivist offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. If the incident involved a repeat victim, the odds of the incident involving a repeat offender increased 95.84 times. The offender(s) being affected by alcohol increased the likelihood that the incident involved a repeat offender (OR=1.04), while the victim(s) being affected by alcohol decreased likelihood that the incident involved a repeat offender (OR=0.92). Drug involvement (OR=1.43) was associated with a greater likelihood that the incident involved a repeat offender.

The final model accounted for 43 to 66 percent of the variance in predicting whether or not the incident involved a repeat offender (Cox & Snell R Square=0.43; Negelkerke R Square=0.66) and correctly predicted 94.5 percent of incidents that involved repeat offenders (and 85.0% of incidents that did not involve repeat offenders). Each step accounted for significant variance in predicting involvement of a repeat offender (ps<0.001).

FV incidents

In the fully adjusted model (Step 3), compared with incidents that occurred in areas of least disadvantage, incidents that occurred in three areas of greatest disadvantage were significantly more likely to involve a recidivist offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. If the incident involved a repeat victim, the odds of the incident involving a repeat offender increased 6.88 times. The offender(s) being affected by alcohol increased the likelihood that the incident involved a repeat offender (OR=1.43), while the victim(s) being affected by alcohol decreased the likelihood that the incident involved a repeat offender (OR=0.81). Drug involvement (OR=1.80) was associated with a greater likelihood that the incident involved a repeat offender.

The final model accounted for 17 to 24 percent of the variance in predicting whether or not the incident involved a repeat offender (Cox & Snell R Square=0.17; Negelkerke R Square=0.24) and correctly predicted 78.7 percent of incidents that involved repeat offenders (and 63.2% of incidents that did not involve repeat offenders). Each step accounted for significant variance in predicting the involvement of a repeat offender (ps<0.001).

Table 208 Binary logistic regression predicting repeat offender involvement in all incidents (n=295,591)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.63	1690.48	1.88***	1.82–1.93	0.34	243.18	1.40***	1.34–1.46	0.34	242.30	1.40***	1.34–1.46
2	0.45	918.40	1.57***	1.52–1.61	0.25	137.23	1.28***	1.23–1.34	0.25	139.05	1.28***	1.23–1.34
3	0.38	645.58	1.46***	1.42–1.5	0.20	84.70	1.22***	1.17–1.27	0.20	85.88	1.22***	1.17–1.27
4	0.12	78.02	1.13***	1.1–1.16	0.06	9.06	1.06**	1.02–1.11	0.06	10.01	1.07**	1.03–1.11
5[a] (least disadvantage)												
Repeat victim (yes)					3.78	98,947.48	43.90***	42.88–44.94	3.79	98,675.18	44.25***	43.22–45.31
Offender alcohol-affected (yes)									0.16	107.19	1.17***	1.14–1.21
Victim alcohol-affected (yes)									-0.15	65.80	0.86***	0.83–0.89
Drug-related (yes)									0.52	198.11	1.68***	1.56–1.8

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 209 Binary logistic regression predicting repeat offender involvement in intimate partner violence incidents (n=223,980)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.68	1,319.22	1.98***	1.9–2.05	0.34	127.10	1.4***	1.32–1.49	0.34	128.02	1.41***	1.32–1.49
2	0.44	602.88	1.55***	1.5–1.6	0.21	54.55	1.24***	1.17–1.31	0.21	54.77	1.24***	1.17–1.31
3	0.34	358.93	1.40***	1.35–1.45	0.15	28.34	1.17***	1.1–1.24	0.16	28.81	1.17***	1.1–1.24
4	0.08	21.98	1.08***	1.05–1.12	0.03	0.94	1.03	0.97–1.08	0.03	0.97	1.03	0.97–1.09
5[a] (least disadvantage)												
Repeat victim (yes)					4.56	77,809.36	95.73***	92.71–98.85	4.56	77,700.29	95.84***	92.81–98.96
Offender alcohol-affected (yes)									0.04	4.24	1.04*	1.00–1.09
Victim alcohol-affected (yes)									-0.09	12.50	0.92***	0.87–0.96
Drug-related (yes)									0.36	45.54	1.43***	1.29–1.59

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 210 Binary logistic regression predicting repeat offender involvement in family violence incidents (n=43,870)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.51	177.54	1.67***	1.54–1.79	0.34	65.27	1.41***	1.3–1.53	0.34	62.19	1.40***	1.29–1.52
2	0.30	64.61	1.35***	1.26–1.46	0.21	24.64	1.23***	1.13–1.33	0.21	25.41	1.23***	1.14–1.34
3	0.30	63.42	1.35***	1.25–1.45	0.20	22.41	1.22***	1.12–1.32	0.20	22.67	1.22***	1.12–1.33
4	0.16	18.34	1.17***	1.09–1.26	0.12	8.85	1.13**	1.04–1.22	0.13	9.98	1.14**	1.05–1.23
5[a] (least disadvantage)												
Repeat victim (yes)					1.91	7,077.15	6.78***	6.48–7.09	1.93	7,101.34	6.88***	6.58–7.19
Offender alcohol-affected (yes)									0.36	151.31	1.43***	1.35–1.51
Victim alcohol-affected (yes)									-0.21	36.64	0.81***	0.76–0.87
Drug-related (yes)									0.59	96.86	1.80***	1.6–2.03

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Repeat victims

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim(s) or offender(s) were affected by alcohol; drug use; and involvement of recidivist offenders—contributed unique variance to predicting involvement of repeat victims (no vs yes) at all incidents (Table 211), IPV incidents (Table 212) and FV incidents (Table 213).

Contravening the DFVPA was also not included in the model as repeat victimisation is required.

All incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with the involvement of a repeat victim. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater disadvantage. If the incident involved a repeat offender, the odds of the incident involving a repeat victim increased 44.26 times. If the victim was affected by alcohol, the odds of the incident involving a repeat victim increased by 1.16 times, the offender being affected by alcohol decreased the likelihood that the incident involved a repeat victim (OR=0.82). The incident being drug-related (ie either the victim or the offender were judged to be affected by drugs) also decreased the likelihood that the incident involved a repeat victim (OR=0.82).

The final model accounted for 38 to 55 percent of the variance in predicting whether or not the incident involved a repeat victim (Cox & Snell R Square=0.38; Negelkerke R Square=0.55) and correctly predicted 93.6 percent of incidents involving repeat victims (and 75.3% of incidents not involving repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with the involvement of a repeat victim except if the incident was drug-related (ie either the victim or the offender were judged to be affected by drugs). Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater disadvantage. If the incident involved a repeat offender, the odds of the incident involving a repeat victim increased 95.84 times. If the victim was affected by alcohol the odds of the incident involving a repeat victim increased 1.10 times, while the offender being affected by alcohol decreased the likelihood that the incident involved a repeat victim (OR=0.89).

The final model accounted for 43 to 65 percent of the variance in predicting whether or not the incident involved a repeat victim (Cox & Snell R Square=0.43; Negelkerke R Square=0.65) and correctly predicted 95.6 percent of incidents involving repeat victims (and 87.1% of incidents not involving repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with a repeat victim being involved. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio generally increasing across areas of greater disadvantage. If the incident involved a repeat offender, the odds of the incident involving a repeat victim increased 6.88 times. If the victim was affected by alcohol the odds of the incident involving a repeat victim increased 1.07 times, while the offender being affected by alcohol decreased likelihood that the incident involved a repeat victim (OR=0.81). The incident being drug-related (ie either the victim or the offender were judged to be affected by drugs) also decreased the likelihood that the incident involved a repeat victim (OR=0.89).

The final model accounted for 17 to 23 percent of the variance in predicting whether or not the incident involved a repeat victim (Cox & Snell R Square=0.17; Negelkerke R Square=0.23) and correctly predicted 83.9 percent of incidents involving repeat victims (and 56.8% of incidents not involving repeat victims). Each step accounted for significant variance in predicting the involvement of a repeat victim (ps<0.001).

Table 211 Binary logistic regression predicting repeat victim involvement in all incidents (n=295,591)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.64	1,810.30	1.89***	1.83–1.94	0.40	365.88	1.5***	1.44–1.56	0.41	375.30	1.51***	1.45–1.57
2	0.45	960.60	1.57***	1.52–1.61	0.28	181.03	1.32***	1.27–1.37	0.28	182.49	1.32***	1.27–1.38
3	0.39	705.68	1.47***	1.43–1.52	0.25	145.54	1.29***	1.23–1.34	0.25	147.25	1.29***	1.24–1.34
4	0.13	87.91	1.14***	1.11–1.17	0.09	18.98	1.09***	1.05–1.13	0.09	18.21	1.09***	1.05–1.13
5[a] (least disadvantage)												
Recidivist offender (yes)					3.78	98,947.48	43.9***	42.88–44.94	3.79	98,668.73	44.26***	43.22–45.32
Offender alcohol-affected (yes)									-0.20	186.82	0.82***	0.79–0.84
Victim alcohol-affected (yes)									0.15	71.25	1.16***	1.12–1.2
Drug-related (yes)									-0.20	35.99	0.82***	0.77–0.87

*** statistically significant at p<0.001

a: reference category

Table 212 Binary logistic regression predicting repeat victim involvement in intimate partner violence incidents (n=223,980)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.69	1403.90	2***	1.93–2.07	0.43	212.82	1.54***	1.45–1.63	0.44	215.67	1.55***	1.46–1.64
2	0.45	644.25	1.56***	1.51–1.62	0.28	96.11	1.32***	1.25–1.4	0.28	96.58	1.32***	1.25–1.4
3	0.35	393.90	1.42***	1.37–1.47	0.23	63.29	1.26***	1.19–1.33	0.23	63.93	1.26***	1.19–1.33
4	0.09	26.62	1.09***	1.05–1.13	0.06	5.57	1.07*	1.01–1.13	0.06	5.46	1.07*	1.01–1.13
5[a] (least disadvantage)												
Recidivist offender (yes)					4.56	77,809.36	95.73***	92.71–98.85	4.56	77,700.02	95.84***	92.81–98.96
Offender alcohol-affected (yes)									-0.12	32.13	0.89***	0.85–0.93
Victim alcohol-affected (yes)									0.09	14.03	1.10***	1.04–1.15
Drug-related (yes)									-0.02	0.17	0.98	0.89–1.08

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: reference category

Table 213 Binary logistic regression predicting repeat victim involvement in family violence incidents (n=43,870)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.52	198.38	1.68***	1.56–1.81	0.38	87.20	1.46***	1.35–1.58	0.39	92.91	1.48***	1.37–1.61
2	0.30	68.12	1.35***	1.26–1.45	0.21	28.43	1.24***	1.15–1.34	0.22	29.23	1.24***	1.15–1.35
3	0.31	73.34	1.37***	1.27–1.47	0.23	32.59	1.26***	1.16–1.36	0.23	33.54	1.26***	1.17–1.37
4	0.13	13.65	1.14***	1.06–1.22	0.08	4.21	1.08*	1–1.17	0.08	4.06	1.08*	1–1.17
5[a] (least disadvantage)												
Recidivist offender (yes)					1.91	7,077.15	6.78***	6.48–7.09	1.93	7,099.75	6.88***	6.58–7.19
Offender alcohol-affected (yes)									-0.21	58.82	0.81***	0.77–0.86
Victim alcohol-affected (yes)									0.07	4.13	1.07*	1.00–1.14
Drug-related (yes)									-0.11	4.99	0.89*	0.81–0.99

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Contravening the Act

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; whether the victim or offender was affected by alcohol; and drug involvement—contributed unique variance to predicting involvement of repeat victims (no vs yes) at all incidents (Table 214), IPV incidents (Table 215) and FV incidents (Table 216). Repeat victimisation and recidivist offender were not included in the model as these variables in order to contravene the DFVPA.

All incidents

In the fully adjusted model (Step 3), compared with incidents that occurred in areas of least disadvantage, those that occurred in the three areas of greatest relative disadvantage were significantly more likely to involve a contravention of the Act. The incident was less likely to involve a contravention if either the incident was drug-related (OR=0.88) or if the offender was affected by alcohol (OR=0.85). Whether the victim was affected by alcohol was not associated with contravening the Act.

Despite accounting for little variance overall in predicting an alcohol-related incident (Cox & Snell R Square=0.005; Negelkerke R Square=0.006), each step accounted for significant variance in predicting alcohol-related incidents ($p<0.001$).

Intimate partner violence incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with involvement of a repeat victim. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a DFVPA contravention, with the size of the odds ratio increasing across areas of greater disadvantage. The incident was less likely to involve a DFVPA contravention if either the incident was drug-related (OR=0.89) or if the offender was affected by alcohol (OR=0.84). Whether the victim was affected by alcohol was associated with increased odds of contravening the Act (OR=1.06).

Despite accounting for little variance overall in predicting an alcohol-related incident (Cox & Snell R Square=0.007; Negelkerke R Square=0.009), each step accounted for significant variance in predicting alcohol-related incidents ($p<0.001$).

Family violence incidents

In the fully adjusted model (Step 3), the incident was less likely to involve a contravention of the Act if the victim was affected by alcohol (OR=0.61), but 1.18 times more likely to involve a contravention if it was drug-related (ie either the victim or the offender were judged to be affected by drugs). Whether the offender was affected by alcohol was not associated with contravening the DFVPA. Finally, compared with incidents that occurred in the area of least disadvantage, those that occurred in the second and fourth most disadvantaged areas were less likely to involve a contravention of the DFVPA.

Despite accounting for little variance overall in predicting an alcohol-related incident (Cox & Snell R Square=0.006; Negelkerke R Square=0.009), each step accounted for significant variance in predicting alcohol-related incidents ($p<0.01$).

Table 214 Binary logistic regression predicting contravention of the DFVPA in all incidents (n=297,935)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile								
1 (most disadvantage)	0.31	483.27	1.37***	1.33–1.41	0.33	516.97	1.38***	1.35–1.42
2	0.18	161.59	1.2***	1.17–1.23	0.19	169.31	1.20***	1.17–1.24
3	0.19	178.14	1.21***	1.18–1.25	0.20	186.45	1.22***	1.18–1.25
4	-0.01	0.79	0.99	0.96–1.02	-0.01	0.92	0.99	0.96–1.01
5[a] (least disadvantage)								
Offender alcohol-affected (yes)					-0.16	266.77	0.85***	0.83–0.87
Victim alcohol-affected (yes)					0.02	2.06	1.02	0.99–1.04
Drug-related (yes)					-0.13	28.94	0.88***	0.84–0.92

. *** statistically significant at p<0.001

a: reference category

Table 215 Binary logistic regression predicting contravention of the DFVPA in intimate partner violence incidents (n=224,900)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile								
1 (most disadvantage)	0.38	549.23	1.46***	1.41–1.51	0.39	574.96	1.47***	1.43–1.52
2	0.18	121.77	1.19***	1.16–1.23	0.18	126.35	1.20***	1.16–1.24
3	0.16	101.71	1.18***	1.14–1.21	0.17	106.35	1.18***	1.14–1.22
4	-0.04	7.55	0.96**	0.93–0.99	-0.04	7.81	0.96**	0.93–0.99
5[a] (least disadvantage)								
Offender alcohol-affected (yes)					-0.17	221.23	0.84***	0.83–0.86
Victim alcohol-affected (yes)					0.06	17.45	1.06***	1.03–1.08
Drug-related (yes)					-0.12	18.61	0.89***	0.84–0.94

** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Table 216 Binary logistic regression predicting contravention of the DFVPA in family violence incidents (n=44,058)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile								
1 (most disadvantage)	-0.08	2.99	0.93	0.85–1.01	-0.03	0.56	0.97	0.89–1.05
2	-0.15	11.86	0.86***	0.79–0.94	-0.13	9.07	0.88**	0.8–0.95
3	-0.10	4.82	0.91*	0.83–0.99	-0.07	2.88	0.93	0.85–1.01
4	-0.15	12.57	0.86***	0.79–0.93	-0.14	11.02	0.87***	0.8–0.94
5a (least disadvantage)								
Offender alcohol-affected (yes)					-0.01	0.17	0.99	0.93–1.05
Victim alcohol-affected (yes)					-0.50	157.54	0.61***	0.56–0.66
Drug-related (yes)					0.17	9.58	1.18**	1.06–1.32

* statistically significant at p<0.05. ** statistically significant at p<0.01. *** statistically significant at p<0.001

a: reference category

Queensland summary

Person

In Queensland, more than three-quarters of all offenders were male (76.9%), and a significantly higher proportion of IPV offenders (78.8%) were male than FV offenders (69.4%). The vast majority of offenders were aged between 18 and 49 years. Three-quarters (76.2%) of victims were female, and, while most IPV victims were aged between 18 and 49 years, most IPV victims were aged from 18 to 59 years.

Incidents

A total of 330,701 family and domestic violence incidents were recorded across the reporting period, including 241,086 IPV and 48,077 FDV incidents. The rate of family violence steadily increased over the reporting period, from 96 per 10,000 in 2010 to 141 per 10,000 in 2015. While the smallest proportion (12.7%) of incidents took place in the area of least disadvantage, a similar proportion of incidents occurred in the three areas of the most disadvantage (20.2–21.6%), and almost a quarter of incidents took place in the second-least disadvantaged area.

Alcohol-related incidents

The proportion of incidents that were alcohol-related (ie either the victim or the offender was judged to be affected by alcohol) gradually decreased across the reporting period, from 41.0 percent in 2010 to 30.3 percent in 2015. While a greater proportion of IPV incidents (35.6%) were alcohol-related compared with FV incidents (34.8%), the size of this effect was very small (Phi=0.006, $p<0.001$). Offenders were affected by alcohol in 32.3 percent of incidents, victims in 19.6 percent, and both victims and offenders in 16.4 percent of incidents. In the multivariate model, greater socioeconomic disadvantage was associated with increased odds that both IPV and FV incidents were alcohol-related. The incident being drug-related also increased odds that IPV (OR=1.60) and FV (OR=1.54) incidents were alcohol-related, and for FV only, offender recidivism was also associated with increased odds that the incident was alcohol-related (OR=1.33). Conversely, a contravention of the DFVPA decreased odds that an IPV (OR=0.92) or FV (OR=0.79) incident was drug-related.

Drug-related incidents

Drug-related (ie either the victim or the offender was judged to be affected by drugs) incidents slightly increased over the reporting period. This trend was especially apparent for FV where the proportion increased from 4.0 percent in 2010 to 6.1 percent in 2015. Incidents of intimate partner violence increased from 2.2 percent in 2010 to 3.0 percent in 2015. Offenders were judged to be affected by drugs for 2.3 percent of IPV and 4.4 percent of FV incidents, while victims were only judged to be affected by drugs for 0.8 percent of IPV incidents and 0.5 percent of FV incidents. The proportion of incidents that were drug-related was highest in the area of least disadvantage.

Contravening the Act

A total of 36.6 percent of IPV incidents and 19.2 percent of FV incidents involved a contravention of the Act. The role of alcohol and drugs was unclear. A smaller proportion of incidents that involved a DFVPA contravention were alcohol-related compared with those that did not involve a breach, and a greater proportion of incidents that involved a contravention were drug-related compared with those that did not. However, the size of these effects was very small (Phi=0.01). In the multivariate model, for IPV incidents, increased socioeconomic disadvantage and the victim being alcohol-affected increased the odds of a contravention of the DFVPA, while the incident being drug-related and the offender's alcohol use decreased the odds of a breach. For FV incidents, increased socioeconomic disadvantage decreased the odds of a breach, but not consistently across all levels of disadvantage. While the incident being drug-related increased the odds of a DFVPA contravention (OR=1.18), the victim being alcohol-affected decreased odds of a breach (OR=0.61).

Offender recidivism and repeat victimisation

A total of 73.4 percent of DV incidents involved recidivist offenders and 71.5 percent involved recidivist victims. In the multivariate model, greater socioeconomic disadvantage was associated with greater odds of IPV and FV incidents involving either a recidivist offender or a repeat victim. The incident involving a repeat victim/recidivist offender increased the odds that the incident involved a recidivist offender/repeat victim by 95.84 for IPV, but only 6.88 for FV. Offender alcohol use (OR=1.04–1.43) and the incident being drug-related increased the likelihood of offender recidivism (OR=1.43–1.80), while victim alcohol use decreased the odds of offender recidivism (OR=0.81-0.92). Conversely, while victim alcohol use increased the likelihood of victim recidivism (OR=1.07–1.10), offender alcohol-use decreased the odds of victim recidivism (OR=0.81–0.89).

Day and time

Domestic violence incidents were more likely to take place on Saturdays and Sundays than on weekdays. For IPV and FV, the proportion of incidents that took place during each three-hour interval generally increased over the daytime hours from 9 am to 9 pm, decreased between 9 pm and 12 am, increased from 12 am to 3 am, and was lowest between 3 and 9 am. Alcohol-related incidents were most likely to take place on a Saturday, and between 6 pm and 6 am, regardless of day of the week. Alcohol-related incidents occurring on Saturday and Sunday were most likely to take place between 3 and 6 am, with 75 to 80 percent of incidents occurring during this time being alcohol-related. Similarly, drug-related incidents were most likely to take place on Saturdays and Sundays between 6 pm and 6 am.

South Australia police data results

This section presents trends for domestic violence incidents attended by SA police between 1 January 2010 and 31 December 2014. They are separate for individuals and incidents. Data include domestic violence incidents involving intimate partners and other family members. The following results compare intimate partner and family violence.

Individuals

Demographic data are presented separately for offenders and victims.

Offenders

During the study, 9,485 unique offenders were recorded at DV incidents attended by SA police. Most offenders were male (91.1%) across all age groups (see Table 217). The greatest proportion of offenders was aged between 30 and 34 years (18.4%), while the lowest proportion was aged from 80 to 84 years (0.04%). Among female offenders, the greatest proportion was aged between 35 and 39 years (16.8%).

Table 217 Proportion of female, male and all offenders in seven age groups, SA (n=13,433)						
	Female		Male		All incidents	
Age (years)	n	%	n	%	n	%
10–19	95	8.0	626	5.1	721	5.4
20–24	173	14.5	1,584	12.9	1,757	13.1
25–34	383	32.1	4,502	36.8	4,885	36.4
35–49	453	37.9	4,523	37.0	4,976	37.0
50–59	75	6.3	763	6.2	838	6.2
60–69	12	1.0	208	1.7	220	1.6
70–84	3	0.3	33	0.3	36	0.3

Note: the age of 4 offenders was either unknown or not recorded

Table 218 presents the proportion of offenders across age groups for those involved in FV and IPV (and other relationship) incidents. The greatest proportion of offenders of FV incidents was aged between 40 and 44 years, while IPV incidents saw a greater proportion aged between 30 and 34 years—see Table 219.

Table 218 Proportion of offenders at FV, IPV and all incidents in seven age groups, SA (n=13,405)						
	FV		IPV		All incidents	
Age (years)	n	%	n	%	n	%
10–19	240	15.4	477	4.0	721	5.4
20–24	158	10.1	1,598	13.5	1,757	13.1
25–34	389	24.9	4,484	37.9	4,885	36.4
35–49	607	38.9	4,357	36.8	4,976	37.0
50–59	117	7.5	718	6.1	838	6.2
60–69	43	2.8	177	1.5	220	1.6
70–84	7	0.4	29	0.2	36	0.3

Note: type of violence was not categorised for 32 offenders

Table 219 Proportion of offenders by age groups and gender according to incident type, SA (n=13,405)												
	FV				IPV				All incidents			
Age (years)	Female		Male		Female		Male		Female		Male	
	n	%	n	%	n	%	n	%	n	%	n	%
10–19	47	15.7	193	15.3	47	5.3	430	3.9	94	7.9	623	5.1
20–24	34	11.3	124	9.8	139	15.7	1,459	13.3	173	14.6	1,583	13.0
25–34	79	26.3	310	24.6	300	33.8	4,184	38.2	379	31.9	4,494	36.8
35–49	120	40.0	487	38.6	330	37.2	4,027	36.8	450	37.9	4,514	36.9
50–59	16	5.3	101	8.0	59	6.7	659	6.0	75	6.3	760	6.2
60–69	3	1.0	40	3.2	9	1.0	168	1.5	12	1.0	208	1.7
70–84	0	0.0	7	0.6	3	0.3	26	0.2	3	0.3	33	0.3

Note: type of violence was not categorised for 32 offenders.

Risk assessment

Attending police determined the level of risk offenders posed to victims, from standard to high risk (see Table 220). There were consistent proportions across IPV incidents, and a lower proportion of high-risk offenders for FV.

Table 220 Proportion of offenders at FV, IPV and all incidents according to level of risk, SA (n=13,394)

	FV		IPV		All incidents	
	n	%	n	%	n	%
Standard risk	873	55.9	3,895	32.9	4,785	35.6
Medium risk	432	27.7	4,086	34.5	4,523	33.7
High risk	256	16.4	3,852	32.5	4,118	30.6

Note: risk assessment was not included for 12 offenders, and 32 incidents did not include violence type

Victims

A total of 12,980 unique victims were recorded across all DV incidents in South Australia during the reporting period, including 1,531 victims of FV and 11,420 victims of IPV. Most incidents (97.1%) involved one victim with the maximum number of victims recorded per incident being three. Multiple victims were more likely to be recorded as being present at IPV than FV incidents. Table 221 presents the proportion of female and male victims across age groups, while Table 222 shows the proportion of FV and IPV victims across age groups. Most victims were female (89.1%). Victims tended to be concentrated in the 25 to 49 year age groups.

Table 221 Proportion of female, male and all victims in nine age groups, SA (n=13,437)

	Female		Male		All victims	
Age (years)	n	%	n	%	n	%
0–9	131	1.1	143	9.8	274	2.0
10–19	1,191	9.9	266	18.2	1,457	10.8
20–24	2,077	17.3	118	8.1	2,195	16.3
25–34	4,248	35.5	282	19.3	4,530	33.7
35–49	3,581	29.9	435	29.8	4,016	29.9
50–59	554	4.6	136	9.3	690	5.1
60–69	141	1.2	51	3.5	192	1.4
70–84	51	0.4	28	1.9	79	0.6
85–94	3	0.0	1	0.1	4	0.0

Table 222 Proportion of FV, IPV and all victims in nine age groups, SA (n=13,437)						
	FV		IPV		All incidents	
Age (years)	n	%	n	%	n	%
0–9	271	17.3	0	0.0	274	2.0
10–19	591	37.8	858	7.2	1,457	10.8
20–24	81	5.2	2,110	17.8	2,195	16.3
25–34	100	6.4	4,428	37.4	4,530	33.7
35–49	244	15.6	3,762	31.8	4,016	29.9
50–59	149	9.5	539	4.6	690	5.1
60–69	82	5.2	108	0.9	192	1.4
70–84	40	2.6	38	0.3	79	0.6
85–94	4	0.3	0	0.0	4	0.0

Note: type of violence was not categorised for 32 victims

Table 130 Proportion of FV, IPV and all incidents involving recidivist offenders according to victim and offender alcohol use, NSW (n=113,071)												
	Family violence				Intimate partner violence				All incidents			
	Female		Male		Female		Male		Female		Male	
Age (years)	n	%	n	%	n	%	n	%	n	%	n	%
0–9	130	13.1	141	24.8	0	0.0	0	0.0	130	1.1	141	9.7
10–19	348	35.0	243	42.8	838	7.6	20	2.3	1,186	9.9	263	18.1
20–24	60	6.0	21	3.7	2,015	18.4	95	10.8	2,075	17.4	116	8.0
25–34	77	7.7	23	4.0	4,170	38.0	258	29.3	4,247	35.5	281	19.4
35–49	188	18.9	56	9.9	3,385	30.9	377	42.7	3,573	29.9	433	29.9
50–59	114	11.5	35	6.2	438	4.0	101	11.5	552	4.6	136	9.4
60–69	53	5.3	29	5.1	86	0.8	22	2.5	139	1.2	51	3.5
70–84	21	2.1	19	3.3	29	0.3	9	1.0	50	0.4	28	1.9
85–94	3	0.3	1	0.2	0	0.0	0	0.0	3	0.0	1	0.1

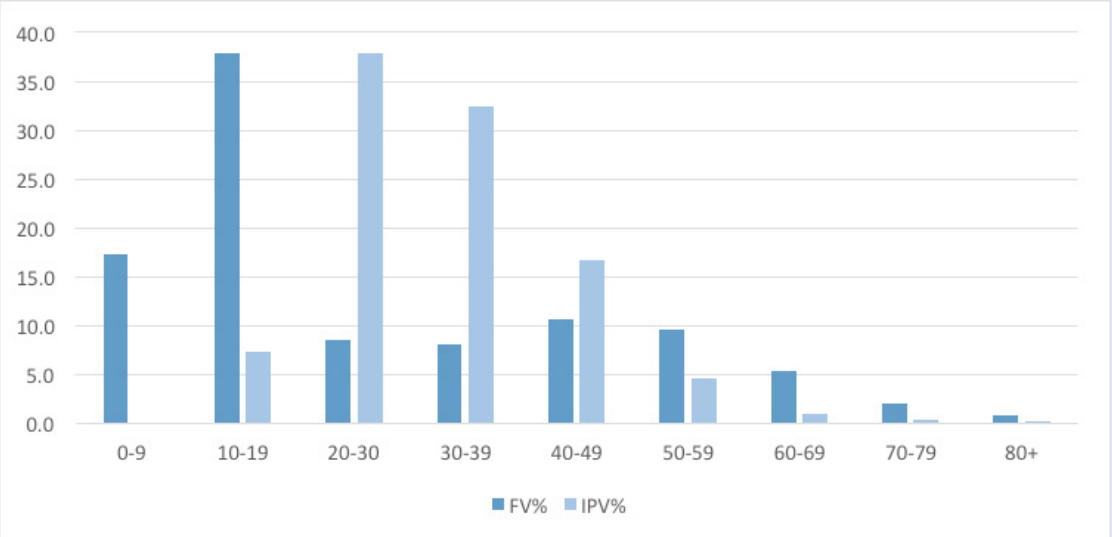
Note: type of violence was not categorised for 32 victims

A higher proportion of child victims of FV (55.5%) and IPV (97.7%) were female, with comparable levels of child victims involved in FV- and IPV-related incidents. Note that child victims were identified as those aged from zero to 19 years. As data was not available at single age level, high IPV numbers may be related to this classification.

Table 224 Proportion and gender of FV and IPV incidents involving a child victim per year, SA (n=1,731)								
	FV				IPV			
	Female		Male		Female		Male	
	n	%	n	%	n	%	n	%
2010	67	26.2	54	21.1	131	51.2	2	0.8
2011	63	24.8	34	13.4	156	61.4	1	0.4
2012	92	26.2	76	21.7	172	49.0	8	2.3
2013	91	27.7	72	21.9	159	48.3	3	0.9
2014	165	30.5	148	27.4	220	40.7	6	1.1

As shown in Figure 65, IPV victims were most likely to be aged between 20 and 40 years. A small proportion of IPV victims were younger than 20 years (7.2%), probably representing IPV incidents primarily involving parents/guardians. Compared with IPV, the proportion of FV victims was spread more evenly across age groups and included a greater proportion of victims younger than 18 years.

Figure 65 Proportion of male victims at FV, IPV and all incidents in nine age groups, SA (n=13,437)



Victim substance use

Attending police who believed person/s showed signs of being intoxicated by alcohol or drugs indicated victim alcohol and drug use. Just under half of all victims (45.6%) were noted as being unaffected by any substance (see Table 226). Intoxication status was not recorded for a quarter of victims. Attending police did not record offender alcohol and drug use. Drugs or alcohol were significantly more likely to be involved in IPV compared with FV incidents, however the size of the effect was small (p<0.001, Phi=0.06).

Table 225 Proportion of FV, IPV and all victims reported as intoxicated by attending police, SA (n=5,442)

	FV		IPV		All incidents	
	n	%	n	%	n	%
Victim influenced by alcohol	477	30.5	4,471	37.8	4,907	36.5
Victim influenced by drugs	58	3.7	477	4.0	535	4.0

Incidents

South Australian police attended 12,907 domestic violence incidents across the reporting period, including 1,525 FV and 11,354 IPV incidents. Table 226 shows the proportion of FV and IPV incidents per year. The proportion of FV incidents increased across the five-year period, while IPV reduced slightly. At all years, there was a significantly greater proportion of IPV than FV incidents (p<0.001, Phi=0.16).

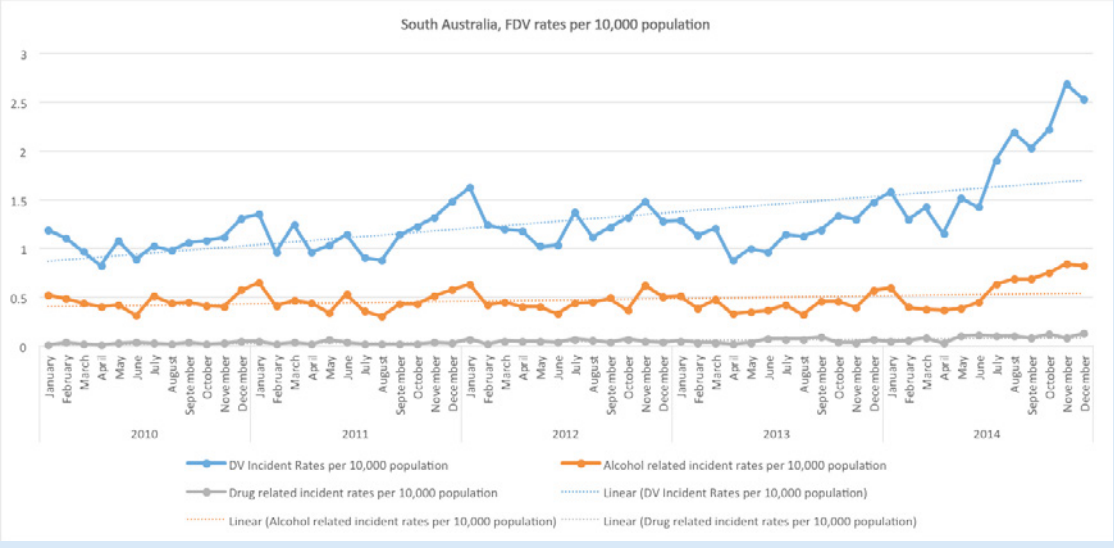
Table 226 Proportion of FV and IPV incidents per year, SA (n=12,907)

	FV		IPV		All incidents	
Year	n	%	n	%	n	Rate per 10,000
2010	132	6.4	1,931	93.5	2,065	12.6
2011	127	5.6	2,126	94.4	2,253	13.7
2012	287	11.4	2,220	88.3	2,513	15.1
2013	284	12.0	2,066	87.7	2,357	14.1
2014	695	18.7	3,011	81.0	3,719	22.0

Note: type of violence was not categorised for 28 incidents

Figure 66 shows the rates of all FDV incidents per 10,000 people have increased between 2010 and 2014. This trend is consistent for alcohol- and drug-related incidents.

Figure 66 Alcohol, drug, and all incident rates per 10,000 population over reporting period, SA



Socioeconomic disadvantage

Incident locations were classified into one of five levels of socioeconomic disadvantage according to the ABS Socio-Economic Indexes for Areas, Disadvantage scores (SEIFA)—see Table 227.

Just under a half of all incidents (47.6%) took place in areas of the greatest socioeconomic disadvantage, and the smallest proportion of incidents (5.9%) in the least disadvantaged areas of South Australia. A significant difference was evident in the proportion of IPV versus FV incidents according to area level of disadvantage ($p<0.001$, Phi=0.08).

Table 227 Proportion of FV, IPV and all incident locationsa according to socioeconomic disadvantage, SA (n=12,897)						
	FV		IPV		All incidents	
SEIFA disadvantage quintile[a]	n	%	n	%	n	%
1 (most disadvantaged)	673	44.1	5,454	48.0	6,142	47.6
2	312	20.5	2,130	18.8	2,448	19.0
3	259	17.0	1,702	15.0	1,965	15.2
4	177	11.6	1,404	12.4	1,583	12.3
5 (least disadvantaged)	104	6.8	654	5.8	759	5.9

a: postcodes were either unavailable or invalid for 10 (0.1%) incidents.

Child witnesses

Children were present at almost half of all domestic violence incidents (45.5%, n=5,877). They were significantly more likely to witness intimate partner violence than family violence incidents (p<0.001, Phi=-0.07)—see Table 228.

Table 228 Proportion of child-witnessed FV, IPV and all incidents, SA (n=12,944)						
	FV		IPV		All incidents	
	n	%	n	%	n	%
Child present	834	54.5	5,053	44.3	5,887	45.5
No child present	696	45.5	6,361	55.7	7,057	54.5

Note: type of violence was not categorised for 28 incidents

Table 229 shows that the proportion of child-witnessed FV incidents decreased between 2010 and 2014; however, proportions remained constant for IPV incidents.

Table 229 Proportion of child-witnessed FV, IPV and all incidents per year, SA (n=5,857)						
	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	105	10.6	881	89.2	988	16.9
2011	86	8.2	958	91.8	1,044	17.8
2012	151	13.2	989	86.4	1,145	19.5
2013	156	14.5	918	85.2	1,078	18.4
2014	332	20.5	1,281	79.2	1,618	27.6

Note: type of violence was not categorised for 28 incidents

Table 230 presents the proportion of child-witnessed incidents that took place across areas of relative socioeconomic disadvantage. The proportion of child-witnessed incidents significantly differed across levels of socioeconomic disadvantage (p<0.001, Phi=0.05), with greater numbers of child-witnessed incidents occurring in areas of disadvantage.

Table 230 Proportion of child-witnessed FV, IPV and all incidents according to area level of socioeconomic disadvantage, SA (n=5,852)

	FV		IPV		All incidents	
SEIFA disadvantage quintile	n	%	n	%	n	%
1 (most disadvantaged)	364	54.2	2,403	44.1	2,777	45.3
2	191	61.2	1,027	48.2	1,221	49.9
3	141	54.4	721	42.4	864	44.0
4	90	50.8	591	42.1	681	43.0
5 (least disadvantaged)	44	42.3	280	42.8	325	42.8

Note: type of violence was not categorised for 16 incidents, SEIFA was not classified for 5 incidents

As shown in Table 231, the proportion of child-witnessed incidents significantly differed across levels of offender risk assessment level ($p<0.001$, Phi=0.11).

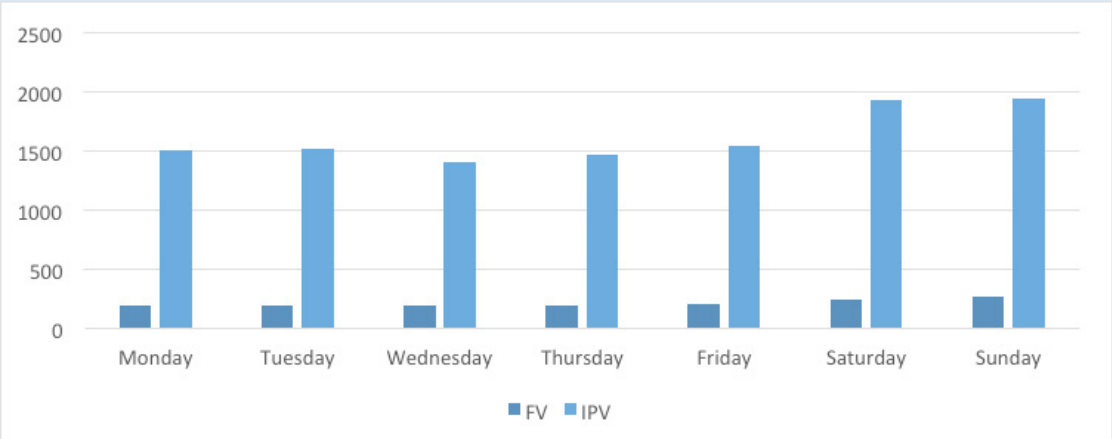
Table 231 Proportion of child-witnessed incidents according to offender risk assessment level, SA (n=12,969)

	Standard risk		Medium risk		High risk		All incidents	
	n	%	n	%	n	%	n	%
Child present	2,887	60.8	2,377	53.9	1,803	47.3	7,067	54.5
No child present	1,864	39.2	2,033	46.1	2,005	52.7	5,902	45.5

Day and time of incident

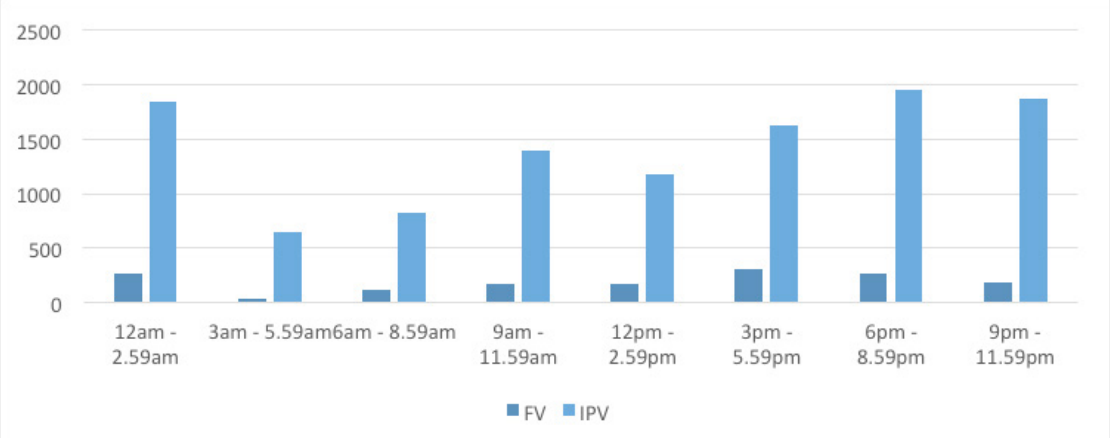
The day and time at which DV incidents occurred are shown in Figures 67 and 68, respectively. Domestic violence incidents were more likely to take place on Saturdays (17.0%) and Sundays (17.3%) than on weekdays (12.5–13.7%). This trend was consistent for both IPV and FV incidents.

Figure 67 Proportion of FV, IPV and all incidents by day of the week, SA (n=12,879)



The proportion of incidents that took place during each three-hour interval generally increased over the afternoon to early morning from 3 pm to 3 am, and decreased somewhat between 3 and 9 am (see Figure 68). Incidents were least likely to occur between 3 am and 6 am, and most likely to occur from 6 pm to 9 pm.

Figure 68 Proportion of FV, IPV and all incidents that took place during each three-hour interval, SA (n=12,879)



Offender recidivism and repeat victimisation

Of the 12,908 domestic violence incidents SA police attended across the reporting period, just under half involved recidivist offenders (45.7%) or repeat victims (40.0%). No offenders were recorded for 73 incidents. Repeat victimisation was indicated when a victim was involved in at least one other incident between 2010 and 2014. Recidivism was indicated when an offender was involved in at least one other incident during that period. Tables 232 and 233 show that the number of incidents involving either a recidivist offender or repeat victim was greatest in 2012 and 2013, and smallest in 2010. The largest number of repeat incidents by an offender was 12 and the largest number of repeat incidents for victims was 14. Intimate partner violence incidents were significantly more likely than family violence incidents to involve repeat victims ($p<0.001$, Phi=0.19); however, this was not reflected in recidivist offenders.

Table 232 Proportion of FV, IPV and all incidents involving recidivist offenders, SA (n=5,905)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	74	8.2	828	91.7	903	15.3
2011	60	5.8	982	94.2	1,042	17.6
2012	126	10.5	1,076	89.4	1,204	20.4
2013	123	10.9	997	88.7	1,124	19.0
2014	304	18.6	1,321	80.9	1,632	27.6

Note: type of violence was not categorised for 14 incidents. All incidents in table reflect recidivist offenders

Table 233 Proportion of FV, IPV and all incidents involving repeat victims, SA (n=5,156)

	FV		IPV		All incidents	
Year	n	%	n	%	n	%
2010	20	2.5	776	97.5	796	15.4
2011	17	1.8	946	98.2	963	18.7
2012	43	4.0	1,031	96.0	1,074	20.8
2013	36	3.7	945	96.0	984	19.1
2014	105	7.8	1,237	92.0	1,345	26.1

Note: type of violence was not categorised for 6 incidents. All incidents in table reflect repeat victims

Substance involvement

Compared with incidents not flagged as alcohol- or drug-related, a significantly greater proportion of substance-related incidents involved a recidivist offender ($p<0.001$, Phi=0.07) or repeat victim ($p<0.001$, Phi=0.08).

Socioeconomic disadvantage

Table 234 shows that incidents involving either recidivist offenders or repeat victims varied across areas of socioeconomic disadvantage. Incidents involving recidivist offenders most often took place in areas of most disadvantage, and least often in areas of least disadvantage. Incidents involving repeat victims showed a similar pattern.

Table 234 Proportion of incidents involving repeat victims and repeat offenders according to socioeconomic disadvantage

	Repeat victim		Repeat offender	
SEIFA disadvantage quintile	n	%	n	%
1 (most disadvantaged)	2,818	45.9	3,160	51.4
2	897	36.6	1,063	43.4
3	719	36.6	835	42.5
4	509	32.2	585	37.0
5 (least disadvantaged)	217	28.6	260	34.3

Child witnesses

Less than half (45.8%) of child-witnessed incidents involved either a recidivist offender or repeat victim. Children were significantly more likely to witness incidents involving repeat victims ($p<0.001$, Phi=-0.05), but not recidivist offenders ($p>0.05$).

Day of the week

The proportion of incidents involving recidivist offenders or repeat victims was generally consistent across day of the week, with slightly higher rates on Saturday and Sunday.

Time of day

The proportion of incidents involving either recidivist offenders or repeat victims was greatest between 9 pm and 3 am and relatively similar at all other times.

Multivariate correlates of incident characteristics

The following outlines multivariate predictors of domestic violence incident characteristics. A series of multivariate models were conducted to examine the key person and incident characteristics that contributed unique variance to predicting:

- alcohol involvement;
- drug involvement;
- child witnesses;
- offender recidivism; and
- repeat victimisation.

Multivariate logistic regression models were conducted for all incidents and separately for FV and IPV incidents. Due to increased sensitivity of the Hosmer and Lemeshow Test of model fit with larger sample sizes, researchers referred to the Omnibus Tests of Model Coefficients to interpret model fit for all models.

Victim alcohol involvement

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; drug use; child presence at the incident; repeat offender; and repeat victim factors—contributed unique variance to predicting whether an incident was flagged as victim alcohol-related (no vs yes) at all incidents (Table 235), IPV incidents (Table 236) and FV incidents (Table 237).

All incidents

In the fully adjusted model (Step 3), incidents that involved repeat victims or offenders were 1.15 and 1.19 times more likely to be flagged as victim alcohol-related, while child presence or drug presence at the incident decreased the likelihood that an incident was victim alcohol-related by almost half (OR=0.62 and OR=0.01). The SEIFA disadvantage quintiles did not predict a greater likelihood of victim alcohol involvement.

Overall, the model accounted for nine to 12 percent of the variance in whether or not an incident was victim alcohol-related (Cox & Snell R Square=0.09; Negelkerke R Square=0.12) and correctly predicted 63.6 percent of victim alcohol-related incidents (53.2% of victim alcohol-unrelated incidents). All three steps significantly contributed to predicting victim alcohol-related incidents ($p<0.001$).

Intimate partner violence incidents

In the fully adjusted model (Step 3), incidents that involved repeat offenders were 1.18 times more likely to be victim alcohol-related, while child presence or drug presence at the incident decreased the likelihood that an incident involved alcohol (OR=0.59 and OR=0.01). The SEIFA disadvantage quintiles did not predict a greater likelihood of victim alcohol involvement.

Overall, the model accounted for nine to 12 percent of the variance in whether or not an incident was alcohol-related (Cox & Snell R Square=0.09; Negelkerke R Square=0.12) and correctly predicted 70.0 percent of victim alcohol-related IPV incidents (47.2% of alcohol-unrelated incidents). All three steps significantly contributed to predicting victim alcohol-related incidents ($p<0.001$).

Family violence incidents

In the fully adjusted model (Step 3), incidents that involved repeat offenders or repeat victims were 1.32 and 0.67 times more likely to be victim alcohol-related. The SEIFA disadvantage quintiles did not predict a greater likelihood of victim alcohol involvement.

Overall, the model accounted for eight to 10 percent of the variance in whether or not a family violence incident was victim alcohol-related (Cox & Snell R Square=0.08; Negelkerke R Square=0.10) and correctly predicted only 2.7 percent of victim alcohol-related FV incidents (but 98.8% of alcohol-unrelated incidents). Only Steps 2 and 3 accounted for significant variance in predicting victim alcohol-related FV incidents ($p<0.001$).

Table 235 Binary logistic regression predicting victim alcohol use at incident, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.22	5.94	1.25*	1.05–1.49	0.17	3.51	1.19	0.99–1.42	0.17	3.11	1.18	0.98–1.42
2	-0.01	0.01	0.99	0.82–1.2	-0.01	0.02	0.99	0.81–1.2	-0.01	0.02	0.99	0.81–1.2
3	0.03	0.11	1.03	0.85–1.26	0.01	0.01	1.01	0.83–1.23	0.02	0.02	1.02	0.83–1.25
4	-0.11	1.15	0.9	0.73–1.1	-0.13	1.63	0.88	0.71–1.07	-0.13	1.53	0.88	0.71–1.08
5[a] (least disadvantage)												
Child present at incident (yes)					-0.44	113.41	0.64***	0.59–0.7	-0.48	124.79	0.62***	0.57–0.67
Repeat offender (yes)					0.15	5.38	1.16*	1.02–1.32	0.17	6.61	1.19**	1.04–1.35
Repeat victim (yes)					0.11	2.51	1.11	0.98–1.27	0.14	3.99	1.15*	1–1.31
Victim drug involvement (yes)									-4.77	112.23	0.01***	0–0.02

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 236 Binary logistic regression predicting victim alcohol use intimate partner violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.25	6.35	1.28*	1.06–1.55	0.19	3.81	1.21	1–1.47	0.20	3.76	1.22	1–1.48
2	0.03	0.10	1.03	0.84–1.27	0.03	0.06	1.03	0.83–1.26	0.03	0.06	1.03	0.83–1.27
3	0.05	0.21	1.05	0.85–1.3	0.02	0.03	1.02	0.82–1.26	0.04	0.11	1.04	0.83–1.29
4	-0.10	0.82	0.91	0.73–1.12	-0.13	1.34	0.88	0.71–1.09	-0.12	1.02	0.89	0.71–1.12
5[a] (least disadvantage)												
Child present at incident (yes)					-0.50	127.94	0.61***	0.56–0.66	-0.52	133.79	0.59***	0.54–0.65
Repeat offender (yes)					0.16	3.77	1.17	1–1.37	0.16	3.86	1.18*	1–1.38
Repeat victim (yes)					0.08	1.07	1.09	0.93–1.27	0.13	2.56	1.14	0.97–1.34
Victim drug involvement (yes)									-4.67	107.42	0.01***	0–0.02

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Table 237 Binary logistic regression predicting victim alcohol use family violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.06	0.06	0.94	0.56–1.58	-0.07	0.07	0.93	0.55–1.57	-0.13	0.21	0.88	0.51–1.52
2	-0.33	1.36	0.72	0.41–1.26	-0.37	1.65	0.69	0.39–1.22	-0.37	1.54	0.69	0.38–1.24
3	-0.11	0.14	0.9	0.51–1.59	-0.12	0.15	0.89	0.5–1.58	-0.15	0.25	0.86	0.47–1.55
4	-0.33	1.10	0.72	0.39–1.33	-0.35	1.21	0.71	0.38–1.31	-0.41	1.57	0.67	0.35–1.26
5[a] (least disadvantage)												
Child present at incident (yes)					0.12	0.77	1.12	0.87–1.46	0.01	0.01	1.01	0.78–1.32
Repeat offender (yes)					0.24	3.19	1.27	0.98–1.65	0.28	4.06	1.32*	1.01–1.72
Repeat victim (yes)					-0.38	3.85	0.68*	0.47–1	-0.40	4.07	0.67*	0.45–0.99
Victim drug involvement (yes)									-20.85	0.00	0	0–0

* statistically significant at $p<0.05$.

a: reference category

Child witness

Three separate binary logistic regressions were performed to examine—if the SEIFA disadvantage quintile; whether an incident was alcohol-related, drug-related, involved a repeat offender, or involved a repeat victim—contributed unique variance to predicting child presence (no vs yes) at all incidents (Table 238), IPV incidents (Table 239) and FV incidents (Table 240).

All incidents

In the fully adjusted model (Step 3), all predictors except the first, third and fourth quintiles of the SEIFA disadvantage index were significantly associated with child presence. Incidents occurring at the second quintile of disadvantage were significantly more likely to be witnessed by children (OR=1.28). If the incident involved a repeat offender, the odds of a child being present were increased by 1.86. However, repeat victim involvement, alcohol and drug involvement decreased the likelihood that a child was present at the incident (OR=0.50; OR=0.62; OR=0.71).

The final model accounted for three to four percent of the variance in child presence at the incident (Cox & Snell R Square=0.03; Negelkerke R Square=0.04) and correctly predicted 33.2 percent of incidents children witnessed (and 78.8% of incidents that children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), the involvement of a repeat offender increased the odds of a child being present (OR=1.50). However, the presence of a repeat victim, alcohol or drugs decreased the likelihood that children witnessed the incident (OR=0.62; OR=0.59; OR=0.77).

The final model accounted for two to three percent of the variance in child presence at the incident (Cox & Snell R Square=0.02; Negelkerke R Square=0.03) and correctly predicted 28.0 percent of incidents witnessed by children (and 80.9% of incidents children did not witness). Each step accounted for significant variance in predicting child presence at incidents (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), the presence of repeat offenders, repeat victims and drugs, as well as the second quintile of SEIFA disadvantage were significantly associated with child presence. Compared with incidents that occurred in other areas of disadvantage, children in the second quintile were 1.28 more likely to witness incidents. If the incident involved a repeat victim or a repeat offender, the odds of a child being present increased by 2.50 and 0.34, respectively. The involvement of drugs decreased the likelihood that a child witnessed the incident (OR=0.38).

The final model accounted for eight to 10 percent of the variance in child presence at the incident (Cox & Snell R Square=0.08; Negelkerke R Square=0.10) and correctly predicted 62.5 percent of incidents children witnessed (and 58.6% of incidents children did not witness). Steps 2 and 3 accounted for significant variance in predicting child presence at incidents (ps<0.001).

Table 238 Binary logistic regression predicting child presence at incident, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.00	0.00	1	0.84–1.2	0.03	0.10	1.03	0.86–1.23	0.05	0.27	1.05	0.87–1.26
2	0.23	5.60	1.26*	1.04–1.53	0.25	6.13	1.28*	1.05–1.55	0.24	6.01	1.28*	1.05–1.55
3	-0.03	0.08	0.97	0.8–1.19	-0.02	0.03	0.98	0.81–1.2	-0.02	0.02	0.99	0.81–1.2
4	-0.07	0.47	0.93	0.76–1.14	-0.06	0.34	0.94	0.77–1.16	-0.07	0.50	0.93	0.76–1.14
5[a] (least disadvantage)												
Repeat offender (yes)					0.60	80.76	1.82***	1.6–2.08	0.62	84.89	1.86***	1.63–2.12
Repeat victim (yes)					-0.71	107.45	0.49***	0.43–0.56	-0.69	101.06	0.50***	0.44–0.57
Victim alcohol involvement (yes)					-0.24	7.60	0.79**	0–0	-0.48	125.33	0.62***	0.57–0.67
Victim drug involvement (yes)									-0.34	13.18	0.71***	0.59–0.85

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 239 Binary logistic regression predicting child presence at intimate partner violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.04	0.18	0.96	0.79–1.16	-0.02	0.03	0.98	0.81–1.19	0.01	0.01	1.01	0.83–1.22
2	0.17	2.74	1.19	0.97–1.46	0.19	3.23	1.21	0.98–1.49	0.19	3.31	1.21	0.99–1.49
3	-0.10	0.92	0.9	0.73–1.12	-0.09	0.72	0.91	0.74–1.13	-0.09	0.64	0.92	0.74–1.14
4	-0.12	1.25	0.88	0.71–1.1	-0.12	1.10	0.89	0.72–1.11	-0.13	1.35	0.88	0.7–1.09
5[a] (least disadvantage)												
Repeat offender (yes)					0.39	22.90	1.48***	1.26–1.73	0.41	24.86	1.50***	1.28–1.77
Repeat victim (yes)					-0.49	35.60	0.61***	0.52–0.72	-0.47	32.72	0.62***	0.53–0.73
Victim alcohol involvement (yes)					-0.21	5.08	0.81*	0–0	-0.53	134.39	0.59***	0.54–0.65
Victim drug involvement (yes)									-0.26	6.49	0.77*	0.63–0.94

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Table 240 Binary logistic regression predicting child presence at family violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.39	2.14	1.48	0.88–2.49	0.39	2.03	1.48	0.86–2.53	0.37	1.82	1.45	0.84–2.5
2	0.71	6.24	2.04*	1.17–3.56	0.68	5.45	1.98*	1.12–3.51	0.70	5.60	2.02*	1.13–3.6
3	0.52	3.24	1.68	0.96–2.97	0.55	3.42	1.74	0.97–3.11	0.54	3.20	1.71	0.95–3.09
4	0.44	2.00	1.54	0.85–2.82	0.44	1.89	1.55	0.83–2.87	0.42	1.73	1.52	0.81–2.85
5[a] (least disadvantage)												
Repeat offender (yes)					0.90	44.52	2.47***	1.89–3.22	0.92	45.07	2.50***	1.92–3.27
Repeat victim (yes)					-1.09	31.78	0.34***	0.23–0.49	-1.09	31.36	0.34***	0.23–0.49
Victim alcohol involvement (yes)					-0.54	4.31	0.58*	0–0	0.01	0.01	1.01	0.78–1.32
Victim drug involvement (yes)									-0.98	12.31	0.38***	0.22–0.65

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Offender recidivism

Three separate binary logistic regressions were performed to examine if—the SEIFA disadvantage quintile; alcohol involvement; and child presence—contributed unique variance to the involvement of repeat offenders (no vs yes) at all incidents (Table 241), IPV incidents (Table 242) and FV incidents (Table 243). Repeat victim was removed as a predictor due to multicollinearity.

All incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with the involvement of a repeat offender. Compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of greater disadvantage were significantly more likely to involve a repeat offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. Victim alcohol (OR=1.32), and drug involvement (OR=1.52) were both associated with a greater likelihood that the incident involved a repeat offender, as well as the presence of a child at the incident (OR=1.11).

The final model accounted for two to three percent of the variance in predicting whether or not the incident involved a repeat offender (Cox & Snell R Square=0.2; Negelkerke R Square=0.3) and correctly predicted 33.7 percent of incidents that involved repeat offenders (and 76.8% of incidents that did not involve repeat offenders). Steps 1 and 3 accounted for significant variance in predicting involvement of a repeat offender (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), all predictors except child presence and the 4th SEIFA quintile were significantly associated with involvement of a repeat offender. Compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of relative disadvantage were significantly more likely to involve a repeat offender. Victim alcohol (OR=1.31) and victim drug involvement (OR=1.56), were each associated with a greater likelihood that the incident involved a repeat offender.

The final model accounted for three to four percent of the variance in predicting incidents involving a repeat offender (Cox & Snell R Square=0.03; Negelkerke R Square=0.04) and correctly predicted 34.7 percent of incidents that involved repeat offenders (and 76.9% of incidents that did not involve repeat offenders). Steps 1 and 3 accounted for significant variance in involvement of a repeat offender (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), only having a child present was significantly associated with a greater likelihood that the incident involved a repeat offender (OR=2.07).

The final model accounted for four to five percent of the variance in predicting whether or not a FV incident involved a repeat offender (Cox & Snell R Square=0.04; Negelkerke R Square=0.05) and correctly predicted 57.1 percent of incidents involving repeat offenders (and 60.0% of incidents not involving repeat offenders). Only Step 2 accounted for significant variance in the prediction in involvement of a repeat offender (p<0.001).

Table 241 Binary logistic regression predicting repeat offender involvement in all incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.85	75.62	2.34***	1.93–2.84	0.85	75.64	2.34***	1.94–2.84	0.84	73.46	2.32***	1.91–2.81
2	0.53	25.78	1.7***	1.39–2.09	0.53	25.41	1.7***	1.38–2.08	0.53	25.26	1.69***	1.38–2.08
3	0.35	10.48	1.42***	1.15–1.75	0.35	10.52	1.42***	1.15–1.75	0.35	10.33	1.42***	1.15–1.75
4	0.22	3.74	1.24	1–1.54	0.22	3.78	1.24	1–1.54	0.22	3.97	1.25*	1–1.55
5[a] (least disadvantage)												
Child present at incident (yes)					0.07	2.57	1.07	0.99–1.16	0.10	5.68	1.11*	1.02–1.2
Victim Alcohol involvement (yes)									0.28	40.98	1.32***	1.21–1.43
Victim Drug involvement (yes)									0.42	19.89	1.52***	1.27–1.83

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Table 242 Binary logistic regression predicting repeat offender involvement in intimate partner violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.90	74.20	2.47***	2.01–3.04	0.90	74.17	2.47***	2.01–3.04	0.89	71.68	2.44***	1.98–3
2	0.54	22.89	1.71***	1.37–2.13	0.54	22.95	1.71***	1.37–2.13	0.54	22.56	1.71***	1.37–2.13
3	0.32	7.65	1.38**	1.1–1.73	0.32	7.63	1.38**	1.1–1.73	0.32	7.36	1.37**	1.09–1.72
4	0.21	3.23	1.24	0.98–1.56	0.21	3.21	1.24	0.98–1.56	0.22	3.29	1.24	0.98–1.57
5[a] (least disadvantage)												
Child present at incident (yes)					-0.02	0.13	0.98	0.9–1.07	0.02	0.17	1.02	0.93–1.11
Alcohol present at incident (yes)									0.27	35.40	1.31***	1.2–1.44
Drugs present at incident (yes)									0.45	19.29	1.56***	1.28–1.9

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 243 Binary logistic regression predicting repeat offender involvement in family violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.48	2.95	1.61	0.94–2.78	0.42	2.23	1.52	0.88–2.65	0.44	2.39	1.55	0.89–2.69
2	0.53	3.24	1.7	0.95–3.02	0.42	1.95	1.52	0.85–2.73	0.44	2.11	1.55	0.86–2.78
3	0.56	3.54	1.76	0.98–3.16	0.49	2.56	1.63	0.9–2.95	0.50	2.72	1.65	0.91–3.01
4	0.34	1.10	1.4	0.75–2.61	0.27	0.67	1.3	0.69–2.46	0.29	0.82	1.34	0.71–2.53
5[a] (least disadvantage)												
Child present at incident (yes)					0.72	31.44	2.05***	1.59–2.63	0.73	31.98	2.07***	1.61–2.67
Alcohol present at incident (yes)									0.22	2.61	1.24	0.96–1.61
Drugs present at incident (yes)									0.36	1.91	1.44	0.86–2.41

*** statistically significant at $p<0.001$

a: reference category

Repeat victims

Three separate binary logistic regressions were performed to determine if—the SEIFA disadvantage quintile; alcohol involvement; drug involvement; child presence; and involvement of repeat offenders—contributed unique variance to predicting the involvement of repeat victims (no vs yes) at all incidents (Table 244), IPV incidents (Table 245) and FV incidents (Table 246). 'Repeat offender' was removed as a predictor in repeat victim models due to multicollinearity.

All incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with involvement of a repeat victim. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater disadvantage. Victim alcohol (OR=1.31) or drug involvement (OR=1.57) was also associated with a greater likelihood that the incident involved a repeat victim; however, the presence of a child at the incident reduced the likelihood of the incident involving a repeat victim (OR=0.82).

The final model accounted for three to four percent of the variance in predicting whether or not the incident involved a repeat victim (Cox & Snell R Square=0.03; Negelkerke R Square=0.04) and correctly predicted 23.4 percent of incidents involving repeat victims (and 87.1% of incidents not involving repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Intimate partner violence incidents

In the fully adjusted model (Step 3), all predictors were significantly associated with whether or not an incident involved a repeat victim. Compared with incidents occurring in areas of least disadvantage, those that occurred in areas of greater disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing with greater disadvantage. Victim alcohol (OR=1.31) or drug involvement (OR=1.68) was also associated with a greater likelihood that the incident involved a repeat victim. A child being present at the incident reduced the likelihood of the incident involving a repeat victim (OR=0.88).

The final model accounted for three to four percent of the variance in predicting incidents involving a repeat victim (Cox & Snell R Square=0.03; Negelkerke R Square=0.04) and correctly predicted 25.4 percent of incidents that involved repeat victims (and 85.9% of incidents that did not involve repeat victims). Each step accounted for significant variance in predicting involvement of a repeat victim (ps<0.001).

Family violence incidents

In the fully adjusted model (Step 3), only incidents occurring within the third SEIFA quintile (OR=3.13) and incidents where children were present were significantly associated with whether or not an incident involved a repeat victim, with a child being present, reducing the likelihood of a repeat victim being involved (OR=0.46).

The final model accounted for three to five percent of the variance in predicting whether or not an incident involved a repeat victim (Cox & Snell R Square=0.03; Negelkerke R Square=0.05) and correctly predicted zero percent of incidents involving repeat victims (100% of incidents not involving repeat victims). Only Step 2 accounted for significant variance in the model (p<0.001).

Table 244 Binary logistic regression predicting repeat victim involvement in all incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.95	83.48	2.6***	2.12–3.19	0.96	83.77	2.6***	2.12–3.2	0.95	81.75	2.58***	2.1–3.17
2	0.57	25.78	1.76***	1.42–2.19	0.58	27.10	1.79***	1.44–2.22	0.58	26.98	1.79***	1.44–2.22
3	0.42	13.31	1.52***	1.21–1.9	0.42	13.24	1.52***	1.21–1.9	0.42	13.08	1.52***	1.21–1.9
4	0.29	5.80	1.33*	1.06–1.68	0.28	5.65	1.33*	1.05–1.67	0.29	5.91	1.33*	1.06–1.68
5[a] (least disadvantage)												
Child present at incident (yes)					-0.24	30.48	0.79***	0.73–0.86	-0.20	22.40	0.82***	0.75–0.89
Victim alcohol involvement (yes)									0.27	38.46	1.31***	1.21–1.43
Victim drug involvement (yes)									0.45	22.48	1.57***	1.3–1.89

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Table 245 Binary logistic regression predicting repeat victim involvement in intimate partner violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.96	79.13	2.62***	2.12–3.24	0.96	78.99	2.62***	2.12–3.24	0.95	76.57	2.59***	2.09–3.2
2	0.58	25.43	1.79***	1.43–2.25	0.59	26.07	1.81***	1.44–2.27	0.59	25.68	1.8***	1.43–2.26
3	0.39	10.41	1.47***	1.16–1.86	0.38	10.20	1.46***	1.16–1.85	0.38	9.88	1.46**	1.15–1.84
4	0.26	4.41	1.29*	1.02–1.64	0.25	4.25	1.29*	1.01–1.64	0.26	4.32	1.29*	1.02–1.64
5[a] (least disadvantage)												
Child present at incident (yes)					-0.16	13.10	0.85***	0.78–0.93	-0.13	8.14	0.88**	0.8–0.96
Victim alcohol involvement (yes)									0.27	34.16	1.31***	1.2–1.43
Victim drug involvement (yes)									0.52	25.82	1.68***	1.37–2.04

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Table 246 Binary logistic regression predicting repeat victim involvement in family violence incidents, SA

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.80	2.72	2.22	0.86–5.72	0.88	3.28	2.41	0.93–6.25	0.88	3.24	2.4	0.93–6.23
2	0.49	0.93	1.64	0.6–4.44	0.63	1.52	1.88	0.69–5.15	0.61	1.39	1.84	0.67–5.03
3	1.04	4.30	2.83*	1.06–7.56	1.15	5.22	3.17*	1.18–8.54	1.14	5.09	3.13*	1.16–8.44
4	0.52	0.92	1.68	0.58–4.84	0.61	1.24	1.83	0.63–5.32	0.58	1.13	1.78	0.61–5.19
5[a] (least disadvantage)												
Child present at incident (yes)					-0.78	18.42	0.46***	0.32–0.65	-0.78	17.90	0.46***	0.32–0.66
Victim alcohol involvement (yes)									-0.32	2.65	0.73	0.5–1.07
Victim drug involvement (yes)									-0.10	0.08	0.9	0.45–1.81

* statistically significant at $p<0.05$.. *** statistically significant at $p<0.001$

a: reference category

SA summary

Individuals

In SA, most offenders were male (91.1%) falling into the 30 to 34 year age category, and most victims were female (89.1%) in the 25 to 49 year age group.

Offenders were mostly involved in IPV-related incidences (88.4%), with most IPV incidents involving males (92.5%). Most victims were involved in incidences that were IPV-related (88.3%), with most IPV incidences involving female victims (92.6%).

The SEIFA disadvantage index shows the proportion of SA incidents was greatest in areas of greatest disadvantage (1st quintile 47.6%, 5th quintile 5.9%).

Alcohol-related incidents were only recorded for victims in South Australia. Just under half of all victims (45.6%) were noted as being unaffected by any substance, with significantly higher proportions of victims in IPV-related incidences being affected by alcohol (90.9%).

Incident trends

Between 2010 and 2014, of the 12,907 domestic violence incidents attended by police, 11,354 (88.0%) were IPV-related and 1,525 (11.8%) were FV-related. The highest proportions of IPV-related incidents were recorded in 2011 (94.4%), with incidents decreasing across time; however, the highest FV proportions were recorded in 2014 (18.7%) with incidents increasing across time.

Children witnessing DV incidents occurred at significantly higher levels for IPV (85.8%) compared with FV (14.2%), and were relatively stable across time. The highest proportions of child-witnessed incidents occurred in 2011 for IPV (91.8%), and 2014 for FV (20.5%).

Less than half of all incidents involved recidivist offenders (45.7%) or repeat victims (40.0%), with the higher proportions of incidents involving a recidivist offender in 2014 (27.6%), and smallest in 2010 (15.3%). Intimate partner violence incidents were significantly more likely than FV incidents to involve repeat victims ($p<0.001$, Phi=0.19), but this was not reflected in recidivist offenders.

Domestic violence incidents were more likely to take place on Saturdays (17.0%) and Sundays (17.3%) than on weekdays (12.5–13.7%). This trend was consistent for both IPV and FV incidents. The proportion of incidents that took place during each three-hour interval generally increased over the afternoon to early morning from 3 pm to 3 am, and decreased somewhat between 3 and 9 am.

Key correlates of domestic violence

When predicting victim alcohol involvement across all incidents, repeat victims or offenders were 1.15 and 1.19 times more likely to be flagged as victim alcohol-related, while child presence or drug presence at the incident decreased the likelihood that an incident was victim alcohol-related by almost half (OR=0.62 and OR=0.01). Intimate partner violence incidents involving repeat offenders were 1.18 times more likely to be victim alcohol-related, while child presence or drug presence at the incident decreased the likelihood that an incident involved alcohol (OR=0.59 and OR=0.01). In family violence incidents, if it involved a repeat offender or repeat victim, incidents were 1.32 and 0.67 times more likely to be victim alcohol-related.

When predicting child witnessing across all incidents, all predictors except the first, third and fourth quintiles of the SEIFA disadvantage index were significantly associated with the presence of a child. Incidents occurring at the second quintile of disadvantage were significantly more likely to be witnessed by children (OR=1.28). If the incident involved a repeat offender, the odds of a child being present were increased by 1.86. However, the involvement of a repeat victim, alcohol and drugs decreased the likelihood that a child was present at the incident (OR=0.50; OR=0.62; OR=0.71). Intimate partner violence incidents involving a repeat offender increased the odds of a child being present (OR=1.5); however, the presence of a repeat victim, alcohol, or drugs, decreased the likelihood that children witnessed the incident (OR=0.62; OR=0.59; OR=0.77). In family violence incidents, the presence of repeat offenders, repeat victims, and drugs, as well as the second quintile of SEIFA disadvantage were significantly associated with child presence. Compared with incidents that occurred in other areas of disadvantage, children in the second quintile were 1.28 more likely to witness incidents. If the incident involved a repeat victim or a repeat offender, the odds of a child being present increased by 2.50 and 0.34, respectively. Drug involvement decreased the likelihood of a child witnessing the incident (OR=0.38).

When predicting offender recidivism across all incidents, victim alcohol (OR=1.32) and drug involvement (OR=1.52) were both associated with a greater likelihood that the incident involved a repeat offender, as well as child presence at the incident (OR=1.11). Compared with incidents that occurred in areas of least disadvantage, incidents that occurred in areas of greater disadvantage were significantly more likely to involve a repeat offender, with the size of the odds ratio increasing across areas of greater relative disadvantage. Intimate partner violence incidents concerning victim alcohol (OR=1.31) and victim drug involvement (OR=1.56), were each associated with a greater likelihood that the incident involved a repeat offender. In FV incidents, only the presence of a child was significantly associated with a greater likelihood that the incident involved a repeat offender (OR=2.07).

When predicting repeat victimisation across all incidents, all predictors were significantly associated with the involvement of a repeat victim. Compared with incidents that occurred in areas of least disadvantage, those that occurred in areas of relative disadvantage were significantly more likely to involve a repeat victim, with the size of the odds ratio increasing across areas of greater disadvantage. Victim alcohol (OR=1.31) or drug involvement (OR=1.57) was also associated with a greater likelihood that the incident involved a repeat victim. However, child presence at the incident reduced the likelihood of the incident involving a repeat victim (OR=0.82). Incidents of intimate partner violence involving victim alcohol (OR=1.31) or drug involvement (OR=1.68) were associated with a greater likelihood that the incident involved a repeat victim; however, child presence at the incident reduced the likelihood of the incident involving a repeat victim (OR=0.88). In family violence incidents, only those occurring within the third SEIFA quintile (OR=3.13) and incidents where children were present were significantly associated with whether or not an incident involved a repeat victim, with the presence of a child reducing the likelihood of a repeat victim being involved (OR=0.46).

Tasmania police data results

The following explores trends in incidents of intimate partner violence attended by Tasmanian police between 1 July 2009 and 30 June 2014. Trends are presented separately for individuals and incidents. These findings relate to incidents involving intimate partners only.

Individuals

Demographic data are presented firstly for offenders and then victims.

Offenders

Across the reporting period there were 13,732 offenders, including 11,419 (83.2%) males and 2,305 (16.8%) females, and eight offenders whose gender was not recorded. Most incidents involved only one offender (96.1%), but the Tasmania Police family violence management system has only allowed more than one offender per report to be recorded since 15 October 2011.

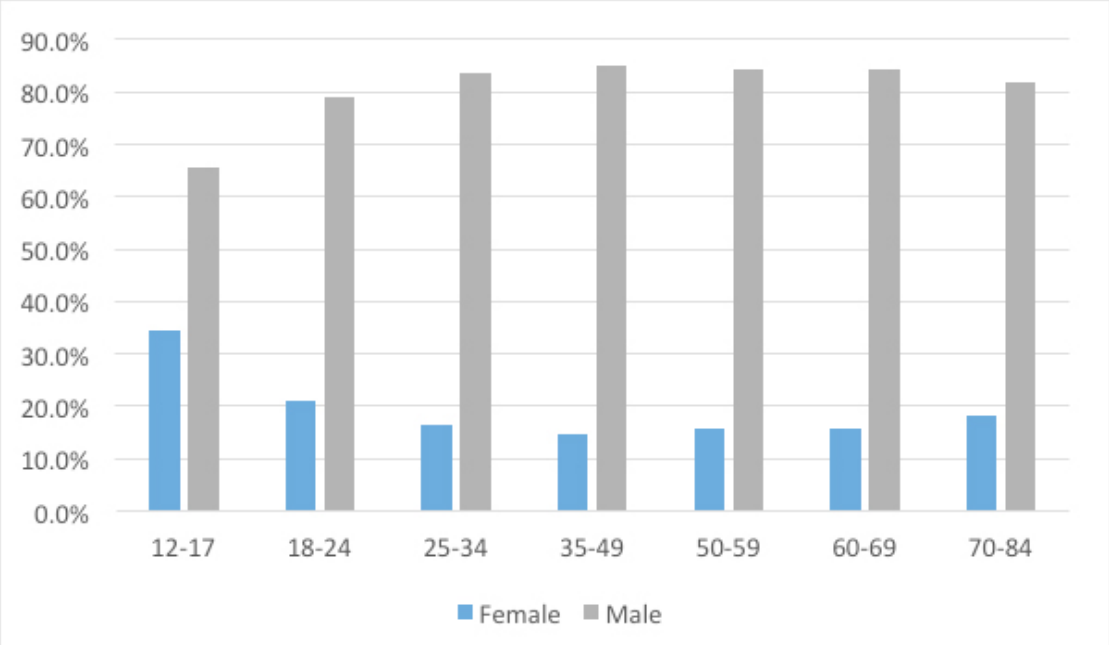
Table 247 presents the proportion of offenders within each age group (excluding offenders with missing or invalid age/sex data, n=90). Most offenders were aged between 25 and 49 years.

Table 247 Proportion of female and male offenders by age group, Tas (n=13,642)

	Female		Male		All offenders	
Age (years)	n	%	n	%	n	%
12–17	40	1.7	76	0.7	116	0.9
18–24	546	23.8	2,072	18.3	2,619	19.2
25–34	808	35.3	4,119	36.3	4,928	36.1
35–49	717	31.3	4,127	36.4	4,847	35.5
50–59	139	6.1	748	6.6	887	6.5
60–69	32	1.4	171	1.5	203	1.5
70–84	8	0.3	36	0.3	44	0.3
85+	0	0.0	3	<0.1	5	<0.01

Figure 69 presents the proportion of offenders who were male, and offender within each age group (excluding those aged over 85 years as there were only three offenders in this group). Across each age group most of the offenders were male (65–85%).

Figure 69 Proportion of male and female offenders by age group and gender, Tas (n=13,639)



Victims

A total of 12,656 victims were recorded at IPV incidents in Tasmania during the reporting period, including 10,796 (85.4%) females, 1,853 (14.6%) males, and seven victims whose gender was not recorded.

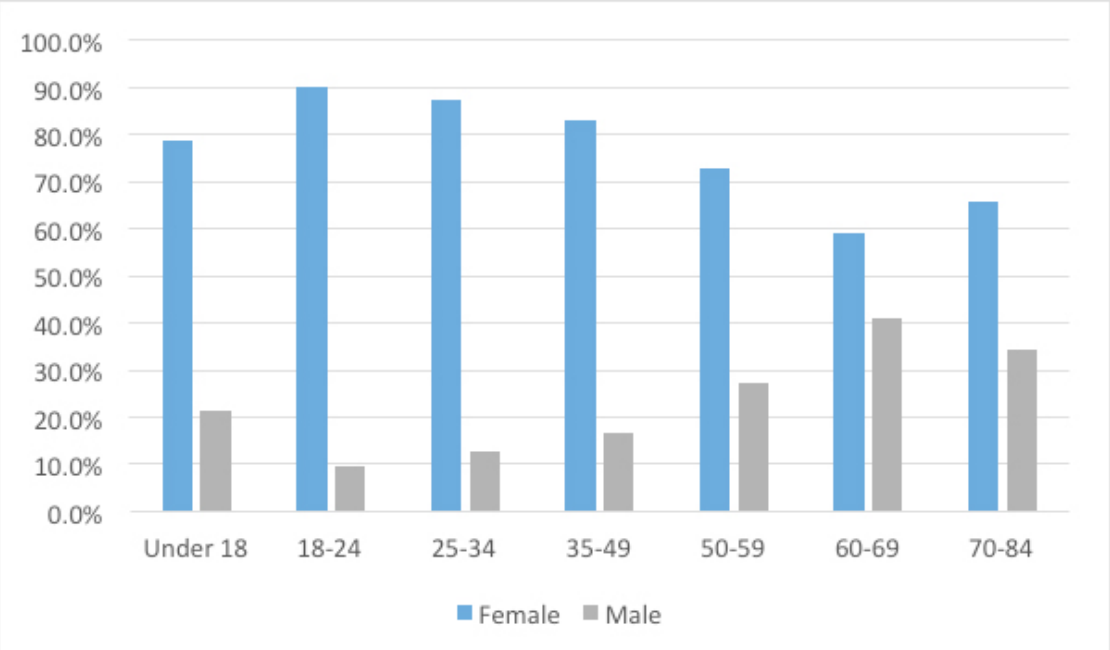
Table 248 shows the proportion of victims within each age group (excluding victim with missing or invalid age/sex data, n=113). The greatest proportion of female victims was aged between 25 and 34 years, while the greatest proportion of male victims was between 35 and 49 years. The smallest proportion of female and male victims was aged from 70 to 84 years (0.3%).

Table 248 Proportion of female and male victims by age group, Tas (n=12,543)

	Female		Male		All Victims	
Age (years)	n	%	n	%	n	%
Under 18	247	2.3	67	3.7	314	2.5
18–24	2,785	26.0	298	16.3	3,086	24.6
25–34	3,833	35.8	553	30.2	4,386	35.0
35–49	3,265	30.5	661	36.1	3,928	31.3
50–59	455	4.2	171	9.3	626	5.0
60–69	102	1.0	71	3.9	174	1.4
70–84	23	0.2	12	0.7	36	0.3

Figure 70 shows the proportion of victims within each group who were female and male. Females comprised most victims across each age group; however, the proportion of victims that were male increased as the age group increased.

Figure 70 Proportion of victims by age group and gender, Tas (n=12,543)



Incidents

Tasmanian police recorded 13,097 incidents of intimate partner violence between 1 July 2009 and 30 June 2014. Table 249 shows the proportion and rate per 10,000 of IPV incidents per year.

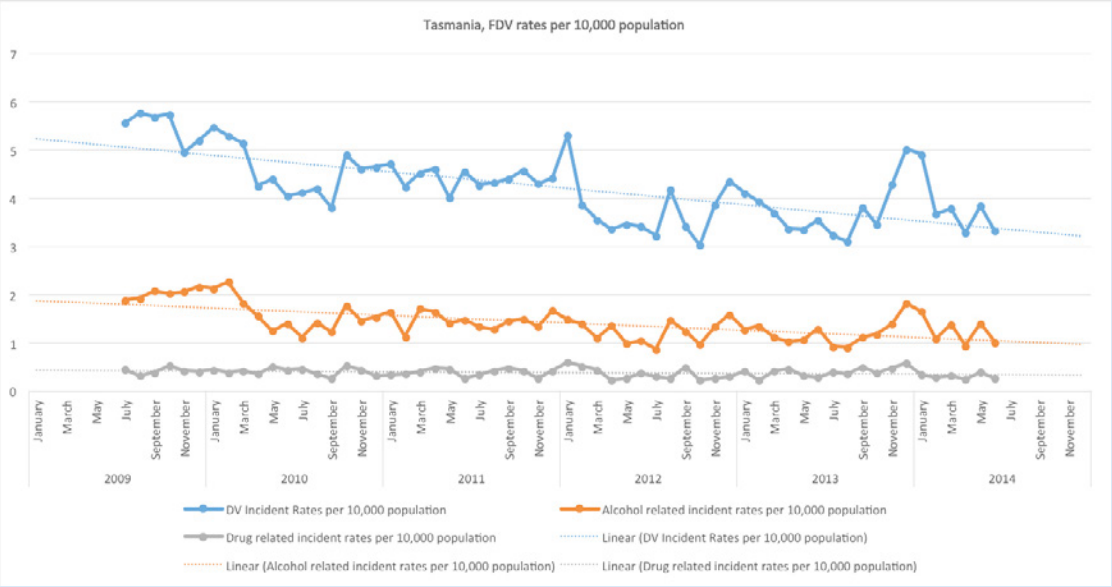
Table 249 Proportion of IPV incidents per year, Tas (n=13,097)

Year	n	%	Rate per 10,000
July—Dec 2009	1,687	12.9	n.a.[a]
2010	2,847	21.7	54.8
2011	2,743	20.9	52.9
2012	2,322	17.7	45.3
2013	2,320	17.7	45.1
Jan–June 2014	1,178	9.0	n.a.

a: rate per 10,000 was not calculated as data were only available for half 2009 and 2014

Figure 71 shows that the rates of all incidents per 10,000 people decreased between 2010 and 2014. This trend is consistent for alcohol-related incidents and drug-related incidents.

Figure 71 Alcohol, drug, and all incident rates per 10,000 population over reporting period, TAS



Socioeconomic disadvantage

Incident locations (suburb) were classified according to the ABS Socio-Economic Indexes for Areas (SEIFA) area level of socioeconomic disadvantage (see Table 250). A small number of incidents with no incident location available (n=561, 4.3%) were excluded from analyses.

Table 250 Incident location by level of socioeconomic disadvantage, Tas (n=12,536)[a]		
SEIFA Disadvantage quintile	n	%
1 (most disadvantaged)	3,586	28.6
2	3,500	27.9
3	1,684	13.4
4	2,297	18.3
5 (least disadvantaged)	1,469	11.7

a: the disadvantage index of 574 incidents was not recorded

More than half of all IPV incidents (56.5%) took place in areas with the two greatest levels of disadvantage, while the smallest proportion of incidents took place in the least disadvantaged areas of Tasmania.

Alcohol-related incidents

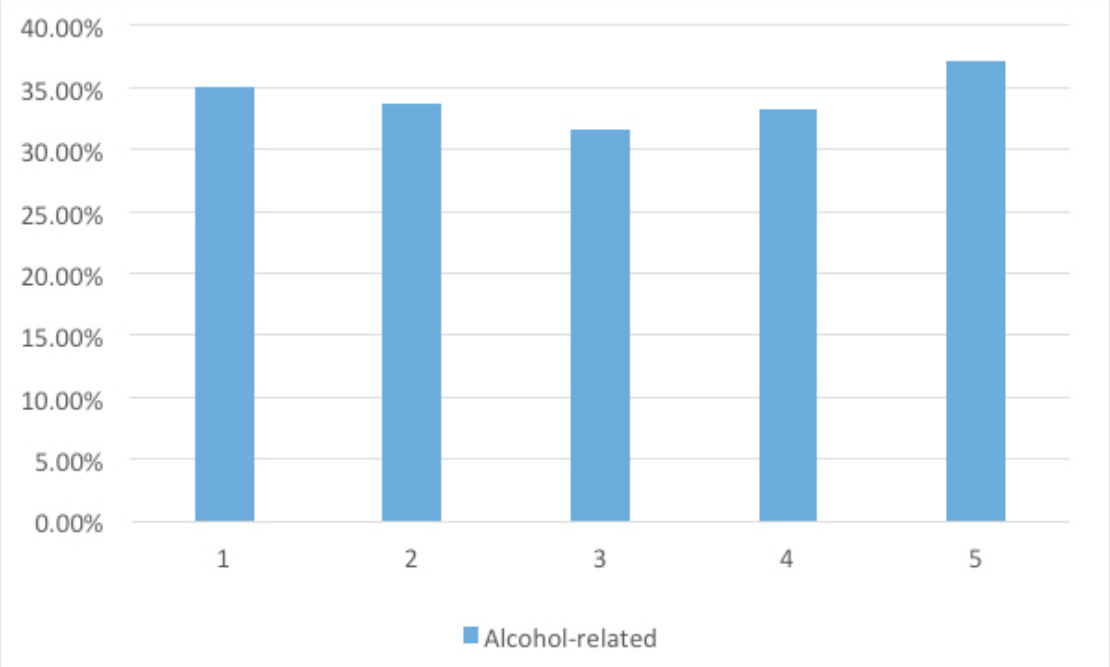
Overall, 33.5 percent (n=4,382) of incidents attended by Tasmanian police were alcohol-related (ie attending police judged that either the victim or the offender were affected by alcohol. Victims were judged to be affected by alcohol in 12.6 percent (n=1,650) of incidents, offenders in 31.3 percent (n=4,105), and both the victim and the offender in 10.5 percent (n=1,373) of incidents. No victim data was available for 551 incidents, as keeping records of victims is not mandatory in the current family violence management system. Table 251 shows that the proportion of incidents that were alcohol-related was highest in the first half of 2009 and gradually decreased until 2013, where there was a slight increase in the first half of 2014. The 4.3 percent decrease from 2009 to 2014 was significant ($p<0.05$, Phi=-0.04).

Table 251 Proportion of alcohol-related incidents by year, Tas (n=13,091)[a]		
SEIFA Disadvantage quintile	n	%
July–Dec 2009	620	36.8
2010	974	34.2
2011	913	33.3
2012	755	32.5
2013	737	31.8
Jan–June 2014	383	32.5

a: excludes 6 incidents where alcohol involvement was unknown

Figure 72 shows the proportion of alcohol-related incidents within each socioeconomic disadvantage quintile. The proportion of incidents that were alcohol-related was highest in the area of least relative disadvantage (5th quintile, 37.2% incidents were alcohol-related, $p>0.05$), and smallest in the third area of relative disadvantage (3rd quintile, 31.6% incidents were alcohol-related, $p<0.05$).

Figure 72 Proportion of alcohol-related incidents according to level of socioeconomic disadvantage, Tas (n=12,534)



Presence of weapons

A significantly higher proportion of incidents that were alcohol-related involved weapons (7.8%), than incidents that were not alcohol-related (5.1%, p<0.001, Phi=0.05).

Drug-related incidents

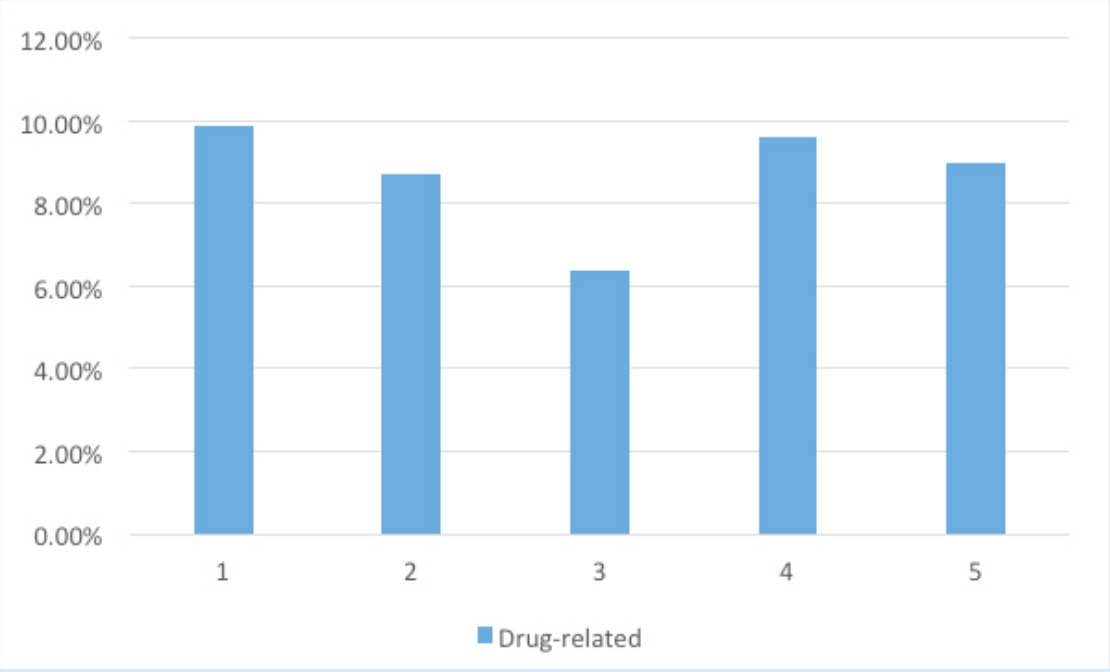
Overall, 8.9 percent (n=1,164) of incidents attended by Tasmanian police were drug-related (ie attending police officers judged either the victim or the offender as being affected by drugs). Police judged victims to be affected by drugs in 1.4 percent (n=188) of incidents, offenders in 8.2 percent (n=1,079), and both the victim and the offender in 0.8 percent (n=103) incidents. This excludes 551 incidents where victim data were unavailable. Table 252 shows that the proportion of drug-related incidents did not show a linear trend across the reporting period. The greatest proportion of drug-related incidents was reported in 2013, and the smallest proportion in 2009 and 2014.

Table 252 Proportion of drug-related incidents by year, Tas (n=13,097)

Year	n	%
July–Dec 2009	128	7.6
2010	253	8.9
2011	237	8.6
2012	213	9.2
2013	241	10.4
Jan–June 2014	92	7.8

Figure 73 shows the proportion of drug-related incidents within each socioeconomic disadvantage quintile. The proportion of incidents that were drug-related was highest in the area of most relative disadvantage (1st quintile, 9.9% incidents were drug-related, p<0.05) and lowest in the third area of relative disadvantage (3rd quintile, 6.4% incidents were drug-related, p<0.05).

Figure 73 Proportion of drug-related incidents according to level of socioeconomic disadvantage, Tas (n=12,534)



Presence of weapons

A significantly higher proportion of incidents that were drug-related involved weapons (10.5%), than incidents that were not drug-related (5.6%, p<0.001, Phi=0.06).

Child witnesses

Since 15 October 2011, Tasmanian police have recorded children who witnessed family violence incidents. Before this time, children of the relationship were recorded, but there was no option to select whether the child was present at the time of the incident. Between 15 October 2011 and 30 June 2014 children witnessed 52.6 percent (n=3,359) of incidents. Table 253 shows that the proportion of child-witnessed incidents increased slightly (3.4%) across the measurement period, but this was not statistically significant (p>0.05).

Table 253 Proportion of child-witnessed IPV incidents, Tas (n=6,387)

Year	n	%
July–Dec 2009a	–	–
2010[a]	–	–
2011[b]	282	49.7
2012	1,233	53.1
2013	1,218	52.5
Jan–June 2014	626	53.1

a: data were not recorded during this time period

b: data were recorded from 15 October

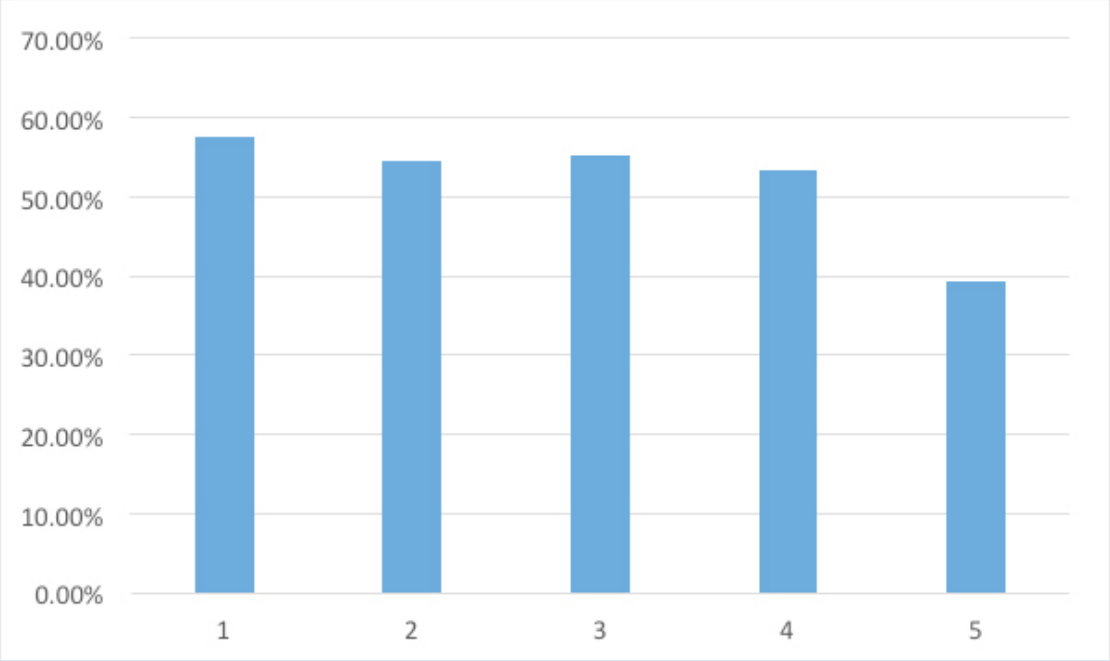
Table 254 presents the proportion of incidents witnessed by children that were alcohol- and drug-related. A significantly higher proportion of incidents not witnessed by children involved alcohol compared with incidents that were witnessed by children (p<0.001; Phi=-0.04). A significantly higher proportion of incidents that were witnessed by children were drug-related compared with incidents that did not involve children (p<0.01, Phi=0.03).

Table 254 Proportion of child-witnessed incidents that were substance-related, Tas (n=6,387)

	No child witness		Child witness	
	n	%	n	%
Alcohol-related	1,047	34.6	1,022	30.4
Drug-related	249	8.2	340	10.1

Figure 74 shows the proportion of incidents that were witnessed by children according to level of socioeconomic disadvantage. The proportion of incidents that were witnessed by children was highest in the most disadvantaged area and lowest in the least disadvantaged area.

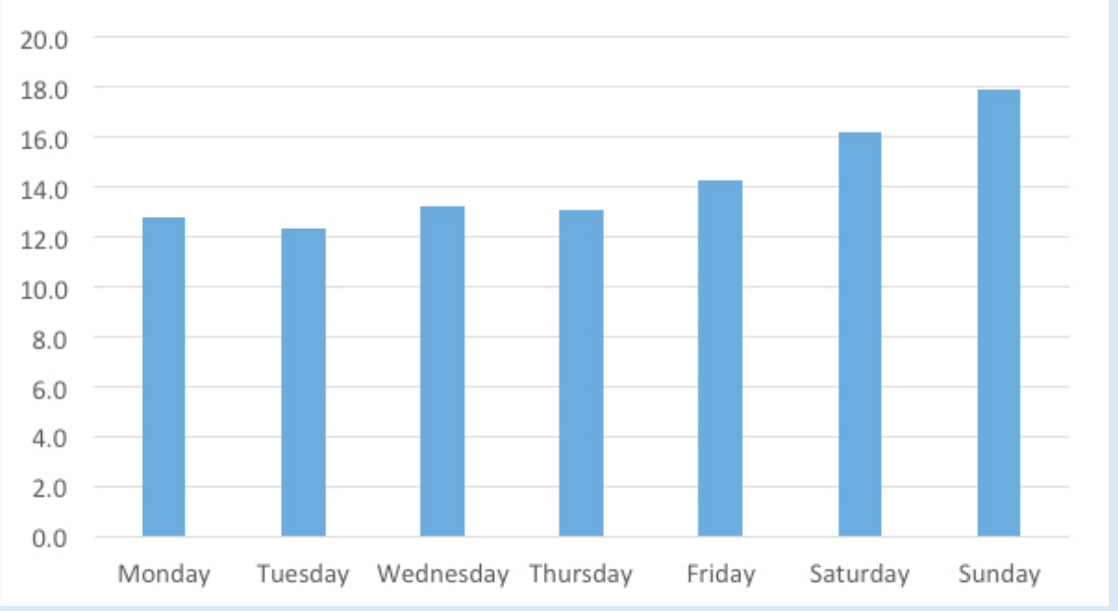
Figure 74 Proportion of incidents witnessed by children according to level of socioeconomic disadvantage, Tas (n=5,883)



Incident day and time

The day and time at which incidents occurred are shown in Figures 75 and 76 respectively.

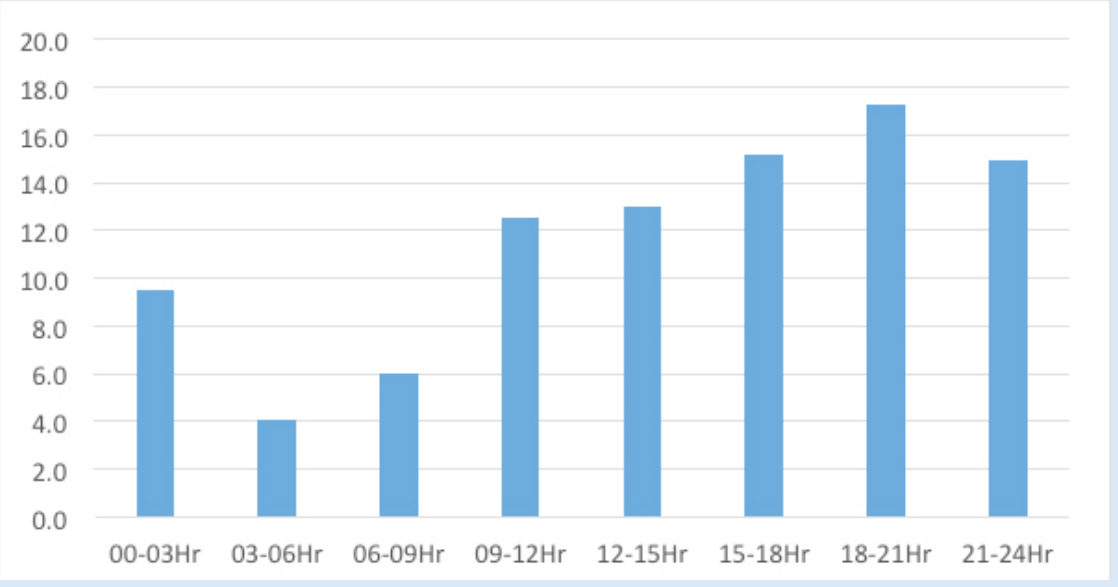
Figure 75 Proportion of incidents that took place on each day of the week, Tas (n=13,097)



Incidents reported to Tasmanian police most often occurred on Sundays (17.9%), followed by Saturdays (16.2%), and least often on Tuesdays (12.4%).

Figure 76 presents the proportion of IPV incidents attended by Tasmanian police that occurred during each three-hour time window (excluding incidents where no time was recorded, n=963).

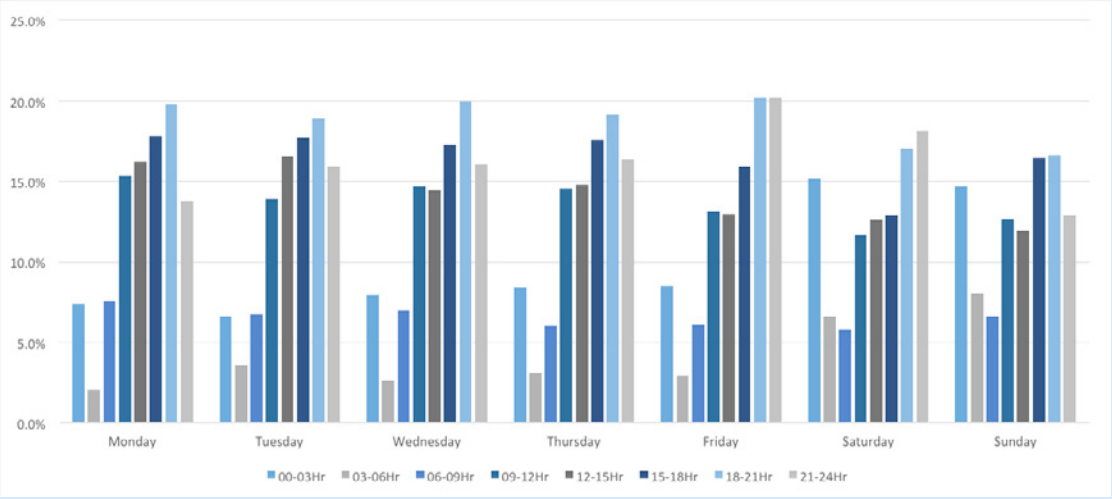
Figure 76 Proportion of incidents that took place during each three-hour window, Tas (n=12,134)



The proportion of incidents that took place during each three-hour interval generally increased from 6 am to 9 pm, then decreased steadily from 9 pm to 6 am. Incidents were most likely to occur between 6 and 9 pm and least likely between 3 and 6 am.

When day of week and time of day were considered together (see Figure 77), a higher proportion of incidents that occurred on weekends occurred late in the evening/early morning (between 9 pm and 6 am) compared with incidents that occurred during the week. Twenty-eight percent of incidents that took place on Saturdays and 29.4 percent of incidents that took place on Sundays occurred between 12 am and 6 am, compared with 17 to 17.6 percent of incidents occurring from Monday to Friday.

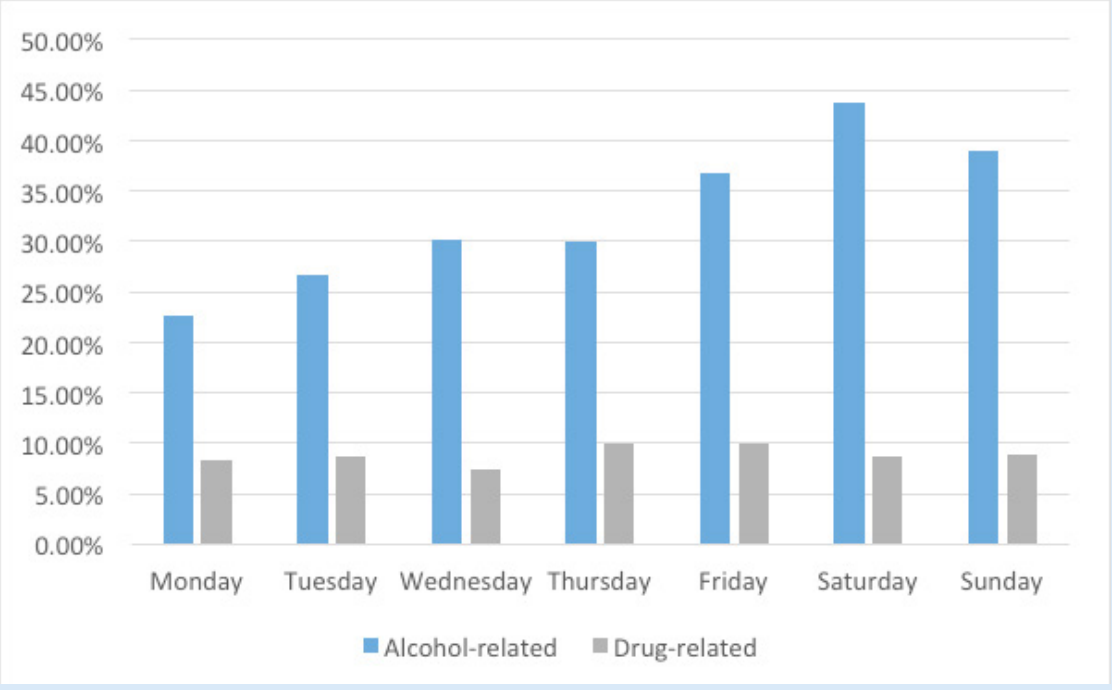
Figure 77 Proportion of incidents that occurred each day of the week in three-hour blocks, Tas (n=12,134)



Substance involvement

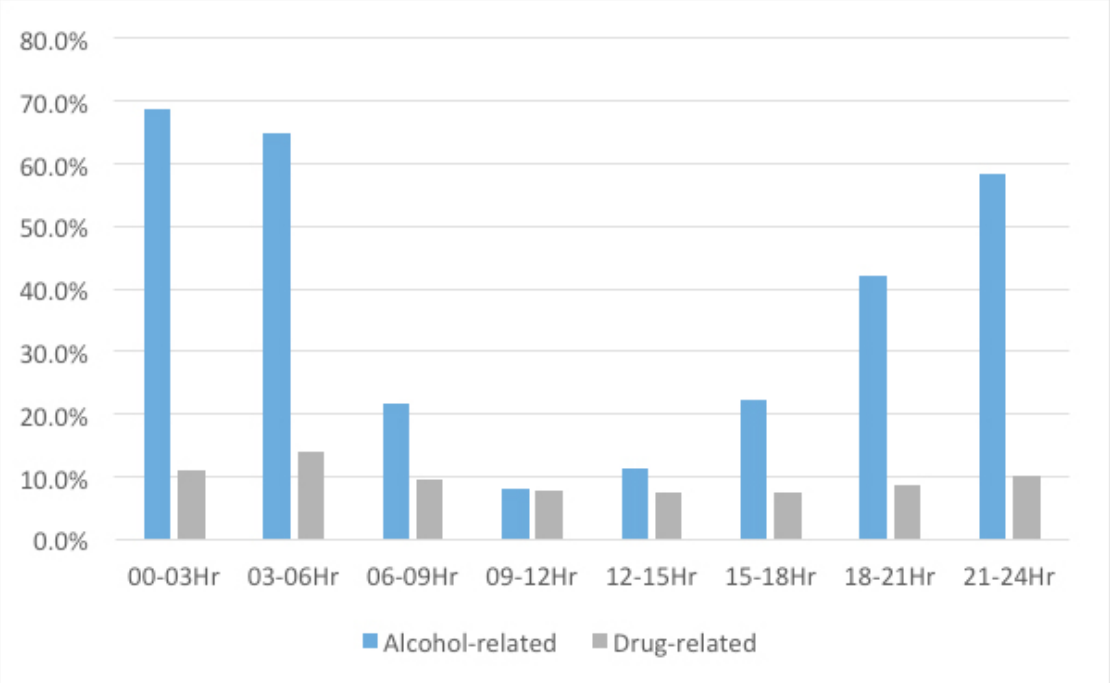
Figure 78 shows the proportion of incidents that were alcohol- and drug-related by day of the week and Figure 79 shows the proportion by time of the day.

Figure 78 Proportion of alcohol-related and drug-related incidents per day of the week, Tas (n=13,095)



The proportion of incidents that were alcohol-related was highest on the weekend (Saturday: $p<0.001$; Sunday: $p<0.001$) and on Fridays ($p<0.001$) and lowest on Mondays ($p<0.001$) and all other weekdays ($ps<0.01$). Conversely, the proportion of incidents that were drug-related was similar across each day of the week, but was significantly lower on Wednesdays compared with all other days of the week ($p<0.05$).

Figure 79 Proportion of alcohol-related and drug-related incidents during each three-hour interval, Tas (n=12,132)



The proportion of incidents that were alcohol-related gradually increased during the day and across the evening, peaking at 12 am to 3 am at 68.6 percent, then sharply decreased from 64.9 percent at 3 to 6 am to just eight percent at 9 am to 12 am. The proportion of incidents that were drug-related was similar from 6 am to 9pm, and highest between 3 and 6 am.

When day of the week and time of day were considered together (see Figure 80), a higher proportion of alcohol-related incidents occurring during the week (Monday–Friday) took place from 6 pm to 12 am (50.0%–59.3%) than incidents occurring on Saturdays (45.8%) and Sundays (34.3%). Conversely, a higher proportion of alcohol-related incidents occurring on Saturdays and Sundays took place from 12 am to 6 am (Saturday: 39.0%; Sunday: 47.8%), than incidents occurring during the week (Monday–Friday, 22.7%–26.8%). Similarly, as shown in Figure 81, a higher proportion of drug-related incidents occurring on the weekend tended to take place in the evening and early hours of the morning compared with drug-related incidents that occurred during the week.

Figure 80 Proportion of alcohol-related incidents that occurred each day of the week in three-hour blocks, Tas (n=4,434)

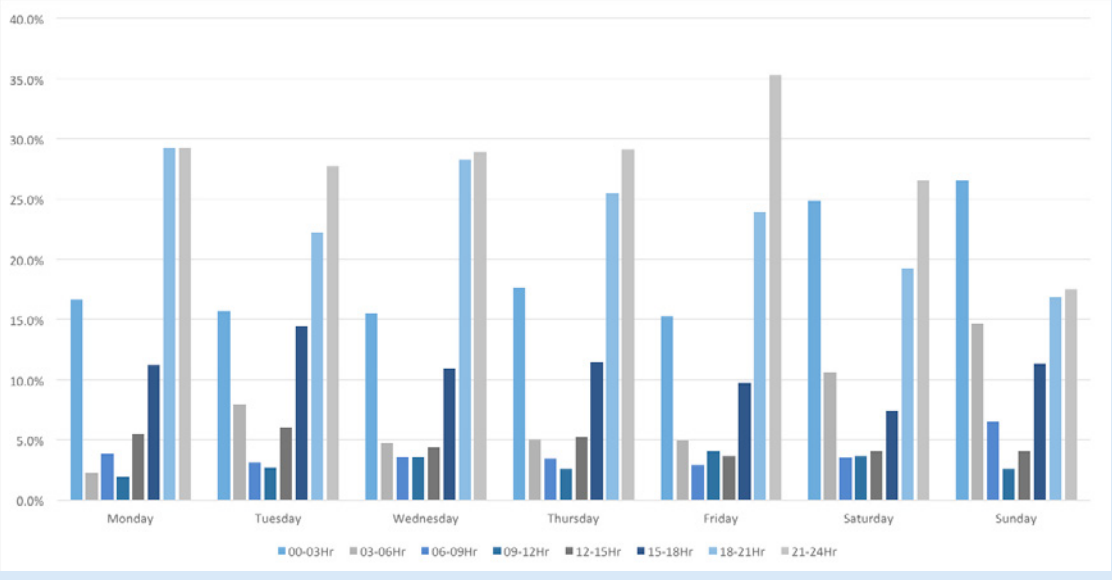
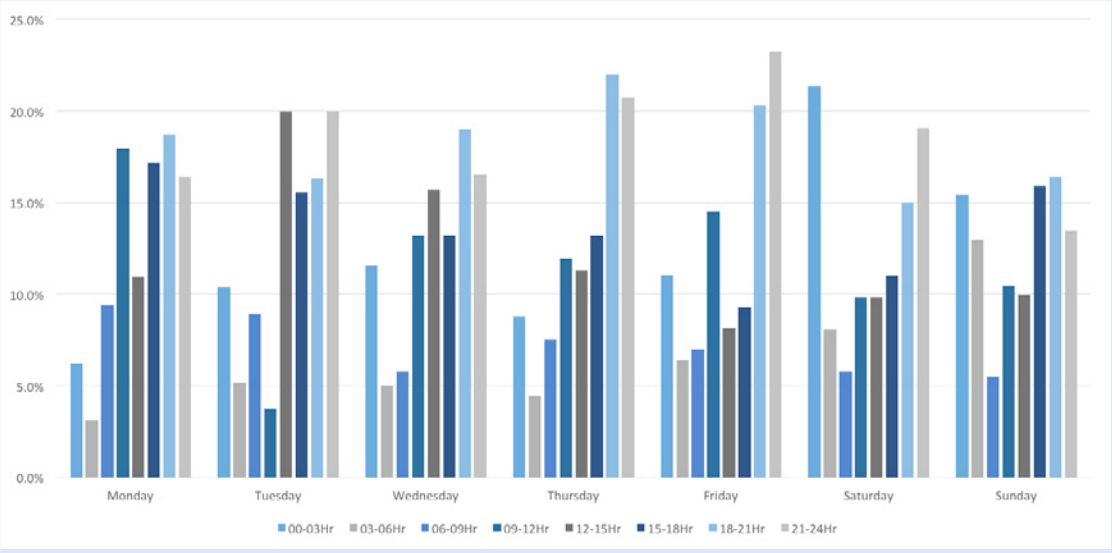


Figure 81 Proportion of drug-related incidents that occurred each day of the week in three-hour blocks, Tas (n=1,089)



Child witness

Since 15 October 2011, no significant difference was evident in the proportion of incidents that were witnessed by children across each day of the week ($p>0.05$). With regard to time of day, incidents were most likely witnessed by child between 6 and 9 am (63.0% child-witnessed, $p<0.001$), and least likely witnessed between 12 am and 3 am (46.2% child-witnessed, $p<0.001$).

Incident outcomes

Incident outcomes included removing either an offender or a victim. Overall, offenders were removed from 14.4 percent (n=1,892) of incidents, and victims were removed from 11.9 percent (n=1,552) of incidents. Tables 255 and 256 show the proportion of incidents where victim and offenders were removed, that were alcohol-related and drug-related. A significantly higher proportion of incidents where offenders were removed were alcohol-related (p<0.001, Phi=0.18), but not drug-related (p>0.05), compared with incidents where no offender was removed. A significantly higher proportion of incidents, where victims were removed, were alcohol-related (p<0.001, Phi=0.06) or drug-related (p<0.001, Phi=0.07) compared with incidents where no victims were removed.

Table 255 Proportion of incidents offenders were removed that were substance-related, Tas (n=5,546)

	Offender not removed		Offender removed	
	n	%	n	%
Alcohol-related	3,365	30.0	1,017	53.8
Drug-related	979	8.7	185	9.8

Table 256 Proportion of incidents victims were removed that were substance-related, Tas (n=5,546)

	Victim not removed		Victim removed	
	n	%	n	%
Alcohol-related	3,732	32.3	650	41.9
Drug-related	936	8.1	228	14.7

Family violence order breaches

Across the reporting period, 21.4 percent (n=2,803) of incidents involved a family violence order (FVO) breach. This includes a breach of a police family violence order, breach of a family violence order, breach of an interim family violence order, or breach of an external family violence order. Table 257 shows the proportion of breaches per reporting year.

Table 257 Proportion of family violence order breaches per year, Tas (n=13,097)

Year	n	%
July–Dec 2009	366	21.7
2010	385	13.5
2011	581	21.2
2012	573	24.7
2013	589	25.4
Jan–June 2014	309	26.2

Substance involvement

A significantly lower proportion of incidents where an FVO was breached were alcohol-related (25.6%) compared with incidents where it was not breached (35.6%, p<0.001, Phi=-0.09). No significant difference was evident in the proportion of incidents that were drug-related and whether an FVO was breached or not breached (8.5% vs 9.0%, p>0.05).

Presence of weapons

A significantly lower proportion of incidents involving a breach of an FVO involved weapons (3.6%), than incidents that did not involve a breach of an FVO (6.6%, p<0.001, Phi=-0.05).

Socioeconomic disadvantage

No significant difference was evident in the proportion of incidents involving a breach of an FVO according to area of socioeconomic disadvantage (p>0.05).

Day of week and time of day

Family violence order breaches occurred most often on Wednesdays (23.9% of incidents involved breaches) and least often on Saturdays and Sundays (19.4% of incidents involved breaches). The FVO breaches most likely took place between 12 pm and 3 am (24.7% of incidents involved breaches) and 9 am and 12 pm (23.3% of incidents involved breaches), and least likely between 12 am and 3 am (15.1% of incidents involved breaches).

Assaults

Across the reporting period, 21.6 percent (n=2,825) of incidents involved an assault (aggravated assault, aggravated assault , assault a police officer, and wounding). Table 258 shows the proportion of assaults per reporting year.

Table 258 Proportion of assaults per year, Tas (n=13,097)

Year	n	%
July–Dec 2009	346	20.5
2010	351	12.3
2011	636	23.2
2012	594	25.6
2013	588	25.3
Jan–June 2014	310	26.3

Substance involvement

A significantly higher proportion of incidents where assault occurred were alcohol-related (41.9%) compared with incidents where no assault occurred (31.1%, p<0.001, Phi=0.09). A significantly higher proportion of incidents where assault occurred were drug-related (11.3%) compared with incidents where no assault occurred (8.2%, p<0.001, Phi=0.04).

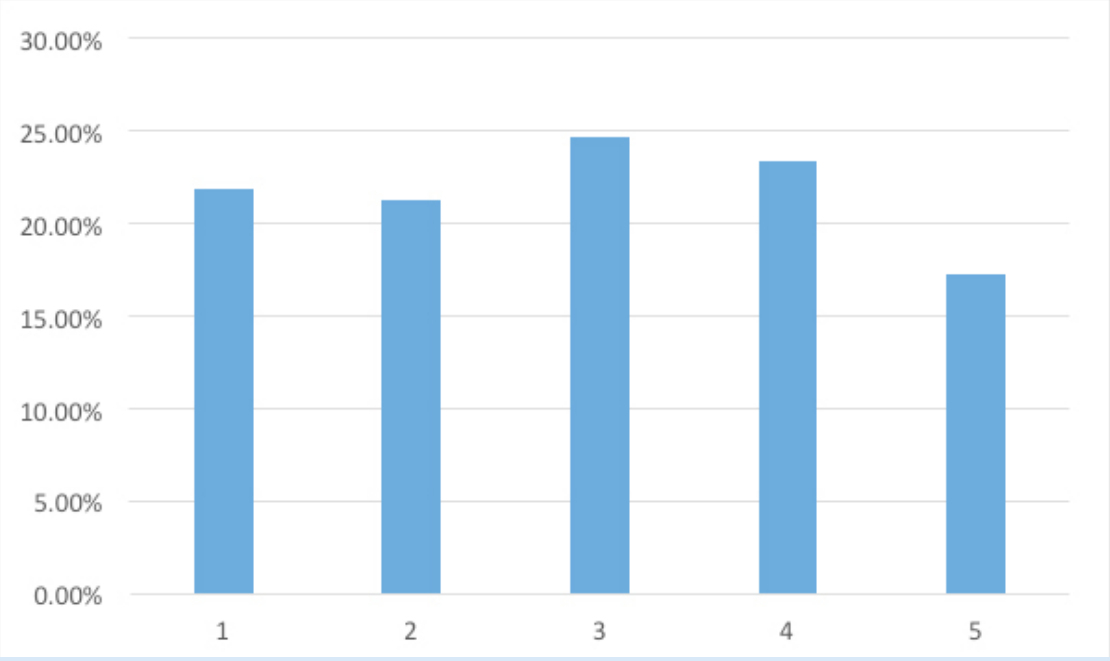
Presence of weapons

A significantly higher proportion of incidents where an assault occurred involved a weapon (11.5%) compared with incidents where no assault took place (4.5%, p<0.001, Phi=0.12).

Socioeconomic disadvantage

Figure 82 presents the proportion of incidents that involved an assault within each area of relative disadvantage. Assaults were least likely to occur in incidents that took place in the area of the most disadvantage (17.3% involved assaults), and were most likely to occur in the third area of relative disadvantage (24.7% involved assaults).

Figure 82 Proportion of incidents that involved an assault according to level of socioeconomic disadvantage, Tas (n=12,536)



Day of week and time of day

Assaults occurred more frequently on the weekend (Saturday: 23.3% incidents involved assaults, $p<0.05$; Sunday: 23.9% incidents involved assaults, $p<0.01$) than during the week (20–20.9% incidents involved assaults). Assaults were least likely to occur between 12 pm and 3 pm (19.0% incidents involved assaults, $p<0.001$) and 3 to 6 pm (19.3% incidents involved assaults, $p<0.001$), and most likely to take place between 9 pm and 6 am (24.7–26.3% incidents involved assaults, $ps<0.05$).

Multivariate correlates of incident characteristics

A series of binary logistic regression analyses were conducted to examine whether key person and incident factors contributed unique variance to predicting:

- alcohol involvement;
- FVO breaches;
- assaults;
- presence of children; and
- removal of offenders and victims.

Predictor variables included in the models were: socioeconomic disadvantage, AOD use, and removal of either offender or victim. The following section presents separately the results of each regression analysis. The presence of a child was not included in the final model, as this variable has only been recorded since 15 October 2011, and consequently substantially reduced the analytic sample (n=5,370). When included in the model as a separate, and final step, child presence was associated with a decreased likelihood that the incident involved alcohol (OR=0.77, 95%CI=0.69–0.87).

Due to increased sensitivity of the Hosmer and Lemeshow Test of model fit with larger sample sizes, researchers referred to the Omnibus Tests of Model Coefficients to interpret model fit for all models. As the presence of children at incidents has only been recorded since 15 October 2011, this variable was not included in the models as a predictor.

Alcohol involvement

A binary logistic regression was performed to examine if—the SEIFA disadvantage quintile; breach of an FVO; whether an assault occurred, offender or victim removed; offender drug use; and victim drug use—were uniquely associated with whether alcohol was involved (no vs yes) in incidents (see Table 259).

In the fully adjusted model (Step 3), incidents involving breaches of family violence orders were significantly less likely to involve alcohol (OR=0.65). Incidents that involved assaults were 1.55 times more likely to involve alcohol. The offender and victim being removed from the incident were associated with 2.71 and 1.35 greater odds respectively, that the incident involved alcohol. Further, the offender being affected by drugs and the victim being affected by drugs increased the odds that the incident involved alcohol by 2.16 and 1.71 times. Compared with incidents occurring in the fifth SEIFA disadvantage quintile (least disadvantaged), those in the third quintile were significantly less likely to involve alcohol (OR=0.80); the first, second and fourth quintiles were not significantly associated with alcohol involvement.

Overall, the model accounted for six to eight percent of the variance in whether or not an incident involved alcohol (Cox & Snell R Square=0.06; Negelkerke R Square=0.08) and correctly predicted 23.6 percent of incidents in which alcohol was involved, and 90.1 percent of incidents in which alcohol was not involved. All three steps significantly contributed to predicting alcohol involvement in incidents (ps<0.05).

Table 259 Binary logistic regression predicting alcohol involvement at incidents, Tas (n=12,021)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.06	0.68	0.95	0.83–1.08	-0.08	1.43	0.92	0.81–1.05	-0.09	1.75	0.91	0.8–1.05
2	-0.12	3.24	0.89	0.78–1.01	-0.13	3.42	0.88	0.77–1.01	-0.13	3.43	0.88	0.77–1.01
3	-0.21	7.45	0.81**	0.7–0.94	-0.25	9.71	0.78**	0.67–0.91	-0.23	7.96	0.8**	0.68–0.93
4	-0.13	3.25	0.88	0.76–1.01	-0.12	2.45	0.89	0.77–1.03	-0.13	2.92	0.88	0.76–1.02
5[a] (least disadvantage)												
Breach of an FVO (yes)					-0.43	68.95	0.65***	0.59–0.72	-0.44	69.28	0.65***	0.58–0.72
Assault (yes)					0.46	96.77	1.58***	1.44–1.73	0.44	88.64	1.55***	1.42–1.7
Offender removed (yes)					0.99	333.47	2.7***	2.42–3	1.00	331.64	2.71***	2.43–3.01
Victim removed (yes)					0.35	36.00	1.42***	1.27–1.59	0.30	25.87	1.35***	1.2–1.52
Offender drug-affected (yes)									0.77	120.87	2.16***	1.88–2.47
Victim drug-affected (yes)									0.54	11.21	1.71***	1.25–2.34

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

Note: FVO: family violence order

a: reference category

Breach of a family violence order

A binary logistic regression was performed to examine if—the SEIFA disadvantage quintile; an assault occurred; an offender or victim was removed; offender alcohol use; victim alcohol use; offender drug use; and victim drug use—were uniquely associated with whether an incident involved a breach of an FVO (no vs yes, see Table 260). Child presence was not included in the final model, as this variable has only been recorded since 15 October 2011. This substantially reduced the analytic sample (n=5,370). When included in the model as a separate, and final step, child presence was not significantly associated with whether or not the incident involved an FVO breach.

In the fully adjusted model (Step 3), the offender (OR=0.56) and victim (0.56) being removed, and the offender (OR=0.72) and victim (OR=0.72) being alcohol-affected were associated with a decreased likelihood that the incident involved a breach of an FVO. Whether the incident involved an assault, and whether drugs affected the victim or the offender, was not significantly associated with whether the incident involved a breach of an FVO. Compared with incidents that occurred in the fifth SEIFA disadvantage quintile (least disadvantaged), those that occurred in the second (OR=1.22) and fourth (OR=1.25) quintiles were significantly more likely to involve a breach of an FVO.

The model accounted for one to three percent of the variance in FVO breaches (Cox & Snell R Square=0.02; Negelkerke R Square=0.02), had adequate model fit, but correctly predicted zero percent of incidents that involved this kind of breach. All three steps significantly contributed to predicting whether incidents involved an FVO breach (ps<0.05).

Table 260 Binary logistic regression predicting a family violence order breach at incidents, Tas (n=12,021)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.14	2.75	1.15	0.98–1.35	0.15	3.45	1.17	0.99–1.37	0.14	2.68	1.15	0.97–1.35
2	0.22	7.03	1.24**	1.06–1.46	0.22	7.03	1.25**	1.06–1.46	0.20	5.92	1.22*	1.04–1.44
3	0.18	3.51	1.19	0.99–1.43	0.18	3.80	1.2	1–1.45	0.15	2.61	1.17	0.97–1.4
4	0.26	8.80	1.29**	1.09–1.54	0.24	7.64	1.27**	1.07–1.51	0.22	6.44	1.25*	1.05–1.48
5[a] (least disadvantage)												
Assault (yes)					0.02	0.08	1.02	0.91–1.13	0.06	1.24	1.06	0.95–1.19
Offender removed (yes)					-0.69	78.08	0.5***	0.43–0.59	-0.59	55.06	0.56***	0.48–0.65
Victim removed (yes)					-0.61	56.58	0.55***	0.47–0.64	-0.57	49.99	0.56***	0.48–0.66
Offender alcohol-affected (yes)									-0.33	31.02	0.72***	0.65–0.81
Victim alcohol-affected (yes)									-0.33	14.76	0.72***	0.61–0.85
Offender drug-affected (yes)									0.12	1.83	1.12	0.95–1.33
Victim drug-affected (yes)									-0.35	2.42	0.71	0.46–1.1

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Assault

A binary logistic regression was performed to examine if—SEIFA disadvantage quintile; breach of an FVO; offender removed; victim removed; offender alcohol use; victim alcohol use; offender drug use; and victim drug use—were uniquely associated with whether an incident involved a breach of an FVO (no vs yes, see Table 261). The presence of a child was not included in the final model, as this variable has only been recorded since 15 October 2011. This substantially reduced the analytic sample (n=5,370). When included in the model as a separate, and final step, child presence was not significantly associated with whether the incident involved an assault.

In the fully adjusted model (Step 3) the offender being removed (OR=1.74); being alcohol-affected (OR=1.40); and drug-affected (OR=1.31), significantly increased the likelihood that the incident involved an assault. The victim being alcohol-affected also increased the likelihood that the incident involved an assault (OR=1.29). Compared with incidents occurring in the fifth SEIFA disadvantage quintile (least disadvantaged), incidents occurring in all other quintiles were significantly more likely to involve assaults (ORs=1.32–1.61).

The model accounted for two to three percent of the variance in assaults (Cox & Snell R Square=0.02; Negelkerke R Square=0.03), had adequate model fit, but correctly predicted zero percent of incidents that involved an assault. All three steps significantly contributed to predicting whether incidents involved an assault (ps<0.05).

Table 261 Binary logistic regression predicting assault, Tas (n=12,021)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.30	13.48	1.35***	1.15–1.59	0.28	11.76	1.33***	1.13–1.56	0.29	12.59	1.34***	1.14–1.58
2	0.26	9.87	1.3**	1.1–1.53	0.26	9.73	1.3**	1.1–1.53	0.28	11.04	1.32***	1.12–1.56
3	0.45	23.50	1.56***	1.3–1.87	0.44	22.37	1.55***	1.29–1.85	0.47	26.05	1.61***	1.34–1.93
4	0.37	17.76	1.44***	1.22–1.71	0.37	18.21	1.45***	1.22–1.72	0.39	19.57	1.48***	1.24–1.75
5[a] (least disadvantage)												
Breach of an FVO (yes)					0.11	3.15	1.12	0.99–1.27	0.01	0.01	1.01	0.89–1.14
Offender removed (yes)					0.61	99.86	1.84***	1.63–2.07	0.56	80.60	1.74***	1.54–1.97
Victim removed (yes)					-1.65	514.87	0.19***	0–0	0.06	0.98	1.06	0.95–1.18
Offender alcohol-affected (yes)									0.34	41.20	1.4***	1.27–1.56
Victim alcohol-affected (yes)									0.26	14.19	1.29***	1.13–1.47
Offender drug-affected (yes)									0.27	11.95	1.31***	1.12–1.52
Victim drug-affected (yes)									-0.16	0.81	0.85	0.59–1.21

** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Child-witnessed incidents

A binary logistic regression was performed to examine if—SEIFA disadvantage quintile; breach of FVO; assault; offender removed; victim removed; offender alcohol use; victim alcohol use; offender drug use; and victim drug use—were uniquely associated with whether an incident was witnessed by a child (no vs yes) in incidents (see Table 262).

In the fully adjusted model (Step 3)—breach of an FVO, assault, offender removed, and victim removed—were not associated with a child witnessing an incident. Step 2 as a whole did not contribute unique variance to predicting child witnesses ($p>0.05$). Offender alcohol use was not significantly associated with a child witness, and victim alcohol use was associated with a decreased likelihood that a child witnessed the incident (OR=0.54). The offender being affected by drugs was associated with increased odds that a child witnessed the incident (OR=1.44), while a victim being affected by drugs was associated with decreased odds that a child witnessed the incident (OR=0.57). Compared with incidents occurring in the fifth SEIFA disadvantage quintile (least disadvantaged), incidents occurring in all other quintiles were significantly more likely to involve a child witness (ORs=1.72–2.04).

Overall, the model accounted for two to three percent of the variance in whether or not an incident involved a child witness (Cox & Snell R Square=0.03; Negelkerke R Square=0.03) and correctly predicted 84.4 percent incidents that were witnessed by child, and 26.7 percent of incidents that were not witnessed by children. Step 1 ($p<0.001$) and Step 3 ($p<0.001$), but not Step 2 ($p>0.05$), contributed to unique variance in predicting whether children witnessed incidents.

Table 262 Binary logistic regression predicting child witnessed incidents (n=5,370)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.74	54.49	2.1***	1.72–2.55	0.74	54.70	2.1***	1.73–2.56	0.71	49.86	2.04***	1.68–2.49
2	0.63	39.04	1.88***	1.54–2.29	0.63	39.30	1.88***	1.55–2.3	0.62	37.46	1.86***	1.53–2.28
3	0.62	30.55	1.86***	1.49–2.32	0.62	30.82	1.87***	1.5–2.33	0.59	27.43	1.81***	1.45–2.26
4	0.57	28.11	1.76***	1.43–2.17	0.57	28.18	1.76***	1.43–2.17	0.55	25.62	1.72***	1.4–2.13
5[a] (least disadvantage)												
Breach of an FVO (yes)					-0.06	0.84	0.94	0.83–1.07	-0.10	2.18	0.91	0.8–1.03
Assault (yes)					0.03	0.26	1.03	0.91–1.17	0.06	0.86	1.06	0.94–1.2
Offender removed (yes)					0.07	0.84	1.07	0.93–1.24	0.14	3.10	1.15	0.99–1.33
Victim removed (yes)					-0.15	3.30	0.86	0.73–1.01	-0.14	2.70	0.87	0.73–1.03
Offender alcohol-affected (yes)									-0.06	0.76	0.94	0.83–1.08
Victim alcohol-affected (yes)									-0.62	42.02	0.54***	0.45–0.65
Offender drug-affected (yes)									0.36	12.55	1.44***	1.18–1.76
Victim drug-affected (yes)									-0.57	4.82	0.57*	0.34–0.94

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

a: reference category

Removal of offenders

A binary logistic regression was performed to examine if—the SEIFA disadvantage quintile; breach of family violence order; assault; victim removal; drug use by either the victim or the offender; and alcohol use by either the victim or the offender—were predictors of the offender removed (no vs yes) at an incident (see Table 263). Child presence was not included in the final model, as this variable has only been recorded since 15 October 2011 and so substantially reduced the analytic sample (n=5,370). When included in the model as a separate, and final step, child presence was not significantly associated with whether or not an offender was removed from incidents.

In the fully adjusted model (Step 3), offenders' alcohol use and victims' drug use was associated with a 2.66 and 1.53 greater likelihood that an offender was removed from an incident, while breaching a family violence order (OR=0.56). The victim being removed (OR=0.62) decreased the likelihood that an offender was removed. Victims' alcohol use, offenders' drug use, and whether the incident involved an assault, were not uniquely associated with removing an offender. Compared with incidents that took place in the least disadvantaged area (5th quintile), those that took place in the first to third SEIFA quintiles, were not significantly more likely to involve removing an offender, while those in the fourth quintile were significantly less likely to involve an offender being removed (OR=0.80).

Overall, the model accounted for four to seven percent of the variance in removing an offender (Cox & Snell R Square=0.04; Negelkerke R Square=0.07) and did not correctly predict incidents where an offender was removed (but 100% of incidents where an offender was not removed). All three steps significantly contributed to predicting whether or not an offender was removed from an incident (ps<0.05).

Table 263 Binary logistic regression predicting removal of an offender from an incident (n=12,021)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	-0.02	0.03	0.98	0.82–1.17	0.00	0.00	1	0.84–1.2	0.03	0.10	1.03	0.86–1.23
2	-0.05	0.29	0.95	0.8–1.14	-0.03	0.13	0.97	0.81–1.16	0.00	0.00	1	0.84–1.2
3	-0.05	0.21	0.95	0.78–1.17	-0.03	0.10	0.97	0.79–1.19	0.03	0.10	1.03	0.84–1.28
4	-0.27	7.11	0.77**	0.63–0.93	-0.25	6.26	0.78*	0.64–0.95	-0.22	4.54	0.8*	0.66–0.98
5[a] (least disadvantage)												
Breach of an FVO (yes)					-0.69	77.99	0.5***	0.43–0.59	-0.59	54.95	0.56***	0.48–0.65
Assault (yes)					0.11	3.16	1.12	0.99–1.27	0.01	0.02	1.01	0.89–1.14
Victim removed (yes)					-0.39	19.37	0.68***	0.57–0.8	-0.47	27.11	0.62***	0.52–0.75
Offender alcohol-affected (yes)									0.98	265.10	2.66***	2.37–3
Victim alcohol-affected (yes)									0.12	2.73	1.13	0.98–1.31
Offender drug-affected (yes)									-0.18	3.31	0.83	0.69–1.01
Victim drug-affected (yes)									0.43	4.73	1.53*	1.04–2.25

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Removal of victims

A binary logistic regression was performed to examine—SEIFA disadvantage quintile; breach of family violence order; assault; removal of offender; drug use by either the victim or the offender; and alcohol use by either the victim or the offender—as predictors of the victim being removed (no vs yes) at an incident (see Table 264). The presence of a child was not included in the final model, as this variable has only been recorded since 15 October 2011 and so substantially reduced the analytic sample (n=5,370). When included in the model as a separate, and final step, child presence was not significantly associated with whether or not a victim was removed from incidents.

In the fully adjusted model, offenders' use of alcohol or drugs was associated with a 1.18 and 1.77 times increased likelihood that a victim was removed. Victims' alcohol use was associated with a 1.39 increase in likelihood that a victim was removed. A breach of an FVO at an incident decreased the likelihood of a victim being removed (OR=0.59), while the incident involving an assault increased the likelihood (OR=1.75). The offender being removed decreased the likelihood that the victim was removed (OR=0.63). Compared with incidents that occurred in areas of least disadvantage (5th quintile), those that took place in areas of the most disadvantage (1st quintile) were 1.32 times more likely to involve a victim being removed.

Overall, the model accounted for two to four percent of the variance in whether or not police removed a victim from an incident (Cox & Snell R Square=0.02; Negelkerke R Square=0.04) and did not correctly predict incidents where a victim was removed (but 100% of incidents where victims were not removed). All three steps significantly contributed to predicting whether or not a victim was removed from an incident (ps<0.001).

Table 264 Binary logistic regression predicting removal of a victim from an incident (n=12,021)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
SEIFA disadvantage quintile												
1 (most disadvantage)	0.29	8.35	1.33**	1.1–1.62	0.27	7.18	1.31**	1.08–1.59	0.28	7.68	1.32**	1.09–1.61
2	0.05	0.26	1.05	0.86–1.29	0.04	0.15	1.04	0.85–1.27	0.06	0.33	1.06	0.87–1.3
3	0.19	2.69	1.21	0.96–1.51	0.15	1.71	1.16	0.93–1.46	0.20	2.94	1.22	0.97–1.53
4	0.00	0.00	1	0.81–1.24	-0.03	0.10	0.97	0.78–1.2	-0.02	0.05	0.98	0.79–1.21
5[a] (least disadvantage)												
Breach of an FVO (yes)					-0.61	56.67	0.55***	0.47–0.64	-0.58	51.11	0.56***	0.48–0.66
Assault (yes)					0.61	99.79	1.84***	1.63–2.08	0.56	81.54	1.75***	1.55–1.97
Offender removed (yes)					-0.40	19.62	0.67***	0.57–0.8	-0.47	26.62	0.63***	0.52–0.75
Offender alcohol-affected (yes)									0.16	5.87	1.18*	1.03–1.34
Victim alcohol-affected (yes)									0.33	15.43	1.39***	1.18–1.64
Offender drug-affected (yes)									0.57	41.10	1.77***	1.49–2.1
Victim drug-affected (yes)									0.26	1.80	1.3	0.89–1.9

* statistically significant at $p<0.05$. ** statistically significant at $p<0.01$. *** statistically significant at $p<0.001$

a: reference category

Tasmania summary

The preceding section detailed trends for intimate partner violence incidents attended by Tasmania police between 1 July 2009 and 20 June 2014 for individuals and incidents. These findings relate to domestic violence incidents involving intimate partners only, and exclude family violence incidents involving other family members or acquaintances.

Demographics

In Tasmania, most offenders were male (83.2%) falling into the 25 to 49 year age category, and most victims were female (85.4%) falling into the 25 to 34 year age category.

The SEIFA disadvantage index shows that the proportion of Tasmanian incidents was greatest in areas of the most disadvantage (1st quintile 28.6%, 5th quintile 11.7%).

Incident trends

Alcohol-related incidents were highest in 2009, gradually decreasing across the reporting period from 36.8 percent of all incidents in 2009 to 32.5 percent in 2014.

During this period, 1,164 incidents involved drugs (8.9%), with the highest incidence in 2013 (10.4%) and the lowest in 2014 (7.8%). Drug-related incidents were significantly more likely in areas of the greatest disadvantage.

Since 15 October 2011, children were recorded as present at just over half (52.6%, n=3,359) of all incidents, with the highest proportions occurring in 2012 (53.1%). The proportion of incidents that were drug-related was significantly higher for incidents witnessed by children compared with those not witnessed by children.

Offenders were removed from 14.4 percent of all incidents and victims from 11.9 percent. A significantly higher proportion of incidents from which victims were removed were drug- or alcohol-related, compared with incidents from which victims were not removed. A significantly higher proportion of incidents from which offenders were removed were alcohol-related, compared with incidents from which offenders were not removed.

Intimate partner violence incidents were more likely to take place on Saturday (16.2%) and Sunday (17.9%) than on weekdays. Alcohol-related incidents occurred most often on Saturdays and Sundays, and least often on Mondays.

Key correlates of domestic violence

Either the offender or the victim being affected by alcohol significantly decreased the likelihood of an incident involving a breach of an FVO (offender: OR=0.72; victim: OR=0.72), but significantly increased the likelihood that it involved an assault (offender: OR=1.40; victim: OR=1.29). The offender being affected by drugs/alcohol increased the likelihood that the incident involved an assault by 1.31 times. Compared with incidents occurring in the fifth SEIFA disadvantage quintile (least disadvantaged), incidents occurring in all other quintiles were significantly more likely to involve assaults (ORs=1.32–1.61).

The offender being affected by alcohol significantly increased the likelihood that the offender was removed (OR=2.66) or the victim was removed (OR=1.18) from the incident. Offender drug use was associated with increased likelihood the victim was removed (OR=1.77), and victim drug use was associated with increased likelihood the offender was removed (OR=1.53).

Incidents where an offender used drugs were 1.44 times more likely to be witnessed by children, while victims' use of alcohol or drugs at an incident decreased the likelihood by almost half that an incident was witnessed by children (OR=0.54; OR=0.57). Compared with incidents occurring in the fifth SEIFA disadvantage quintile (least disadvantaged), incidents occurring in all other quintiles were significantly more likely to involve a child witness (ORs=1.72–2.04).

Victoria police data results

This section presents trends for offenders within domestic violence incidents attended by Victorian police between 1 January 2009 and 31 December 2013. Incident level data was not available at the time of writing, so data is presented at the person level.

Intimate partner violence incidents include any instance where the relationship between the parties is of a romantic or spousal nature (eg husband, wife, ex-spouse, de facto partner). Family violence incidents include any incident involving other family members (eg mother, father, sibling).

Individuals

Data is presented for offenders and victims, with the following results comparing intimate partner violence and family violence members. Demographic information, unique and repeat offenders, offender alcohol and drug use, offender mental health, intervention order and risk assessment information, and offender socioeconomic indexes are presented. Victim demographics, unique and repeat victims, victim alcohol and drug use and victim mental health information is presented.

Offenders

Across the reporting period, there were 233,672 episodes of offending involved in all FDV incidents. Table 265 shows the proportion of episodes of offending according to year, with the total number of offences increasing by 68.63 percent between 2009 and 2013.

Table 265: Number of offenders, categorised by FV and IPV according to year, Vic (n=233,672)

	FV[a]		IPV[a]		All offenders[b]	
Year[c]	n	%	n	%	n	%
2009	10,210	13.6	21,167	15.2	34,993	15.0
2010	11,394	15.2	22,597	16.1	38,132	16.3
2011	14,024	18.7	26,073	18.7	45,002	19.3
2012	18,379	24.5	32,431	23.2	56,537	24.2
2013	21,146	28.1	37,533	26.9	59,008	25.3

a: type of violence was not categorised for 18,808 offenders

b: refers to the proportion of all offenders across incidents

c: refers to year alleged offence was committed

Table 266 shows the proportion of male and female offenders across incident type. Most offenders were male (77.5%). In the IPV offender sample, most offenders were male (82%) and as were most offenders within the FV sample (69%). Family violence had a significantly larger proportion of female offenders compared with IPV offenders, and conversely IPV offenders were more likely to be male compared with FV offenders ($p < 0.001$, Phi= 0.15).

Table 266 Proportion of offenders of FV, IPV according to gender, Vic (n=232,366)						
	FV[a]		IPV[a]		All offenders[b]	
Gender[c]	n	%	n	%	n	%
Male	51,828	69.0	114,718	82.1	181,152	77.5
Female	22,954	30.5	24,228	17.3	51,214	21.9

a: type of violence was not categorised for 18,808 offenders

b: refers to the proportion of all offenders across incidents

c: sex was unspecified for 1,306 offenders

Table 267 presents the proportion of male and female offenders across age groups. Across all offenders the greatest proportion were in the 35 to 39 year age group (14.4%). The greatest proportion of female offenders was in the 35 to 39 year age range (3.0%) whereas the greatest proportion for male offenders was in the 30 to 34, and 35 to 39 year age groups (11.4% respectively).

Table 267 Proportion of male, female and all offenders in 17 age groups, Vic (n=230,210)						
	Male[a]		Female[a]		All offenders[b]	
Age[c] (years)	n	%	n	%	n	%
<10	202	0.1	80	0.2	283	0.1
10–14	3,455	1.9	2,093	4.2	5,553	2.4
15–17	8,350	4.7	3,903	7.8	12,270	5.3
18–19	8,241	4.6	2,661	5.3	10,910	4.7
20–24	24,104	13.5	6,830	13.6	30,964	13.5
25–29	25,766	14.4	6,235	12.4	32,060	13.9
30–34	26,711	14.9	6,593	13.1	33,387	14.5
35–39	26,661	14.9	6,920	13.7	33,678	14.6
40–44	23,086	12.9	6,326	12.6	29,525	12.8
45–49	14,687	8.2	4,197	8.3	18,971	8.2
50–54	8,492	4.7	2,290	4.6	10,851	4.7
55–59	4,333	2.4	1,050	2.1	5,432	2.4
60–64	2,365	1.3	538	1.1	2,924	1.3
65–69	1,358	0.8	319	0.6	1,694	0.7
70–74	673	0.4	156	0.3	846	0.4
75–79	374	0.2	79	0.2	463	0.2
80+	322	0.2	58	0.1	399	0.2

a: the sex of 1,306 offenders was unspecified

b: refers to the proportion of all offenders within age groups

c: the age/age group of 3,462 offenders was unspecified

Table 268 presents the proportion of offenders across age groups for those involved in FV and IPV (and other relationship) incidents. The greatest proportion of offenders in FV incidents were aged between 20 and 24 years (14.5%), while IPV incidents saw a greater proportion of offenders in the 30 to 34 (17.1%) and 35 to 39 (17.0%) year age groups.

Table 268 Proportion of FV, IPV and all offenders in 17 age groups, Vic (n=230,210)

	FV[a]		IPV[a]		All offenders	
Age[c] (years)	n	%	n	%	n	%
<10	225	0.3	28	0.0	283	0.1
10–14	5,048	6.7	96	0.1	5,553	2.4
15–17	9,745	13.0	1,591	1.1	12,270	5.3
18–19	6,032	8.0	3,995	2.9	10,910	4.7
20–24	10,887	14.5	17,626	12.6	30,964	13.3
25–29	7,659	10.2	21,846	15.6	32,060	13.7
30–34	6,935	9.2	23,846	17.1	33,387	14.3
35–39	7,235	9.6	23,687	17.0	33,678	14.4
40–44	7,223	9.6	19,842	14.2	29,525	12.6
45–49	5,276	7.0	12,131	8.7	18,971	8.1
50–54	3,453	4.6	6,520	4.7	10,851	4.6
55–59	1,759	2.3	3,230	2.3	5,432	2.3
60–64	1,006	1.3	1,684	1.2	2,924	1.3
65–69	559	0.7	999	0.7	1,694	0.7
70–74	294	0.4	500	0.4	846	0.4
75–79	146	0.2	288	0.2	463	0.2
80+	136	0.2	231	0.2	399	0.2

a: type of violence was not categorised for 18,808 cases

b: refers to the proportion of all offenders within age group

c: the age/age group of 3,462 offenders was unspecified.

Table 269 Proportion of offenders by age groups and gender according to incident type, Vic (n=230,210)

Age (years)	FV[a]				IPV[a]				All offenders[b]			
	Male[d]		Female[d]		Male[d]		Female[d]		Male[d]		Female[d]	
	n	%	n	%	n	%	n	%	n	%	n	%
<10	156	0.2	68	0.1	21	0.0	7	0.0	202	0.1	80	0.0
10–14	3,122	4.2	1,922	2.6	79	0.1	17	0.0	3,455	1.5	2,093	0.9
15–17	6,622	8.8	3,111	4.1	1,071	0.8	517	0.4	8,350	3.6	3,903	1.7
18–19	4,547	6.1	1,482	2.0	3,027	2.2	964	0.7	8,241	3.5	2,661	1.1
20–24	8,270	11.0	2,612	3.5	13,947	10.0	3,655	2.6	24,104	10.3	6830	2.9
25–29	5,701	7.6	1,946	2.6	18,013	12.9	3,791	2.7	25,766	11.0	6,235	2.7
30–34	4,755	6.3	2,169	2.9	19,803	14.2	3,975	2.8	26,711	11.4	6,593	2.8
35–39	4,782	6.4	2,434	3.2	19,716	14.1	3,904	2.8	26,661	11.4	6,920	3.0
40–44	4,630	6.2	2,557	3.4	16,519	11.8	3,254	2.3	23,086	9.9	6,326	2.7
45–49	3,398	4.5	1,846	2.5	10,056	7.2	2,023	1.4	14,687	6.3	4,197	1.8
50–54	2,343	3.1	1,086	1.4	5,484	3.9	998	0.7	8,492	3.6	2,290	1.0
55–59	1,183	1.6	556	0.8	2,790	2.0	405	0.3	4,333	1.9	1,050	0.4
60–64	710	0.9	289	0.4	1,467	1.1	205	0.1	2,365	1.0	538	0.2
65–69	375	0.5	176	0.2	878	0.6	113	0.1	1,358	0.6	319	0.1
70–74	209	0.3	81	0.1	423	0.3	65	0.0	673	0.3	156	0.1
75–79	107	0.1	37	0.0	242	0.2	39	0.0	374	0.2	79	0.0
80+	104	0.1	30	0.0	204	0.1	22	0.0	322	0.1	58	0.0

a: type of violence was not categorised for 18,808 offenders

b: refers to the proportion of all offenders within age group

c: the age/age group of 3,462 offenders was unspecified

d: the sex of 1,306 offenders was unspecified, and 614 offenders had neither age or sex specified

Unique and recidivist offenders

In the study period, a total of 84,380 offenders (36.1%) were unique and 149,672 (63.8%) were recidivist offenders (see Table 270). The greatest proportion of recidivist offenders were observed in the IPV sample (65.7% of IPV offenders) compared with the FV sample (59.8% of FV offenders) ($p<0.001$, Phi= 0.06).

Table 270 Proportion of unique and recidivist offenders across incident type, Vic (n=233,543)

Offender type[b]	FV[a]		IPV[a]		All offenders	
	n	%	n	%	n	%
Unique	30,176	40.2	47,896	34.3	84,380	36.1
Recidivist	44,943	59.8	91,739	65.7	149,163	63.8

a: type of violence was not categorised for 18,808 cases/offenders

b: unique ID codes were not recorded/unspecified in 129 cases/offenders

Offender alcohol and drug use

Attending police assessed and identified offenders who they believed were affected by alcohol and other drugs, with 22.6 percent of all offenders assessed as having definitely used alcohol and 16.1 percent as having possibly used alcohol (see Tables 271 and 272). Definite drug use was identified in 6.4 percent of offenders and 18.4 percent of offenders were identified as having possibly used drugs.

Comparing offenders by incident type indicates alcohol use was more prevalent in IPV offenders, with possible alcohol use and definite alcohol use indicated in 17.4 percent and 26.0 percent of IPV offenders respectively (p<0.001, Phi=0.13). Compared with IPV and all offenders, the family violence offender's alcohol use was less prevalent, with possible alcohol use and definite alcohol use indicated in 13.8 percent and 16.8 percent of FV offenders respectively (p<0.001, Phi=0.13). Proportions of possible offender drug use were comparable across IPV, FV and all offenders, whereas definite drug use was slightly more prevalent in FV offenders (7.6% of FV offenders) (p<0.001, Phi= 0.04).

Table 271 Proportion of identified offender alcohol use across incident types, Vic (n=90,468)

	FV[a]		IPV[a]		All offenders[b]	
Identification of AOD use[c]	n	%	n	%	n	%
Alcohol possible	10,372	13.8	24,314	17.4	37,601	16.1
Alcohol definite	12,617	16.8	36,278	26.0	52,867	22.6

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within alcohol or drug use categories

c: in instances where both definite and possible use were endorsed for substances (alcohol or drugs), use was classified as definite with alcohol use unspecified for 143,204 offenders

Table 272 Proportion of identified offender drug use across incident types, Vic (n=58,103)

	FV[a]		IPV[a]		All offenders[b]	
Identification of AOD use[c]	n	%	n	%	n	%
Drugs possible	14,381	19.1	25,533	18.3	43,061	18.4
Drugs definite	5,721	7.6	8,261	5.9	15,042	6.4

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within alcohol or drug use categories

c: in instances where both definite and possible use were endorsed for substances (alcohol or drugs), use was classified as definite with use unspecified for 175,569 offenders

Offender mental health

Attending police assessed and identified offenders whom they believed were affected by depression and/or mental health issues as well as suicidal ideation and/or attempts (see Tables 273 and 274). Some 15.6 percent of all offenders were assessed as having depression/mental health issue and 3.5 percent as having suicidal ideation/attempt. Family violence offenders had a larger proportion of identified mental health issues (20.2% of FV offenders) compared with IPV (13.7% of IPV offenders) and all offenders (p<0.001, Phi=-0.09). Proportions of offenders with suicidal ideation/attempts were consistent across incident types.

Table 273 Proportion of identified offender mental health across incident types, Vic (n=36,567)

	FV[a]		IPV[a]		All offenders[b]	
Identification of mental health issue[c]	n	%	n	%	n	%
Depression/mental health issue	15,155	20.2	19,106	13.7	36,567	15.6

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within mental health and suicidal ideation groups

c: depression and/or mental health issues were unspecified for 197,105 offenders

Table 274 Proportion of identified offender suicidal ideation/attempt across incident types, Vic (n=8,065)						
Identification of mental health issue[c]	FV[a]		IPV[a]		All offenders[b]	
	n	%	n	%	n	%
Suicidal ideas/attempt suicide	2,689	3.6	4,801	3.4	8,065	3.5

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within mental health and suicidal ideation groups

c: suicidal ideation and/or attempt were unspecified for 225,607 offenders

Intervention order initiation and breach

Across the study period, attending police documented instances where an offender breached an existing intervention order (which is classified as criminal abuse) as well as occasions when attending police sought an intervention order against the offender (on behalf of victim). As shown in Table 275, 5.4 percent of all offenders were identified as having breached an intervention order, with 2.3 percent identified as having breached an order in addition to other offences. A total of 17.0 percent of all offenders had an intervention order sought by police against them, with proportions consistent across incident type. Breach of intervention order only was more prominent in IPV (6.6% of IPV offenders) compared with FV (3.2% of FV offenders) ($p<0.001$, Phi=0.07).

Table 275 Number of intervention orders breached by FV, IPV and all offenders and intervention orders sought by police, Vic (n=233,672)						
IVO[c]	FV[a]		IPV[a]		All offenders[b]	
	n	%	n	%	n	%
Breach IVO only	2,398	3.2	9,275	6.6	12,653	5.4
Breach IVO and other	1,141	1.5	3,972	2.8	5,383	2.3
Intervention order sought by police	12,793	17.0	23,999	17.2	39,629	17.0

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within intervention order groups

c: there were unspecified cases for the following offender groups—breach IVO only (221,019 offenders); breach IVO & other (228,247 offenders); and intervention order sought by police (190,043 offenders)

Offender risk assessment

Attending police assessed the future risk that offenders posed to victims, as a likely or unlikely (see Table 276). Of the offenders across all incident types, 35.1 percent were assessed as posing a likely future risk to the victim, and 39.2 percent were assessed as posing an unlikely future risk to the victim. These proportions were consistent across all incident types.

Table 276 Proportion of offenders at FV, IPV and all incidents according to level of risk, Vic (n=173,636)						
Future risk[c]	FV[a]		IPV[a]		All offenders[b]	
	n	%	n	%	n	%
Likely	29,359	39.1	48,206	34.5	82,061	35.1
Unlikely	27,622	36.8	58,395	41.8	91,575	39.2

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within intervention order groups

c: assessment of future risk was not included for 60,036 offenders

Offender socioeconomic index

The Australian Bureau of Statistics developed the Socio-Economic Indexes for Areas (SEIFA) from the 2011 Census data to determine areas of socioeconomic advantage and disadvantage. To calculate the disadvantage within each defined area, the SEFIA scores of disadvantage are based on areas defined by the Australian Statistical Geography Standard, and measures resources such as economic resources, and education and occupation opportunities. Each area is given an index score as to how disadvantaged it is socioeconomically. This is not a rating of the individuals in these areas, but indicates allocation of funds, jobs and education prospects within these areas. These index scores can then be transformed into ordinal measures, such as quintiles, for better interpretation. The analyses in this report use quintiles of socioeconomic disadvantage where zero to 20 percent are areas that are the most socioeconomically disadvantaged, through to where 81 to 100 percent are areas that are the most socioeconomically advantaged. The SEIFA quintiles were linked for each state where postcode was available (see Table 305 in Appendix B).

Table 277 presents the proportions of all offenders and across incident types according to socioeconomic advantage/disadvantage. Almost a third of offenders across all incident types were classified in the most disadvantaged SEIFA quintile (31.7%). Comparable proportions of SEIFA quintiles were not noted between IPV and FV offenders (p<0.001, Phi= 0.03).

Table 277 SEIFA Proportions across offender types, Vic (n=233,672)

	FV[a]		IPV[a]		All offenders[b]	
SEIFA disadvantage quintile[c]	n	%	n	%	n	%
1 (most disadvantaged)	24,050	32.0	43,914	31.4	74,061	31.7
2	14,036	18.7	28,175	20.2	45,696	19.6
3	15,747	21.0	30,506	21.8	50,501	21.6
4	10,748	14.3	18,103	13.0	31,295	13.4
5 (least disadvantaged)	10,520	14.0	18,927	13.5	31,967	13.7

a: type of violence was not categorised for 18,808 cases/offenders

b: refers to the proportion of all offenders within intervention order groups

c: SEIFA quintiles were missing/not computed for 152 (0.1%) offenders

Victims

Table 278 shows the proportion of male and female victims across incident types. A total of 232,742 incidents of victimisation were reported across the reporting period, with most being female (76.0%) and 23.6 percent being male.

Intimate partner violence had a greater proportion of females (81.9% of IPV victims) compared with family violence (65.1% of FV victims were female) and all victims. Family violence had a larger proportion of male victims (34.5%) compared with IPV (p<0.001, Phi=0.19).

Table 278 Proportion of victims at FV, IPV according to gender, Vic (n=232,742)

	FV[a]		IPV[a]		All offenders[b]	
Gender[c]	n	%	n	%	n	%
Male	25,910	34.5	24,709	17.7	55,114	23.6
Female	48,942	65.1	114,452	81.9	177,628	76.0

a: type of violence was not categorised for 18,808 victims

b: refers to the proportion of all victims across incidents

c: sex was unspecified for 930 victims

Table 279 presents the proportion of male and female victims across age groups. Across all victims the greatest proportion were in the 35 to 39 year age group (13.1%). The greatest proportion of female victims was in the 25 to 29 year age range (10.1%) whereas the greatest for male victims was in the 40 to 44 year age group (2.7%).

Table 279 Proportion of male, female and all victims in seventeen age groups, Vic (n=230,352)

	Male[a]		Female[a]		All victims[b]	
Age[c] (years)	n	%[a]	n	%[a]	n	%
<10	2,055	0.9	1,887	0.8	3,950	1.7
10–14	2,699	1.2	3,984	1.7	6,697	2.9
15–17	2,477	1.1	6,724	2.9	9,214	3.9
18–19	1,882	0.8	7,659	3.3	9,552	4.1
20–24	5,184	2.2	23,673	10.1	28,918	12.4
25–29	5,322	2.3	23,763	10.2	29,193	12.5
30–34	5,546	2.4	23,502	10.1	29,141	12.5
35–39	5,954	2.5	24,466	10.5	30,508	13.1
40–44	6,261	2.7	22,416	9.6	28,783	12.3
45–49	5,313	2.3	15,235	6.5	20,628	8.8
50–54	4,156	1.8	9,072	3.9	13,291	5.7
55–59	2,847	1.2	5,268	2.3	8,167	3.5
60–64	1.938	0.8	3,319	1.4	5,298	2.3
65–69	1,256	0.5	1,816	0.8	3,096	1.3
70–74	786	0.3	1,088	0.5	1,891	0.8
75–79	419	0.2	696	0.3	1,125	0.5
80+	293	0.1	593	0.3	900	0.4

a: the sex of 930 victims was unspecified

b: refers to the proportion of all victims within age groups

c: the age/age group of 3,320 victims was unspecified

Table 280 presents the proportion of victims across age groups for those involved in FV and IPV (and other relationship) incidents. The greatest proportion of victims in FV incidents were aged between 40 and 44 years (11.1%), with the greatest proportion of IPV victims in the 25 to 29 (16.5%) and 30 to 34 (16.5%) year age groups.

Table 280 Proportion of FV, IPV and all victims in 17 age groups, Vic (n=230,352)

	FV[a]		IPV[a]		All victims[b]	
Age[c] (years)	n	%[a]	n	%[a]	n	%
<10	3,496	4.7	93	0.1	3,950	1.7
10–14	5,773	7.7	312	0.2	6,697	2.9
15–17	5,718	7.6	2,744	2.0	9,214	3.9
18–19	3,152	4.2	5,617	4.0	9,552	4.1
20–24	5,636	7.5	21,036	15.1	28,918	12.4
25–29	3,728	5.0	23,105	16.5	29,913	12.5
30–34	3,841	5.1	23,035	16.5	29,141	12.5
35–39	5,793	7.7	22,273	15.9	30,508	13.1
40–44	8,313	11.1	18,212	13.0	28,783	12.3
45–49	8.086	10.8	10,779	7.7	20,628	8.8
50–54	6,816	9.1	5,413	3.9	13,291	5.7
55–59	4,921	6.5	2,621	1.9	8,167	3.5
60–64	3,486	4.6	1,405	1.0	5,298	2.3
65–69	2,126	2.8	701	0.5	3,096	1.3
70–74	1,329	1.8	414	0.3	1,891	0.8
75–79	794	1.1	238	0.2	1,125	0.5
80+	670	0.9	161	0.1	900	0.4

a: type of violence was not categorised for 18,808 cases/victims

b: refers to the proportion of all offenders within age group

c: the age/age group of 3,320 victims was unspecified

Table 281 Proportion of victims by age groups and gender according to incident type, Vic (n=229,589)

Age[c] (years)	FV[a]				IPV[a]				All victims[b]			
	Male[d]		Female[d]		Male[d]		Female[d]		Male[d]		Female[d]	
	n	%	n	%	n	%	n	%	n	%	n	%
<10	1,827	2.4	1,663	2.2	51	0.0	42	0.0	2,055	0.9	1,887	0.8
10–14	2,406	3.2	3,354	4.5	43	0.0	269	0.2	2,699	1.2	3,984	1.7
15–17	2,084	2.8	3,622	4.8	175	0.1	2,568	1.8	2,477	1.1	6,724	2.9
18–19	1,236	1.6	1,914	2.5	496	0.4	5,114	3.7	1,882	0.8	7,659	3.3
20–24	2,241	3.0	3.377	4.5	2,544	1.8	18,455	13.2	5,184	2.2	23,673	10.1
25–29	1,576	2.1	2,142	2.9	3,310	2.4	19,703	14.1	5,322	2.3	23,763	10.2
30–34	1,205	1.6	2,627	3.5	3,921	2.8	19,039	13.6	5,546	2.4	23,502	10.1
35–39	1,318	1.8	4,466	5.9	4,153	3.0	18,044	12.9	5,954	2.5	24,466	10.5
40–44	2,016	2.7	6,270	8.3	3,782	2.7	14,358	10.3	6,261	2.7	22,416	9.6
45–49	2,214	2.9	5,839	7.8	2,615	1.9	8,122	5.8	5,313	2.3	15,235	6.5
50–54	2,185	2.9	4,607	6.1	1,622	1.2	3,757	2.7	4,156	1.8	9,072	3.9
55–59	1,730	2.3	3,165	4.2	892	0.6	1,707	1.2	2,847	1.2	5,268	2.3
60–64	1,354	1.8	2,113	2.8	440	0.3	948	0.7	1,938	0.8	3,319	1.4
65–69	929	1.2	1,180	1.6	218	0.2	479	0.3	1,256	0.5	1,816	0.8
70–74	589	0.8	729	1.0	131	0.1	277	0.2	786	0.3	1,088	0.5
75–79	319	0.4	468	0.6	73	0.1	163	0.1	419	0.2	696	0.3
80+	218	0.3	440	0.6	53	0.0	106	0.1	293	0.1	593	0.3

a: type of violence was not categorised for 18,808 victims

b: refers to the proportion of all victims within age group

c: the age/age group of 3,320 victims was unspecified

d: the sex of 930 victims was unspecified, and 127 victims had neither age nor sex specified

Unique and repeat victims

Across the study period, 96,163 victims (41.2% of all victims) were unique and 137,500 (58.8%) were repeat victims (see Table 282). The greatest proportion of repeat victims was in intimate partner violence (63.5% of IPV victims) compared with repeat family violence (49.7% of FV victims) (p<0. 001, phi= 0.13).

Table 282 Proportion of unique and repeat victims across incident types, Vic (n=233,663)

Victim type[c]	FV[a]		IPV[a]		All victims[b]	
	n	%	n	%	n	%
Unique	37,820	50.3	51,034	36.5	96,163	41.2
Repeat	37,330	49.7	88,674	63.5	137,500	58.8

a: type of violence was not categorised for 18,808 victim

b: refers to the proportion of all victims within unique or repeat victim groups

c: unique ID codes for were not recorded/unspecified for 9 victims/cases

Victim alcohol and drug use

As well as measuring and assessing offender AOD use, attending police also identified victims who they believed—based on their own observation and opinion—were affected by alcohol and other drugs. They assessed 13.7 percent of all victims as having definitely used alcohol and 13.1 percent as having possibly used alcohol (see Tables 283 and 284). Definite drug use was identified in 2.4 percent of victims, with 11.1 percent of victims being identified as having possibly used drugs.

Alcohol use was more prevalent in intimate partner violence, with possible and definite alcohol use indicated in 14.9 percent and 16.2 percent of IPV victims respectively. Compared with IPV and all victims, alcohol use in FV was less prevalent, with possible and definite alcohol use indicated in 9.7 percent and 8.8 percent of FV victims respectively (p<0. 001, Phi= 0.14). Drug use was more prevalent in IPV (12.8% and 2.8% of IPV victims respectively) compared with FV (8.2 and 1.8% of FV victims respectively)—p<0.001, Phi= 0.08.

Table 283 Proportion of identified victim alcohol use across incident types, Vic (n=62,429)

	FV[a]		IPV[a]		All victims[b]	
Identification of AOD use[c]	n	%	n	%	n	%
Alcohol possible	7,275	9.7	20,828	14.9	30,521	13.1
Alcohol definite	6,615	8.8	22,645	16.2	31,908	13.7

a: type of violence was not categorised for 18,808 victims

b: refers to the proportion of all victims within substance use groups

c: in instances where both definite and possible use were endorsed, use was classified as definite, with alcohol use unspecified for 171,243 victims

Table 284 Proportion of identified victim drug use across incident types, Vic (n=31,615)

	FV[a]		IPV[a]		All victims[b]	
Identification of AOD use[c]	n	%	n	%	n	%
Drugs possible	6,171	8.2	17,883	12.8	26,015	11.1
Drugs definite	1,348	1.8	3,845	2.8	5,600	2.4

a: type of violence was not categorised for 18,808 victims

b: refers to the proportion of all victims within substance use groups

c: in instances where both definite and possible use were endorsed, use was classified as definite, with drug use unspecified for 202,057 victims

Victim mental health

Attending police assessed, based on their own observation and opinion, and identified victims who they believed were affected by depression and/or mental health issues as well as suicidal ideation and/or attempts (see Table 285). Of all victims, 10.8 percent were assessed as having depression/mental health issue and 1.2 percent as having suicidal ideation/attempt. Proportions of victims with both depression/mental health issues and suicidal ideation/attempts were consistent across incident types.

Table 285 Proportion of identified victim mental health and suicidal ideation/attempt across incident types, Vic (n=26,191)

	FV[a]		IPV[a]		All victims[b]	
Mental health issue[c]	n	%	n	%	n	%
Depression/mental health issue	7,918	10.5	15,770	11.3	25,330	10.8
Suicidal ideas/attempt suicide	792	1.1	1,781	1.3	2,744	1.2

a: type of violence was not categorised for 18,808 cases/victims

b: refers to the proportion of all offenders within mental health and suicidal ideation groups

c: depression/mental health was unspecified for 208,342 victims, suicidal ideation/attempt was unspecified for 230,928 victims

d: 1,883 victims were identified at having both depression/mental issues and suicidal ideas/attempt

Victoria summary

Only person-level (offender and victim) Victorian police data was obtained. Across the reporting period (2009–13) 233,672 offenders were in all family and domestic violence incidents. Most offenders were male (77.5%) and most victims were female (76.0%).

A significantly higher proportion of IPV offenders were male compared with FV offenders (IPV: 82.0%; FV: 69%, p<0.001, Phi=0.15). Conversely a significantly greater proportion of IPV victims were females compared with FV (IPV: 81.9%; FV: 65.1%; p<0.001, Phi=0.19). Most offenders (68.3%) and most victims (62.8%) were concentrated within the 20 to 44 year age bracket.

Across the study period, a total of 84,380 offenders (36.1%) were unique and 149,672 (63.8%) were recidivist offenders. Further, 96,163 victims (41.2% of all victims) were unique and 137,500 (58.8%) were repeat victims. The greatest proportion of recidivist offenders and repeat victims were observed in the IPV sample (65.7% of IPV offenders and 63.5% of IPV victims) compared with the FV sample—59.8% of FV offenders and 49.7% of IPV victims (p<0.001, phi= 0.06; p<0.001, phi=0.13). Almost a third of offenders across all incident types were classified in the most disadvantaged SEIFA quintile (31.7%).

Attending police assessed and identified offenders who they believed were affected by alcohol and other drugs, with 22.6 percent of all offenders assessed as having definitely used alcohol and 16.1 percent as having possibly used alcohol. Alcohol use was more prevalent in IPV offenders, with possible alcohol use and definite alcohol use indicated in 17.4 percent and 26.0 percent of IPV offenders, and 13.8 percent and 16.8 percent of FV offenders, respectively (p<0.001, Phi=0.13).

Attending police judged 13.7 percent of all victims as having definitely used alcohol and 13.1 percent as having possibly used alcohol. Alcohol use was more prevalent in IPV, with possible and definite alcohol use indicated in 14.9 percent and 16.2 percent of IPV victims, and 9.7 percent and 8.8 percent of FV victims, respectively (p<0.001, Phi=0.14).

Definite drug use was identified in 6.4 percent of offenders, and 18.4 percent of offenders were identified as having possibly used drugs. Proportions of possible offender drug use were comparable across IPV, FV and all offenders, whereas definite drug use was slightly more prevalent in FV offenders (7.6% of FV offenders vs 5.9% IPV offenders; p<0.001, Phi=0.04).

Definite drug use was identified in 2.4 percent of victims, and 11.1 percent of victims were identified as having possibly used drugs. Drug use was more prevalent in IPV (12.8% and 2.8% of IPV victims respectively) compared with FV—8.2 and 1.8% of FV victims respectively (p<0.001, Phi=0.08).

Western Australia police data results

The following examines trends for domestic violence incidents attended by WA police between 2009 and 2014. They are presented separately for individuals and incidents. These findings relate to DV incidents involving intimate partners and other family members. As WA police did not record the relationship between victim and offender, incidents of IPV and FV cannot be compared.

Individuals

Demographic and alcohol intoxication level are presented for offenders and victims.

Offenders

There were 67,508 offenders across the 102,167 DV incidents attended by WA police during the study period. Of the 28,300 unique offenders, 10,062 were recidivist offenders.

Most offenders were male (83.3%) across all age groups (see Table 286). More than half (56.3%) were aged between 18 and 34 years at the time of offence, and almost 90 percent were aged between 18 and 49 years at the time of the offence. A total of 28.2 percent of all offenders were identified as Aboriginal or Torres Strait Islander.

Table 286 Proportion of female and male offenders by age group, WA (n=67,508)[a]

	Female		Male		All offenders[b]	
Age (years)	n	%	n	%	n	%
5–11	21	16.8	102	81.6	125	0.2
12–17	1,186	26.0	3,344	73.3	4,565	6.7
18–24	2,474	17.2	11,857	82.5	14,375	21.2
25–34	3,480	14.7	20,069	85.0	23,616	34.7
35–49	3,272	15.1	18,254	84.4	21,621	31.8
50–59	486	16.3	2,468	83.0	2,974	4.4
60–69	64	11.4	490	87.0	563	0.8
70–84	7	6.0	105	90.5	116	0.2
85+	0	0.0	5	100.0	5	0.0

a: offender sex could not be coded for 250 offenders

b: indicates proportion of all offenders. Gender was not available for 276 offenders

Table 287 shows that offenders were most likely to be classified in the third SEIFA disadvantage quintile, followed by the first (most disadvantaged), fourth, fifth (least disadvantaged) and second quintiles.

Table 287 Proportion of offenders according to socioeconomic disadvantage, WA (n=67,267)[a]

SEIFA disadvantage quintile	n	%
1 (most disadvantaged)	14,947	22.2
2	6,290	9.4
3	22,120	32.9
4	13,080	19.4
5 (least disadvantaged)	10,830	16.1

a: offender postcode could not be coded into SEFIA quintiles for 241 offenders

Victims

A total of 126,661 victims were recorded across all domestic violence incidents in Western Australia during the reporting period. Of the 62,850 unique victims, 19,429 were repeat victims. Table 288 shows the proportion of female and male victims across age groups (the sex of 4,332 victims was unknown). Overall, 73.9 percent of victims were female, 22.6 percent were male, and four were of unknown sex. For the younger (0–11 years) and older (60–85+) age groups the proportion of female to male victims was more symmetrical. More than 80 percent of victims aged between 18 and 34 years were female. Some 29.9 percent of all victims were identified as Aboriginal or Torres Strait Islander.

Table 288 Proportion of victims by gender and age group, WA (n=126,661)[a]						
	Female		Male		All victims[b]	
Age (years)	n	%	n	%	n	%
0–4	516	48.1	525	48.9	1,073	0.9
5–11	1,092	49.5	1,064	48.2	2,207	1.8
12–17	4,944	71.6	1,866	27.0	6,908	5.5
18–24	19,815	83.3	3,751	15.8	23,781	18.9
25–34	29,038	80.7	6,602	18.4	35,962	28.6
35–49	29,032	74.9	9,302	24.0	38,777	30.9
50–59	5,964	63.3	3,319	35.2	9,427	7.5
60–69	1,838	55.5	1,422	42.9	3,314	2.6
70–84	563	51.4	503	45.9	1,096	0.9
85 and over	45	52.9	38	44.7	85	0.1

a: victim age was not available for 2,942 victims

b: refers to the proportion of all victims within this age group

A higher proportion of child victims were female (64.3%) compared with male child victims (33.9%).

Table 289 Proportion and gender incidents involving a child victim per year, WA (n=1,731)				
	Female		Male	
	n	%	n	%
2009	955	66.1	467	32.3
2010	888	65.3	449	33.0
2011	1,069	65.5	545	33.4
2012	1,186	64.2	621	33.6
2013	1,267	62.4	729	35.9
2014	1,187	63.4	644	34.4

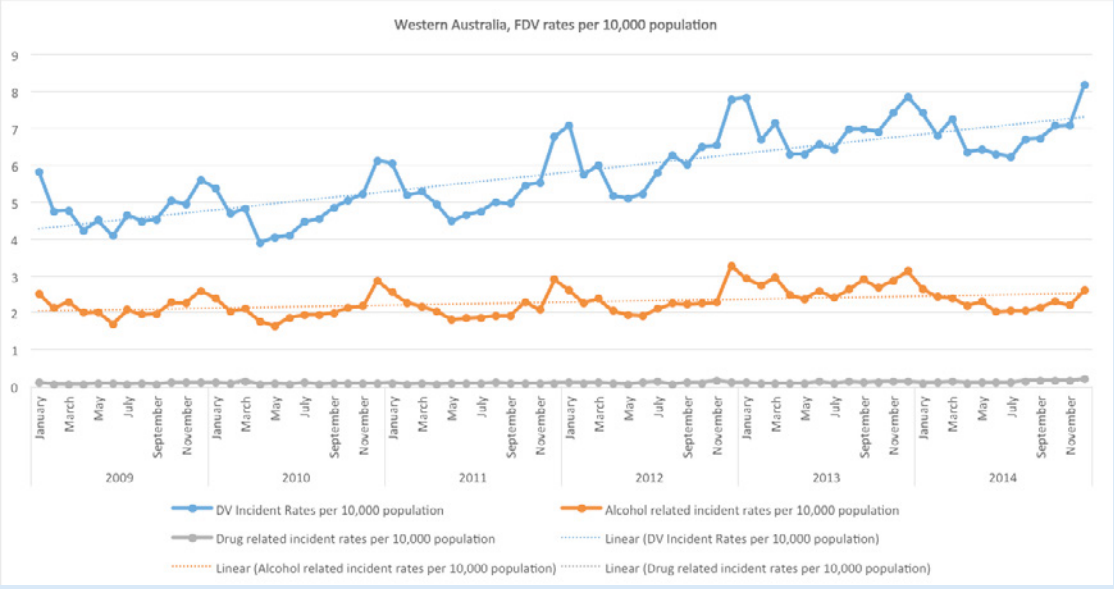
Incidents

Western Australian police attended 102,167 domestic violence incidents across the reporting period. Table 290 shows the incidence rate of DV incidents per 10,000 people across the reporting period.

Table 290 Proportion of DV incidents per year, WA (n=102,167)		
Year	n	Rate per 10,000
2009	13,024	57.5
2010	13,295	57.3
2011	15,126	63.2
2012	18,202	73.4
2013	21,203	83.6
2014	21,317	82.7

Figure 83 shows that the rates of all FDV incidents per 10,000 people increased between 2009 and 2014. This trend is also presented for alcohol- and drug-related incidents.

Figure 83 Alcohol, drug, and all incident rates per 10,000 population over reporting period, WA



Socioeconomic disadvantage

Incident locations were classified into one of five levels of socioeconomic disadvantage according to the ABS Socio-Economic Indexes for Areas (SEIFA)—see Table 291. Postcodes were not available for more than half of the incidents (55.0%, n=56,169).

Table 291 DV incident location according to socioeconomic disadvantage, WA (n=45,998)

SEIFA disadvantage quintile	n	%
1 (most disadvantaged)	10,577	23.0
2	3,915	8.5
3	15,077	32.8
4	8,780	19.1
5 (least disadvantaged)	7,649	16.6

The highest proportion of incidents took place within the third (32.8%) and first (23.0%) SEIFA quintiles, while the lowest proportion occurred in the second SEIFA quintile (8.5%).

Alcohol-related incidents

Police flagged fewer than half (39.3%) of all DV incidents as alcohol-related. Table 292 shows that the proportion of DV incidents flagged as alcohol-related by police, decreased over the reporting period from 45.1 percent in 2009 to 33.3 percent in 2014 ($p<0.001$, Phi=-0.12).

Table 292 Proportion of DV incidents flagged as alcohol-related by police per year, WA (n=40,183)		
Year	n	%
2009	5,875	45.1
2010	5,808	43.7
2011	6,189	40.9
2012	6,875	37.8
2013	8,343	39.3
2014	7,093	33.3

Drug-related offence

Few (1.9%) family and domestic violence incidents involved a drug offence. Using offence categories, incidents were coded as involving a drug-related offence when the offence was either a 'drug offences', 'receiving/illegal use', or 'drugs (other)'. Table 293 shows that the proportion of incidents involving a drug offence remained relatively steady over the reporting period, varying 0.1 to 0.2 percent per year over that time. This difference was not significant ($p>0.05$). Since August 2013, WA police have recorded whether or not the individuals involved in an FDV incident have a 'drug-history' (ie the victim or the offender had problems in the past with drugs). Since this time, 17.9 percent of incidents were flagged positive for drug history, 32.2 percent as not positive, and 18.3 percent as 'unknown'.

Table 293 Proportion of DV incidents involving a drug offence(s) per year, WA (n=102,167)		
Year	n	%
2009	248	1.9
2010	271	2.0
2011	267	1.8
2012	329	1.8
2013	361	1.7
2014	439	2.1

Child witnesses

Western Australian police have recorded the presence of a child presence at family and domestic violence incidents since August 2013. Since then, children were flagged as present in 8.8 percent of FDV incidents. Table 294 shows the proportion of child-witnessed offences was greatest in the second and third SEIFA disadvantage quintiles and lowest in the first, fourth and fifth quintiles.

Table 294 Proportion of DV incidents where a child was present according to level of socioeconomic disadvantage, WA (n=45,998)		
SEIFA disadvantage quintile	n	%
1 (most disadvantaged)	663	6.3
2	403	10.3
3	1,550	10.3
4	752	8.6
5 (least disadvantaged)	699	9.1

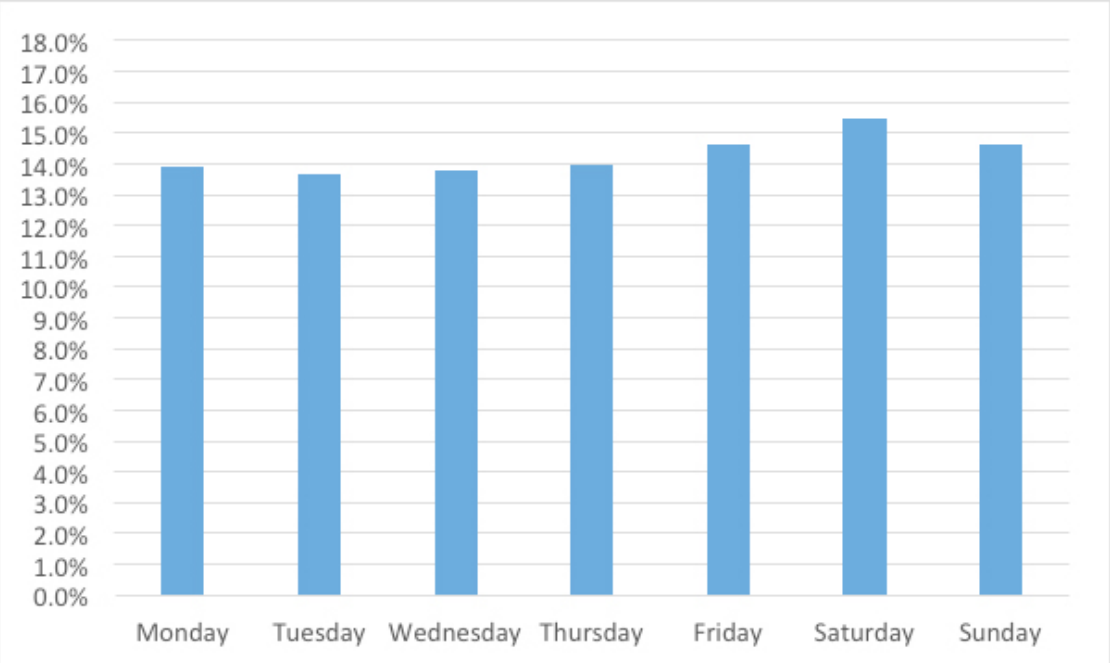
Substance use

A significantly lower proportion of child-witnessed incidents were flagged as alcohol-related (29.5%) compared with incidents not witnessed by children (38.7%, p<0.001, Phi=-0.09). A significantly lower proportion of incidents witnessed by children involved a drug-related offence (1.8%) than incidents not witnessed by children (2.1%, p<0.05); however, the size of this effect was very small (Phi=-0.01).

Day and time of incident

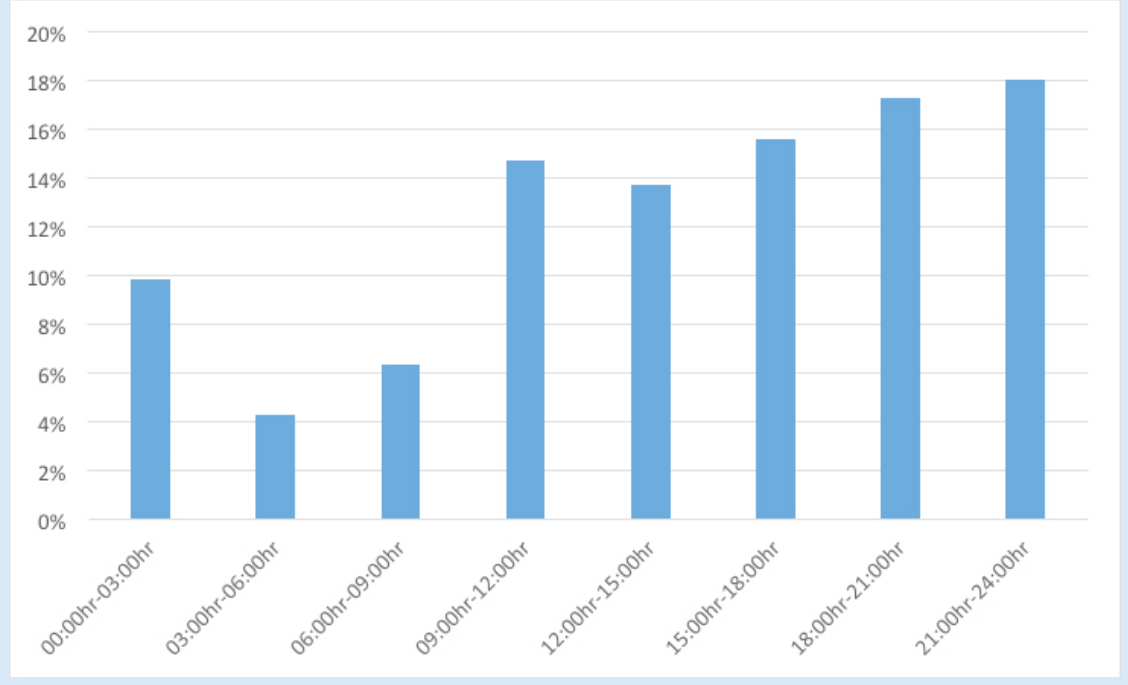
The day and time at which FDV incidents occurred are shown in Figure 84 and Figure 85 respectively.

Figure 84 Proportion of FDV incidents that took place on each day of the week, WA (n=102,167)



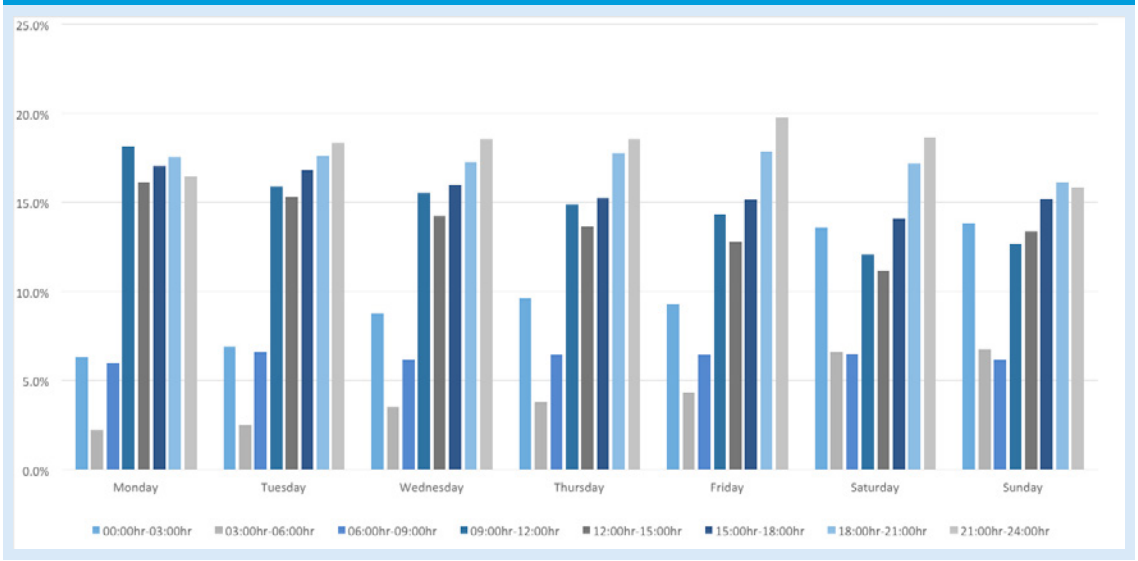
A greater proportion of DV incidents took place on Saturday (15.5%), Friday (14.6%), and Sunday (14.6%) than on weekdays (13.7–14.0%).

Figure 85 Proportion of FDV incidents during three-hour intervals, WA (n=102,167)



The proportion of incidents that took place during each three-hour interval generally increased over the daytime hours from 9 am to 12 am and decreased thereafter.

Figure 86 Proportion of FDV incidents that occurred each day of the week in three-hour blocks, WA (n=102,167)



As shown in Figure 86, when day of the week and time of day are considered together from Monday to Wednesday, the lowest proportion of incidents took place between 12 am and 6 am. However, on Saturdays and Sundays a greater proportion of incidents took place from 12 am to 6 am.

Alcohol-related incidents

Figure 87 shows that alcohol-related incidents were least likely to take place on Monday (29.0% alcohol-related, $p<0.001$), and most likely on Saturday (50.0% alcohol-related, $p<0.001$). Further, alcohol-related incidents most often occurred between 9 pm and 6 am, and least often between 9 am and 3 pm (see Figure 88). Considering day of week and time of day together (see Figure 89), approximately 50 percent of alcohol-related incidents taking place during the week (Monday–Friday) occurred between 6 pm and 12 am. On Saturdays, 20 percent of alcohol-related incidents took place between 12 am and 3 am and about 40 percent of incidents took place from 6 pm to 12 am. On Sundays, 25 percent of alcohol-related incidents took place between 12 am and 3 am and 35 percent of incidents between 6 pm and 12 am. In general, across all days, alcohol-related incidents were least likely to occur from 6 am to 3 pm.

Drug-related incidents

No significant difference was evident in the proportion of drug-related offences across each day of the week ($p>0.05$). The proportion of incidents involving a drug-related offence peaked between 9 pm and 12 pm at 2.1 percent ($p<0.05$), and was lowest from 12 pm to 3 pm ($p<0.05$). The number of incidents flagged for involving drug-related offences was too low to analyse trends across time of day for each day of the week (see Figure 90).

Figure 87 Proportion of alcohol-related FDV incidents that took place on each day of the week, WA (n=40,183)

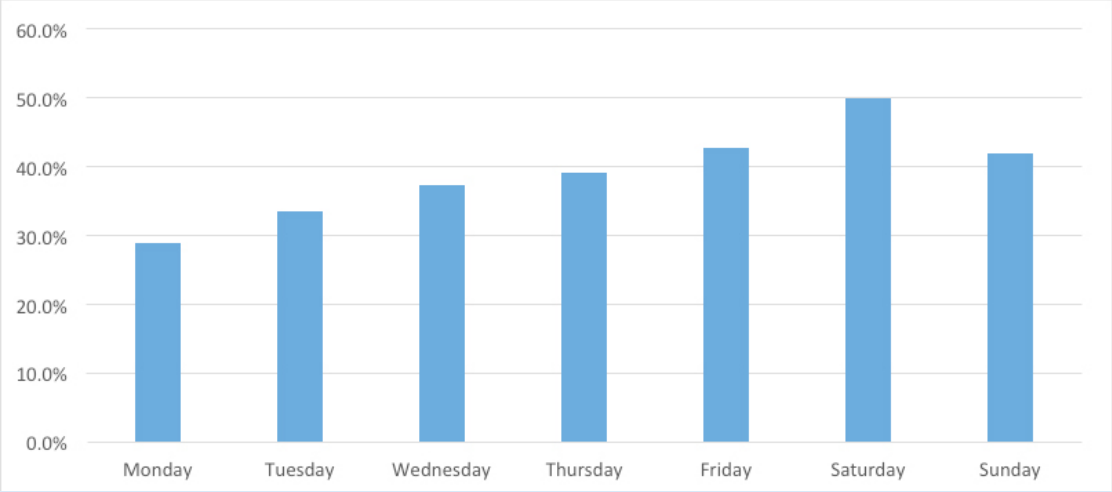


Figure 88 Proportion of FDV incidents that were alcohol-related during three-hour intervals, WA (n=40,183)

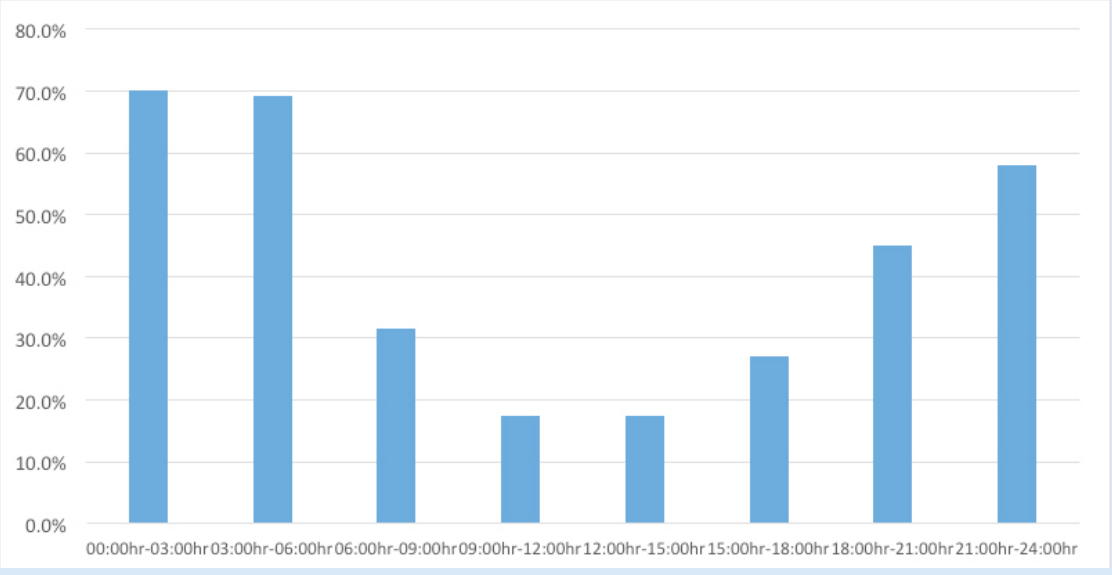


Figure 89 Proportion of FDV incidents, that were alcohol-related, that took place on each day of the week, WA (n=40,183)

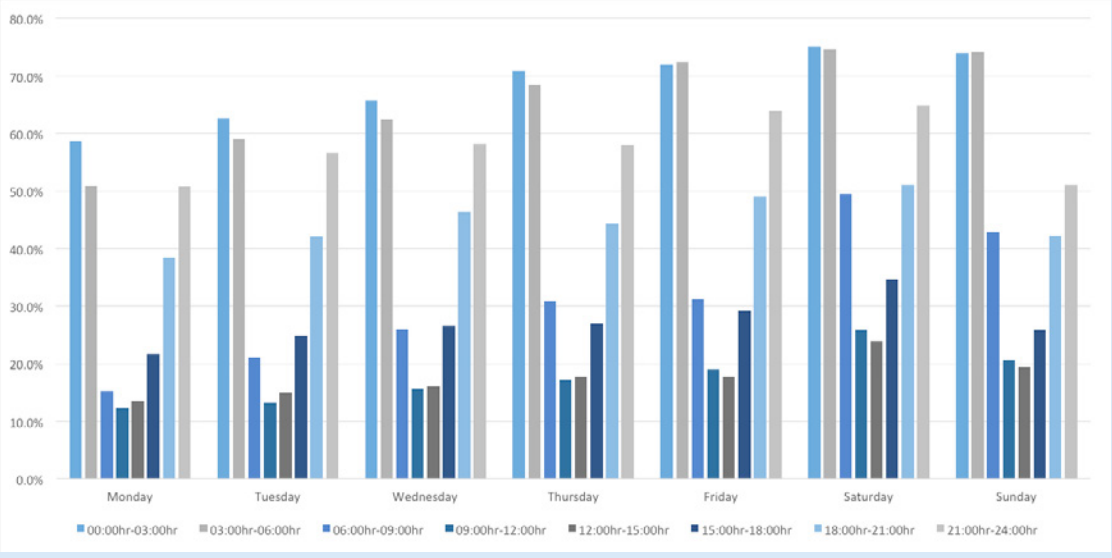
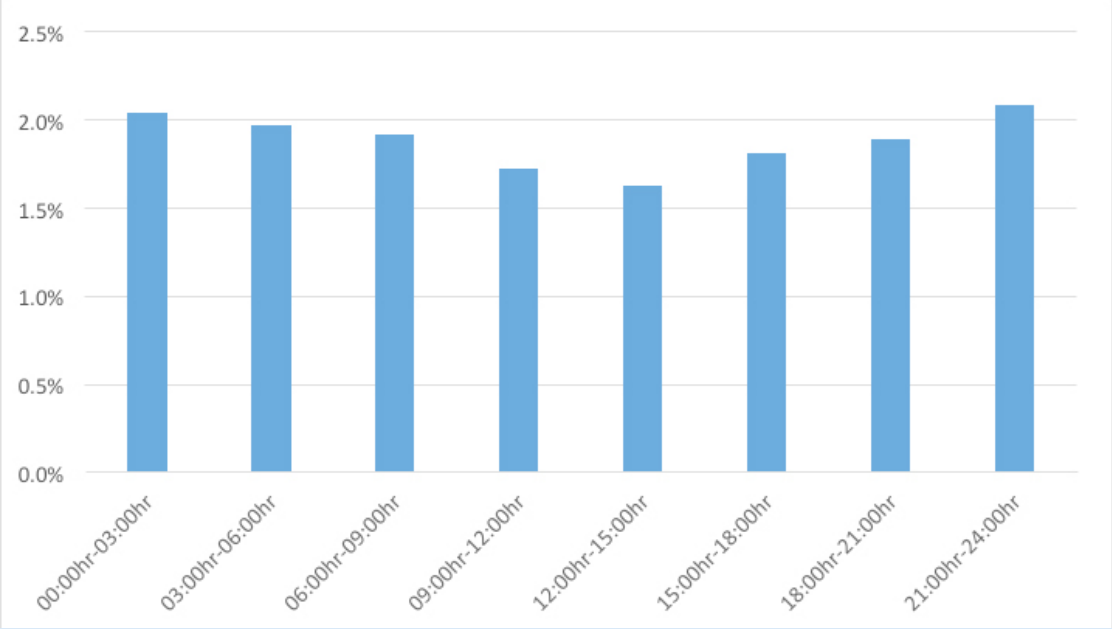


Figure 90 Proportion of FDV incidents flagged as drug related that took place during three-hour intervals, WA (n=1,915)



Child presence

Figure 91 shows that children were least likely to witness FDV incidents on a Thursday (36.0% witnessed by children, $p<0.001$) and most likely to witness FDV incidents that took place on a Sunday (44.3% witnessed by children, $p<0.001$). Figure 92 shows that children were less likely to witness incidents that took place between 12 am and 6 am ($ps<0.001$), and most likely to witness incidents between 6 and 9 am ($p<0.001$). In general, the proportion of child-witnessed FDV incidents was consistent across each day of the week and each time interval. On Fridays and Saturdays about 30 percent of incidents witnessed by children occurred between 6 pm and 3 am.

Figure 91 Proportion of FDV incidents witnessed by children that took place on each day of the week (August 2013–December 2014 only) WA (n=11,988)

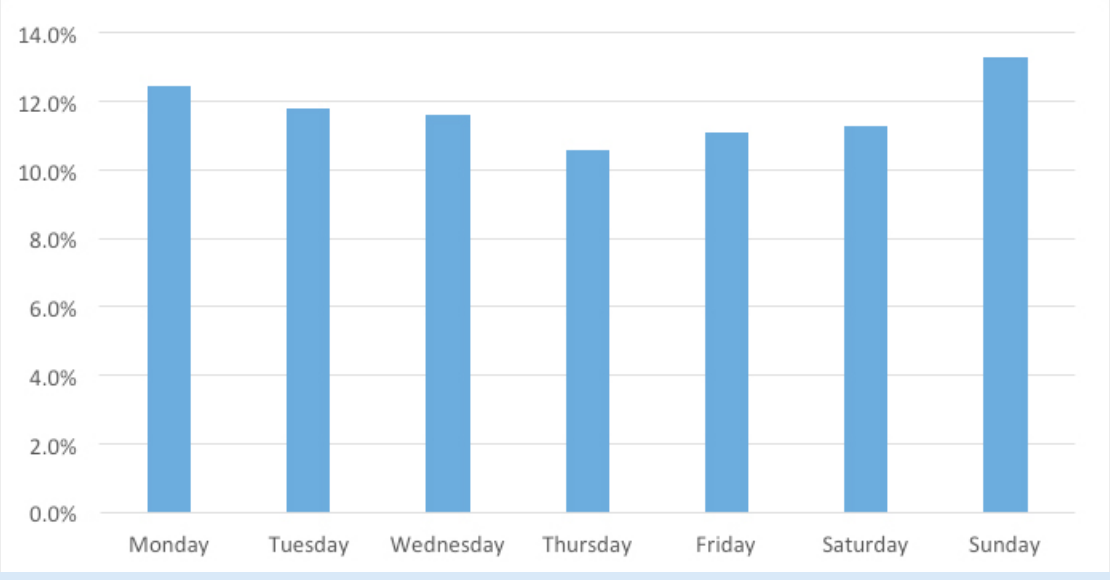
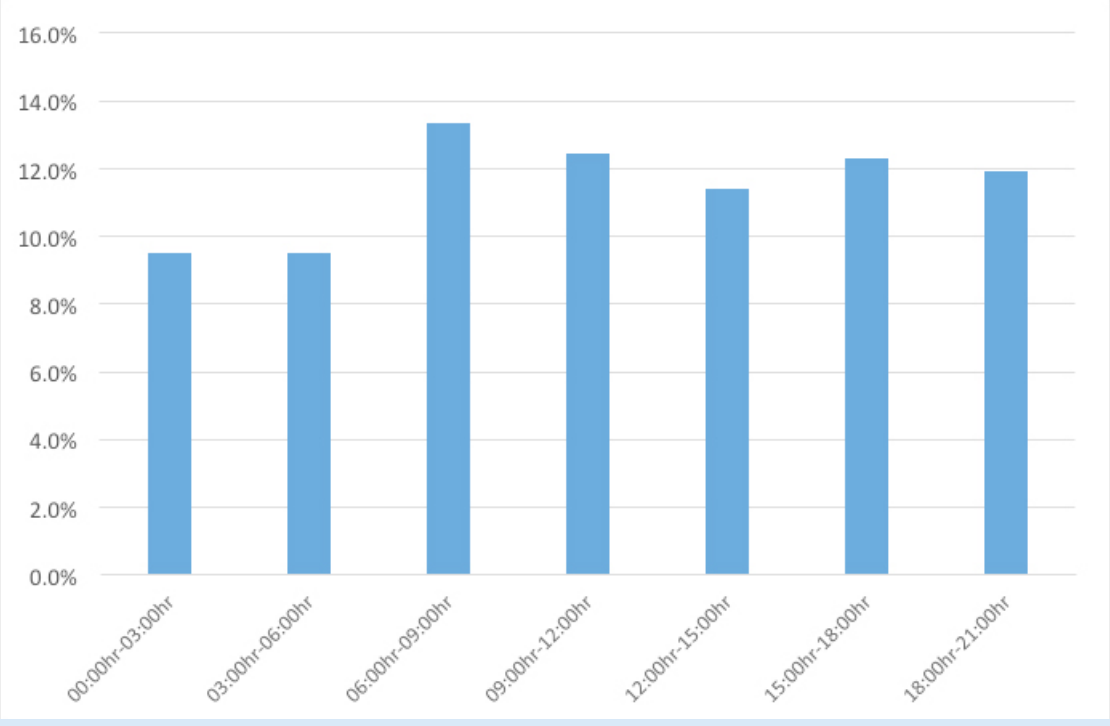


Figure 92 Proportion of FDV incidents witnessed by children that took place during three-hour intervals (August 2013–December 2014 only) WA (n=11,988)



Offence against the person

Just over half (57.1%) of all WA police-attended FDV incidents involved an offence against the person. These included: domestic assault, non-domestic assault, and deprivation of liberty, attempted murder, manslaughter, murder, sexual assault, threatening behaviour, and dangerous neglect. The proportion of incidents involving an offence against the person slightly increased over the reporting period, but was only significant from 2009–10 (p<0.01) and 2012–13 (p<0.001)—see Table 295.

Table 295 Proportion of FDV incidents involving an offender against the person per year, WA (58,340)

Year	n	%
2009	7,217	55.4
2010	7,581	57.0
2011	8,453	55.9
2012	10,316	56.7
2013	12,416	58.6
2014	12,357	58.0

Alcohol-related incidents

A significantly higher proportion of incidents that involved an offence against the person were alcohol-related (45.0%) compared with those that did not involve an offence against the person (31.7%, p<0.001, Phi=0.13).

Drug-related incidents

A significantly smaller proportion of incidents involving an offence against the person involved a drug-related offence (0.6%) compared with incidents not involving an offence against the person (3.6%, p<0.001, Phi=-0.11).

Child presence

Children witnessed a significantly higher proportion of incidents that involved an offence against the person (40.7%) compared with those that did not involve an offence against the person (37.1%, p<0.001). The size of this effect was small (Phi=0.04).

Time of day and day of the week

Incidents occurring on Saturdays (59.7% involved an offence against the person, p<0.001) and Sundays (60.0% involved an offence against the person, p<0.001) were most likely to involve an offence against the person. Offences against the person were least likely to occur between 9 am and 6 pm (ps<0.001), and most likely from 6 pm to 6 am (ps<0.001).

Considering time of day and day of week together, about 40 percent of incidents involving an offence against the person from Monday to Friday occurred between 6 pm and 12 am. This proportion dropped to 36 percent on Friday and 30 percent on Saturday, with offences against the person more likely to occur in the early hours of the morning between 12 am and 3 am Saturday and Sunday, compared with other days.

Breach of restraining order

Few (17.5%) incidents involved breach of a restraining order. Table 296 shows that the proportion of incidents involving a breach of a restraining order stayed relatively stable over the reporting period.

Table 296 The proportion of DV incidents involving a breach of a restraining order per year, WA (n=17,889)

Year	n	%
2009	2,282	17.5
2010	2,372	17.8
2011	2,819	18.6
2012	3,184	17.5
2013	3,590	16.9
2014	3,642	17.1

Alcohol-related incidents

A significantly smaller proportion of incidents involving a breach of a restraining order were alcohol-related (37.2%) compared with the proportion of incidents not involving a breach (39.8%, p<0.001). The size of this effect was small (Phi=-0.02).

Drug-related incidents

A significantly smaller proportion of incidents involving a breach of a restraining order also involved a drug-related offence (1.6%) compared with incidents not involving breach (1.9%, p<0.01). The size of this effect was small (Phi=-0.01).

Child witnesses

No significant difference was evident in the proportion of incidents that did and did not involve a breach of a restraining order and were witnessed by children (39.9% vs 39.1%, p>0.05).

Time of day and day of the week

Between 17.9 percent and 19.6 percent of incidents from Monday to Friday involved a breach of a restraining order, compared with 14.7 percent on a Saturday (p<0.001) and 14.3 percent on a Sunday (p<0.001). The proportion of incidents involving a breach increased steadily from 14.5 percent between 3 and 6 am, peaked at 12 pm to 3 pm (20.0%), and declined steadily thereafter. Nevertheless, most breaches occurred between 9 am and 12 pm (15.0%–17.6% of breaches) than between 12 am and 9 am (2.6%–8.6% of breaches).

Offender recidivism and repeat victimisation

Of the 102,167 family and domestic violence incidents WA police attended, 43.0 percent93F involved a recidivist offender (offender recidivism was unknown for 53% of incidents) and 75.3 percent94F involved a repeat victim (repeat victimimisation was unable to be coded for 7,607 or 7.4% of incidents). A total of 84.4 percent of incidents involving a recidivist offender also involved a repeat victim (p<0.001, Phi=0.48), see Table 297.

Table 297 Proportion of FDV incidents involving recidivist offenders (n=30,983) and repeat victims (n=58,688), WA

	Recidivist offender		Repeat victim	
	n	%	n	%
2009	4,661	35.8	6,947	53.3
2010	4,815	36.2	7,448	56.0
2011	5,111	33.8	8,842	58.5
2012	5,514	30.3	10,668	58.6
2013	5,585	26.3	12,417	58.6
2014	5,297	24.8	12,366	58.0

Alcohol-related incidents

Incidents involving recidivist offenders were significantly more likely to be alcohol-related compared with those involving first-time offenders (44.6% vs 42.8%, p<0.001, Phi=0.02). Similarly, incidents involving repeat victims were significantly more likely to be alcohol-related compared with those involving first-time victims (40.4% vs 35.9%, p<0.001, Phi-0.04).

Drug-related incidents

Incidents involving a drug-related offence were significantly less likely to involve recidivist offenders (3.1% vs 4.1%, p<0.001, Phi=-0.02). Conversely, incidents involving repeat victims were significantly more likely to involve a drug-related offence than incidents that did not involve repeat victims (0.8% vs 0.6%, p<0.001). The size of this effect was very small (Phi=0.01).

Child witnesses

Incidents involving either recidivist offenders or repeat victims were significantly less likely to be witnessed by children compared with those that did not (recidivist offender: 35.1% vs 39.3%, p<0.001, Phi=-0.04; repeat victim: 38.8% vs 41.2%, p<0.001, Phi=-0.02).

Day of week and time of day

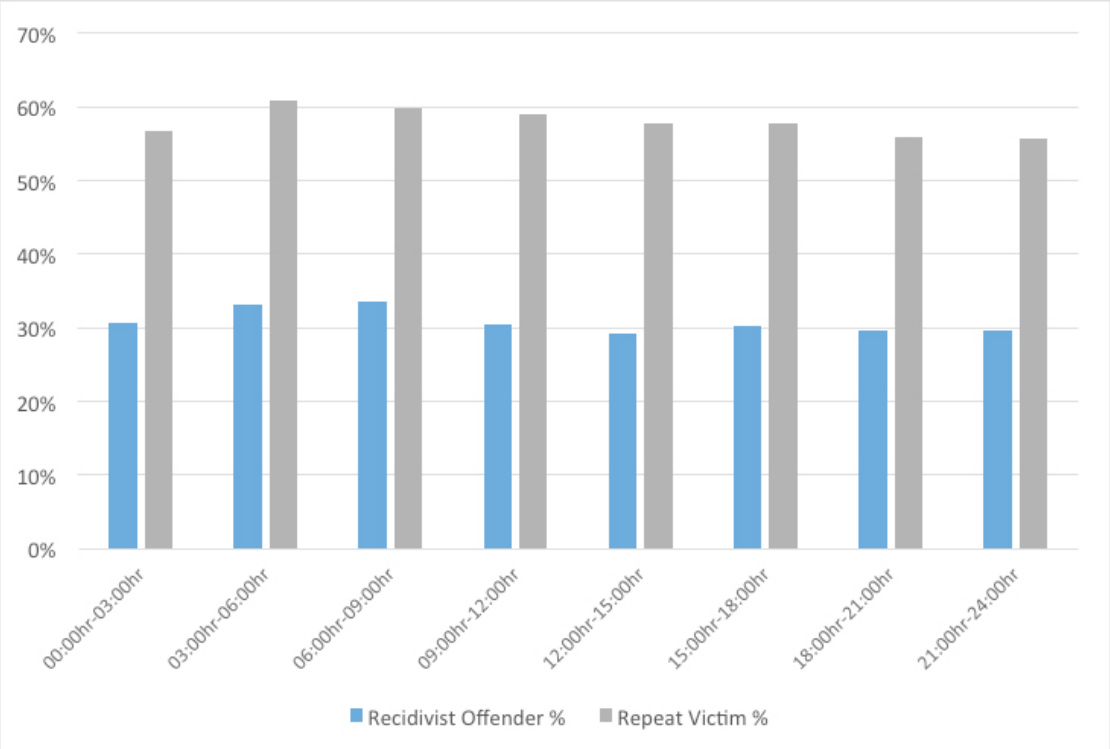
As shown in Table 298, the proportion of incidents involving a recidivist offender was generally consistent between Tuesday and Friday (66.1–67.0%), and decreased from Saturday to Monday (60.9%–63.8%). The proportion of incidents involving repeat victims was highest on Wednesday (63.4% involving repeat victims) and Thursday (64.8% involving repeat victims), similar for Monday, Tuesday, Friday and Saturday, and smallest on Sunday (58.8% involving repeat victims).

The proportion of incidents involving repeat victims and recidivist offenders shows a similar pattern across the time of day (see Figure 93). These incidents were least likely between 12 am and 3 am, more likely from 3 am to 9 am, and then generally less likely thereafter.

Table 298 Proportion of FDV incidents involving recidivist offenders (n=30,983) and repeat victims (n=58,688) by each day of the week, WA

	Recidivist offender		Repeat victim	
	n	%	n	%
Monday	4,070	28.6	8,107	56.9
Tuesday	4,362	31.3	8,079	57.9
Wednesday	4,397	31.2	8,260	58.6
Thursday	4,621	32.4	8,518	59.8
Friday	4,685	31.4	8,563	57.4
Saturday	4,786	30.3	9,007	57.0
Sunday	4,062	27.2	8,154	54.7

Figure 93 Proportion of DV incidents involving recidivist offenders (n=30,983) and repeat victims (n=58,688) by each three-hour interval, WA



Location of alcohol consumption

Since August 2013, Western Australian police have collected data about where alcohol was consumed. Locations were categorised as a dwelling (eg flat/unit, house, nursing home, park home, retirement home), or licensed premises (eg casino, hotel/tavern, nightclub, restaurant), or other.

Because this information is collected at the offence level, and individuals involved in an incident may have consumed alcohol at different locations, this data is presented at offence rather than incident level. As a result, totals will not match other incident level data.

Table 299 shows that the vast proportion of alcohol involved in offences at a dwelling, was also consumed at a dwelling (77.3%). Only a very small proportion of alcohol involved in offences that took place at dwellings was consumed at licensed premises (5.2%). Further, 28.9 percent of the alcohol involved in offences that took place in 'other' locations was also consumed at dwellings.

Table 299 Location alcohol was consumed by where incident took place

	Dwelling		Licensed premises		Other	
Place alcohol was consumed	n	%	n	%	n	%
Dwelling	3,063	77.3	4	9.3	279	28.9
Licensed premises	208	5.2	33	76.7	69	7.1
Other	694	17.5	6	14.0	618	64.0

Multivariate correlates of incident characteristics

The following looks at multivariate correlates of family and domestic violence incident characteristics. A series of multivariate models were conducted to examine the key person and incident characteristics that are unique correlates of:

- alcohol involvement;
- repeat victimisation;
- offender recidivism;
- offence against the person; and
- breach of a restraining order.

Child presence at incidents has been omitted as a correlate for each model as it has also only been recorded since August 2013 and so would substantially reduce the analytic sample. Similarly, as postcode, and therefore socioeconomic disadvantage (SEIFA), was not available for 55 percent of incidents, and as offender recidivism was not available for 53.3 percent of incidents, these variables were also omitted from the models. As offender recidivism was a core outcome variable, a model was still performed predicting offender recidivism.

Alcohol involvement

A binary logistic regression was performed to examine if repeat victim, and offence type (offence against the person, breach of restraining order, drug-related offence) were uniquely associated with whether alcohol was involved (no vs yes) in FDV incidents (see Table 300).

In the fully adjusted model (Step 2), incidents that involved a repeat victim were significantly more likely to involve alcohol (OR=1.36). An offence against the person was associated with 2.09 greater odds that the incident involved alcohol, while a breach of a restraining order was associated with significantly decreased odds that the incident involved alcohol (OR=0.90). Drug-related offences were 1.42 times more likely to be alcohol-related.

Overall, the model accounted for three to four percent of the variance in whether or not an incident involved alcohol (Cox & Snell R Square=0.03; Negelkerke R Square=0.04). It was heavily biased towards prediction of alcohol unrelated incidents, correctly predicting 99.8 percent of alcohol unrelated incidents and just 0.02 percent of alcohol-related incidents. Each step significantly contributed to predicting victim alcohol-related incidents (ps<0.001).

Table 300 Binary logistic regression associated with alcohol involvement in an FDV incident WA (n=94,560)								
	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Repeat victim (yes)	0.31	470.24	1.36***	1.33–1.4	0.31	468.80	1.36***	1.32–1.40
Breach of restraining order (yes)	-0.11	35.65	0.90***	0.87–0.93	-0.11	35.39	0.90***	0.87–0.93
Offence against the person (yes)	0.74	2621.14	2.09***	2.03–2.15	0.74	2631.37	2.09***	2.04–2.15
Drug-related offence (yes)					0.35	20.67	1.42***	1.22–1.64

*** statistically significant at p<0.001

Offender recidivism

A binary logistic regression was performed to examine if the repeat victim, offence type (offence against the person, breach of restraining order, drug-related offence), and alcohol involvement were uniquely associated with whether or not the incident involved a recidivist offender (no vs yes)—see Table 301.

In the fully adjusted model (Step 2), incidents involving a repeat victim were 8.45 times more likely to involve a recidivist offender. Incidents that involved an offence against the person were less likely to involve a recidivist offender (OR=0.68), while breach of a restraining order was not significantly associated with offender recidivism. Alcohol-related (OR=1.18) and drug-related (OR=1.25) incidents were significantly associated with increased likelihood of offender recidivism.

Overall, the model accounted for 21 to 29 percent of the variance in whether or not an incident involved a repeat offender (Cox & Snell R Square=0.21; Negelkerke R Square=0.29). It correctly predicted 84.4 percent of incidents that involved a recidivist offender and 62.1 percent of incidents that did not. Each step significantly contributed to predicting a recidivist offender (ps<0.001).

Table 301 Binary logistic regression associated with recidivist offender at FDV incidents, WA (n=41,328)								
	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Repeat victim (yes)	2.14	7,860.68	8.50***	8.11–8.91	2.13	7,802.49	8.45***	8.06–8.86
Breach of restraining order (yes)	-0.03	0.72	0.97	0.92–1.04	-0.02	0.47	0.98	0.92–1.04
Offence against the person (yes)	-0.35	226.48	0.70***	0.67–0.74	-0.39	257.31	0.68***	0.65–0.71
Alcohol-related (yes)					0.16	44.07	1.18***	1.12–1.23
Drug-related offence (yes)					0.22	4.92	1.25*	1.03–1.52

* statistically significant at p<0.05. *** statistically significant at p<0.001

Repeat victims

A binary logistic regression was performed to examine if offence type (offence against the person, breach of restraining order, drug-related offence) and alcohol involvement were uniquely associated with whether the incident involved a repeat victim (no vs yes)—see Table 302.

In the fully adjusted model (Step 2), incidents that involved a breach of a restraining order were 1.04 times more likely to involve a recidivist offender. Incidents that involved an offence against the person were significantly less likely to involve a repeat victim (OR=0.48). Incidents that involved alcohol were 1.36 times more likely to involve a repeat victim, and those involving a drug-related offence were 1.20 times more likely to involve a repeat victim.

Overall, the model accounted for three to four percent of the variance in whether or not an incident involved a repeat victim (Cox & Snell R Square=0.03; Negelkerke R Square=0.04), but was heavily biased towards predicting repeat victims. It correctly predicted 100 percent of incidents that involved a repeat victim but zero percent of incidents that did not. Both steps significantly contributed to predicting incidents involving repeat victims (ps<0.001).

Table 302 Binary logistic regression associated with repeat victims at FDV incidents, WA (n=94,560)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Breach of restraining order (yes)	0.03	3.70	1.04	1–1.07	0.04	5.54	1.04*	1.01–1.08
Offence against the person (yes)	-0.68	2,270.07	0.51***	0.49–0.52	-0.73	2,530.83	0.48***	0.47–0.50
Alcohol-related (yes)					0.31	468.88	1.36***	1.32–1.40
Drug-related offence (yes)					0.18	4.88	1.20*	1.02–1.41

* statistically significant at p<0.05. *** statistically significant at p<0.001

a: reference category

Offence against the person

A binary logistic regression was performed to examine if a repeat victim, breach of a restraining order, the incident involving a drug-related offence, and alcohol involvement were uniquely associated with whether the incident involved an offence against the person (no vs yes)—see Tables 303 and 304.

In the fully adjusted model (Step 2), incidents that involved repeat victims were significantly less likely to be involved in an offence against the person (OR=0.48). Incidents that involved alcohol use were 2.09 times more likely to involve an offence against the person, while incidents that involved a drug-related offence were significantly less likely to involve an offence against the person (OR=0.51). Whether or not the incident involved a breach of a restraining order was not significantly associated with the incident involving an offence against the person.

Overall, the model accounted for five to seven percent of the variance in whether or not an incident involved an offence against the person (Cox & Snell R Square=0.05; Negelkerke R Square=0.07). It correctly predicted 71.7 percent of incidents that involved an offence against the person, and 51.3 percent of incidents that did not. Both steps significantly contributed to predicting incidents involving repeat victims (ps<0.001).

Table 303 Binary logistic regression associated with an offence against the person at FDV incidents, WA (n=94,560)

	Step 1				Step 2			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Repeat victim (yes)	-0.68	2,270.07	0.51***	0.49–0.52	-0.73	2,530.28	0.48***	0.47–0.5
Breach restraining order (yes)	0.01	0.18	1.01	0.97–1.04	0.02	1.81	1.02	0.99–1.06
Alcohol-related (yes)					0.74	2,630.94	2.09***	2.04–2.15
Drug-related offence (yes)					-0.68	76.77	0.51***	0.44–0.59

*** statistically significant at p<0.001

Breach of restraining order

A binary logistic regression was performed to examine if incidents involving an offence against the person, repeat victim, a drug-related offence, and alcohol involvement, were uniquely associated with whether the incident involved a breach of a restraining order (no vs yes)—see Table 304. Given that a breach of a restraining order requires the victim to be involved in another offence (not necessarily an FDV offence) 'repeat victim' was added at the last step to determine the association of alcohol involvement with breaches of a restraining order before a repeat victim or recidivist offender became involved.

At Step 2, incidents that involved alcohol use were significantly less likely to involve an offence against the person (OR=0.90). Whether the incident involved a drug-related offence or whether the incident involved an offence against the person was not significantly associated with the incident involving a breach of a restraining order. With the addition of 'repeat victim' at Step 3, alcohol involvement in the incident continued to be associated with less likelihood that the incident involved an offence against the person (OR=0.90). Incidents that involved repeat victims were 1.04 times more likely to involve a breach of a restraining order.

Overall, the model accounted for little variance in whether or not an incident involved a breach of a restraining order (Cox & Snell R Square=0.00; Negelkerke R Square=0.01). While Step 1 (offence against the person) did not significantly contribute to predicting a breach of a restraining order (p=0.90), Step 2 (p<0.001) and Step 3 (p<0.05) contributed significantly to predicting incidents involving a breach.

Table 304 Binary logistic regression associated with breach of a restraining order at FDV incidents, WA (n=94,560)

	Step 1				Step 2				Step 3			
	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI	B	Wald X^2	OR	95% CI
Offence against the person (yes)	0.00	0.02	1.00	0.97–1.04	0.02	1.00	1.02	0.98–1.05	0.03	1.90	1.03	0.99–1.06
Alcohol-related (yes)					-0.10	33.58	0.90***	0.87–0.93	-0.11	35.37	0.90***	0.87–0.93
Drug-related offence (yes)					-0.15	2.21	0.86	0.7–1.05	-0.16	2.26	0.86	0.7–1.05
Repeat victim (yes)									0.04	5.54	1.04*	1.01–1.08

* statistically significant at $p<0.05$. *** statistically significant at $p<0.001$

Western Australia summary

In Western Australia, most offenders were male (83.3%) between 25 and 49 years, and most victims were female (73.9%) from 25 to 49 years. Just under a third of all offenders (28.2%) and victims (29.9%) were identified as Aboriginal or Torres Strait Islander.

The SEIFA disadvantage index shows a unique distribution of disadvantage compared with other states, although postcodes were not available for 55 percent of incidents. The highest proportion of WA offenders fell into the third quintile (32.8%), followed by the first (23.0%) quintile, with the lowest proportion falling into the second (8.5%).

Incident trends

Alcohol-related incidents were highest in 2009, gradually decreasing across the reporting period from 45.1 percent of all incidents in 2009 to 33.3 percent in 2014 ($p<0.001$, Phi=-0.12). A very small proportion of incidents involved drug offences (1.9%).

Alcohol-related incidents were least likely to take place on a Monday (29.0% alcohol-related, $p<0.001$), and most likely on a Saturday (50.0% alcohol-related, $p<0.001$). They most often occurred between 9 pm and 6 am, and least often between 9 am and 3 pm. No significant difference was evident in the proportion of drug-related offences across each day of the week ($p>0.05$). The proportion of incidents involving a drug-related offence peaked between 9 pm and 12 pm at 2.1 percent ($p<0.05$), and was lowest from 12 pm to 3 pm ($p<0.05$).

Key correlates of domestic violence

The likelihood that an incident was alcohol-related was positively associated with the incident involving a repeat victim (OR=1.36, 95%CI=1.32–1.40), an offence against the person (OR=2.09, 95%CI=2.04–2.15), or a drug-related offence (OR=1.42, 95%CI=1.22–1.64).

Controlling for repeat victim and breach of restraining order, incidents involving alcohol were twice as likely to involve an offence against the person (OR=2.09, 95%CI=2.04–2.15), while incidents involving a drug-related offence were less likely to involve an offence against the person (OR=0.51, 95%CI=0.44–0.59).

Controlling for repeat victim, breach of a restraining order, and an offence against the person—either the incident being alcohol-related (OR=1.18, 95%CI=1.12–1.23) or involving a drug-related offence (OR=1.25, 95%CI=1.03–1.52) significantly increased the likelihood that the incident involved a repeat offender. Similarly, controlling for the breach of a restraining order and an offence against the person—either the incident being alcohol-related (OR=1.36, 95%CI=1.32–1.40) or involving a drug-related offence (OR=1.20, 95%CI=1.02–1.41) increased the likelihood that the incident involved a repeat victim.

The vast proportion of alcohol involved in offences that took place at a dwelling was also consumed at a dwelling (77.3%). As this information is collected at the offence level, and individuals involved in an incident may have consumed alcohol at different locations, this data is presented at offence level, rather than at incident level, therefore totals will not match other incident level data.

Discussion

The following summarises and synthesises the key findings of the panel survey and police studies according to the overarching research aims. Points are presented for discussion around research, policy and interventions targeting AOD-related violence.

Project objectives

The main objective of the project was to address the identified gaps in current knowledge about the role of alcohol and other drug use in family violence. The project sought to address the following four key research questions:

- What is the relationship between alcohol and drug use and family and domestic violence in the general population?
- What roles do key demographic, social, and environmental factors play in the occurrence and severity of different types of family violence?
- How do variables differ in people who experience family violence where AOD use is involved compared with those where AOD use is not involved?
- What are the major trends in family violence in relation to incidents attended by police and the factors common to them across states and territories?

This project has demonstrated that family and domestic violence is a complex and heterogeneous phenomenon with many factors involved in the circumstances leading to a violent act. Some of these circumstances may be preventable—some are going to require major societal change over generations.

Incidents

Trends over time varied across states with rates decreasing in the Australian Capital Territory, Tasmania and Western Australia, but increasing in New South Wales, South Australia, the Northern Territory and Queensland. It is important to note that there have been drives in many jurisdictions to increase reporting of FDV to police, which probably explains many of the apparent increases.

Across states, police attended a greater number of IPV than FV incidents; IPV incidents comprised 59 percent (ACT) to 88 percent (SA) of all FDV incidents. In the Northern Territory most incidents (71%) could not be categorised into IPV and FV, nevertheless there was a higher proportion of IPV (24%) than FV (5%) incidents. In the Australian Capital Territory, the highest proportion of IPV and FV incidents were recorded in 2010, followed by a slight reduction to 2013. Intimate partner violence and family violence incidents in New South Wales peaked in 2013. In South Australia, the greatest number of IPV incidents was recorded in 2011, while the number of FV incidents peaked in 2014. In Queensland, while most of the FDV incidents were of intimate partner violence, the proportion of FDV incidents that were FV increased over the reporting period.

Overall, 24 to 54 percent of FDV incidents were classified as alcohol-related. In comparison, 2012–13 Victorian police data (Auditor-General 2012) shows that 46 percent of all FDV incidents were related to alcohol. The proportion of alcohol-related FDV incidents decreased across the reporting period in the Australian Capital Territory (from 25.9% to 22.0%), New South Wales (from 43.4% to 35.1%), the Northern Territory (from 43.4% to 35.1%), Queensland (from 41.0% to 30.3%), Tasmania (from 36.6% to 31.0%) and Western Australia (from 45.1% to 33.8%). This trend is contradictory to the findings of the Personal Safety Survey (Australian Bureau of Statistics 2013), which showed a two percent increase in physical assault incidents involving alcohol or drugs between 2005 and 2012. However, the survey data specifically related only to male perpetrators of violence. While the decrease in proportion of alcohol-related incidents coincided with a decreased rate per 10,000 of alcohol-related incidents in the Australian Capital Territory, New South Wales and Tasmania, there was an increase in the rate of alcohol-related FDV across the respective reporting periods in the Northern Territory, Western Australia and Queensland. In Queensland, the rate of alcohol-related FDV increased slightly from 2010 to 2014 (from 33.6 to 37.8 per 10,000), and then slightly decreased in 2015 (to 35.2 per 10,000). Similarly, in Western Australia the rate of alcohol-related FDV increased slightly from 2009, peaking in 2013 (from 26.0 to 32.9 per 10,000) and then decreased in 2014 (to 27.5 per thousand). In the Northern Territory the rate increased from 385.3 per 10,000 in 2010 to 429.8 per 10,000 in 2014 (with a low of 353.3 per 10,000 in 2012).

In the states with available data (ACT, NSW, NT and Qld), alcohol was implicated in a greater proportion of IPV than FV incidents, and in Queensland this difference was statistically significant, but very small (1.2% difference). Where victim and offender data was available, offenders were more likely to be alcohol-affected than victims. In New South Wales, offenders were affected by alcohol in 33 percent, and victims in 19 percent, of all incidents. Similarly, in Queensland, offenders were affected by alcohol in 33 percent, and victims in 20 percent, of all incidents. In the Northern Territory, where only one party was named per incident as being affected by alcohol, offenders were affected by alcohol in 13.3 percent of incidents, victims in 0.7 percent, and other participants in 39.5 percent of incidents.

Illicit drug use was implicated in a small proportion of FDV incidents across states, from one percent in the Australian Capital Territory and New South Wales, two percent in Western Australia, three percent in Queensland, and to nine percent in Tasmania, and tended to increase slightly across the reporting period in the Australian Capital Territory, New South Wales and Queensland. In contrast, the proportion of drug-related incidents recorded in Tasmania was greatest in 2013 (10%) and lowest in 2014 (7%). In Western Australia, the proportion of drug-related incidents remained relatively steady over the reporting period. Caution should be used in comparing states due to differences in the reporting of drug involvement. For instance, in the Australian Capital Territory drug involvement was based on the seizure of drugs at an incident, while in Western Australia this was based on whether a drug offence had been committed.

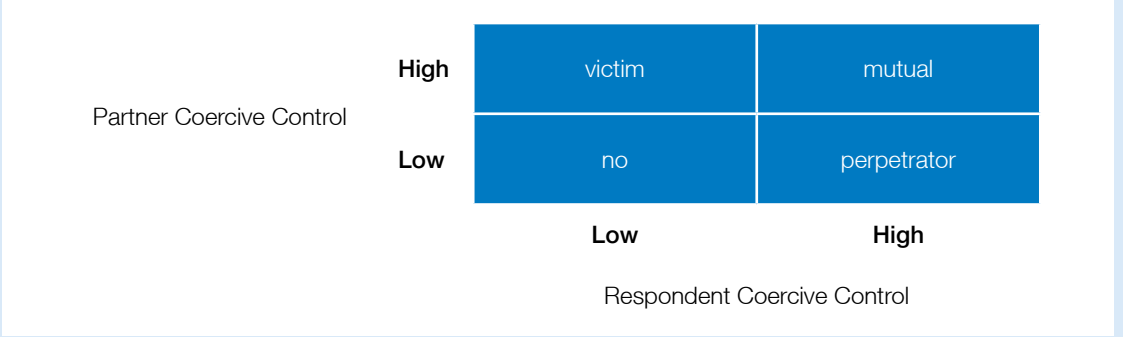
The proportion of FDV incidents tended to gradually increase over the daytime hours from 6 am to either 9 pm (ACT, NSW, Qld and Tas), 12 am (NT, WA), or 3 am (SA) and then decrease thereafter. Across all states FDV incidents were most likely to take place on Saturdays and Sundays except FV incidents in the Australian Capital Territory, which were most likely to take place on Mondays and Tuesdays. Alcohol-related incidents were most likely to take place on Saturdays and Sundays in the Australian Capital Territory, New South Wales, Queensland, and Tasmania, on Fridays, Saturdays and Sundays in Western Australia, and on Fridays and Saturdays in the Northern Territory. Trends generally coincided with 'high alcohol hours'—typically defined as between 4 pm Saturday and 8 am Sunday (Laslett et al. 1999), with a higher proportion of incidents that took place on weekends occurring late in the evening and in the early hours of the morning, than incidents that took place on weekdays.

Violence types

The development of IPV typologies over the past few decades has led to a greater understanding of the risks and outcomes associated with intimate partner violence and family violence more broadly. These more complex understandings of IPV have important implications for policy, screening processes for victims, and development of effective treatment programs that target the specific needs of victims and offenders (Day & Bowen 2015; Kelly & Johnson 2008). Typologies of IPV distinguish between types of IPV that differ qualitatively in terms of patterns of behaviour, developmental correlates, severity and harms. This project categorised panel survey respondents based on dyadic experience of coercive control (ie respondent and partner behaviour), rather than victimisation only (see Figure 94). Based on respondent and partner coercive controlling behaviour reports, respondents were classified as one of the following:

- no CCB (76.2%; respondent and their partner engaged in no/low coercive controlling behaviour);
- CCB perpetrator (3.3%; respondent engaged in high CCB, their partner engaged in no/low CCB);
- CCB victim (12.4%; respondent engaged in no/low CCB, their partner engaged in high CCB); or
- mutual CCB (8.1%; respondent and their partner engaged in high CCB).

Figure 94 Dyadic Coercive Control Types



Researchers found evidence that an increasing severity of coercive control was associated with more severe outcomes/harms (mental health), alcohol use, and illicit substance use. This paralleled many of the previous findings relating to general IPV experience (Kelly & Johnson 2008).

An important consideration highlighted by Kelly and Johnson's typology of IPV is that different populations will be made up of different combinations of violence types (Kelly & Johnson 2008). Of specific importance to this study is that the two populations drawn from (the general population and police incident data) are different and will have different levels of IPV and FV, and different levels of severity. Consequently, differences can be expected in how alcohol and other drugs are associated with experience of FDV, including factors such as severity, offender recidivism, and repeat victimisation.

Researchers found that the involvement of alcohol increased the severity of incidents reported in the police data. In Western Australia, alcohol-related FDV incidents were 2.09 times more likely to involve an offence against the person. Similarly, in the Australian Capital Territory, alcohol involvement was associated with 2.45 times greater odds that IPV incidents involved an offence against the person. After controlling for other factors (eg disadvantage, recidivism and presence of weapons)—alcohol involvement doubled the likelihood that an offence involved physical harm.

The panel survey results also revealed an increased likelihood of physical violence and injuries for alcohol-related incidents. Specifically, HED, and not hazardous alcohol use, was associated with the type of violence experienced at a respondents' most recent incident. This suggests that different types of substance use require a different approach to treatment and prevention (eg treating enduring traits/behaviours/pathology vs reducing availability of alcohol and consumption levels). For example, previous research has identified the value in combining treatment for alcohol dependence with treatment for domestic violence offending (Easton et al. 2007a). Interventions which restrict/ban methamphetamine or alcohol use have also been found to lead to significant and substantial reductions in IPV reported to police (Hawken 2010a; Hawken & Kleiman 2009; Kilmer et al. 2013).

This study's findings highlight the importance of recognising the qualitative differences in the experience of IPV. Differentiating the types of intimate partner violence paves the way for improved screening measures and targeted responses that link more appropriately to underlying factors. It also has implications for responses to IPV, including restricting behaviour such as mandatory sobriety for offenders on family violence orders where indicated, and a range of treatment/enforcement options for sentencing options (Easton et al. 2007b; Kelly & Johnson 2008).

Key demographic factors

A number of key demographic characteristics were identified for people involved in family and domestic violence.

Sex

Police-reported FDV offenders were predominantly male, and victims were predominantly female. In the panel survey, most individuals reporting recent FDV incidents were female. These findings are consistent with previous Australian (eg ABS 2013) and international studies (Allen 2011; World Health Organization 2002, 2010). According to the Australian Bureau of Statistics, an estimated 17 percent of females and five percent of males have experienced physical or sexual violence from an intimate partner since the age of 15 years (ABS 2013). Males tend to be physically stronger than females, while females often assume greater caregiving responsibility for dependent children. Males are capable of inflicting severe injury and fear in female FDV victims and their victimisation directly impacts on children. In response to these gender patterns, national policy has focused FDV policy approaches on violence against women and children.

A substantial proportion of males were also FDV victims. Across police studies 11 to 37 percent of victims, and in the panel survey 24 percent of IPV victims and 34 percent of FV victims, were male. These findings add to mounting international evidence indicating that males also experience FDV (Cui et al. 2013; Narayan 2014; Reingle et al. 2012). International studies of community and general population samples suggest the male's experience of FDV is similar to that of the female (Hines et al. 2007; Okuda et al. 2011; Randle & Graham 2011). Specifically, male IPV victims have been found to experience physical assault, be fearful of their partners (Hines et al. 2007; Hines & Douglas 2010), report symptoms of post-traumatic stress disorder (Coker et al. 2005; Okuda et al. 2011), and experience depression and psychological distress (Hines & Malley-Morrison 2001; Okuda et al. 2011). In an American qualitative study, Hines and Douglas (2010) reported that 80 percent of their sample of 302 male IPV victims sustained a physical injury at least once in the previous 12 months. Additionally, 29 percent of the sample sustained a severe injury that required medical attention for which the men did not seek medical attention. Among both male and female IPV victims, the frequency of this violence over the past 12 months increased the risk of developing a mental health disorder (Okuda et al. 2011).

In the panel survey, notable sex differences were found in people who reported incidents to police. Female respondents are more likely to report violence to police than male respondents, whereas male respondents are more likely to indicate that someone else reported the incident. Rates of reporting FDV are low for both sexes, with an estimated 60 percent of incidents, particularly non-physically violent incidents, not being reported (FARE 2015). Various reasons for non-reporting include fear and shame. Males are less likely than females to seek help for a range of physical and psychological problems (Addis & Mahalik 2003; Doherty & Kartalova-O'Doherty 2010), probably due to dominant gender-based social norms, characterising males as aggressive, strong and emotionally inexpressive, which conflicts with seeking help (Nam et al. 2011). Victims' reluctance to report and seek support for FDV victimisation remains a major problem, and this applies to both men and women. When males do seek support they are often met with negative unhelpful responses (Douglas & Hines 2011; Hines & Douglas 2010; Tsui 2014). Many support services assist only female IPV victims. Male victims seeking help are often accused of being perpetrators, or are ridiculed by support providers for being an IPV victim (Tilbrook et al. 2010). Such negative support responses have been found to undermine men's ability to cope (Douglas & Hines 2011). The results clearly indicate that measures to improve reporting of FDV in both sexes are urgently needed.

Taken together, current and previous evidence indicates that both sexes experience FDV. Females experience severe injurious violence more frequently than males and comprise most victims at police-attended incidents. Prevention and intervention efforts should be oriented to the needs of FDV victims regardless of sex, and frontline support services should be commissioned to serve all victims seeking support.

When considering support for victims and the role of sex, it is vital to not forget that effectively treating offenders, and those at risk of offending, is going to be a major element in reducing FDV in the community. This becomes especially important when considering the findings of the best-designed longitudinal studies investigating violence, anti-social behaviour and childhood development. Adverse early life experiences, such as witnessing FDV, are consistently associated with long-term negative outcomes for a range of violent behaviours (WHO 2010). A recent systematic review of 25 prospective longitudinal studies of FDV, identified significant predictors of FDV perpetration and victimisation, for males and females to be—child and adolescent abuse; child and adolescent behavioural problems; family of origin risks (including witnessing parental violence); adolescent peer risks, and socio-demographic risks (Costa et al. 2015). Many questions remain unanswered about the causal pathways and interrelationships between risks at each stage of life and FDV in adulthood (Stith et al. 2012). Regardless, the review identified common developmental risk factors for FDV perpetration and victimisation for both sexes. It highlights that policy and intervention measures should take a gender-neutral whole-of-life approach to family and domestic violence (McEwan et al. 2015).

Age

Family and domestic violence offenders were typically aged between 25 and 49 years. Similarly, victims were typically aged between 25 and 49 years, but encompassed a younger age range of 18 to 34 years in the Australian Capital Territory and Tasmania. Similar results were found in the panel survey, with those in younger age groups (18–25 years and 26–35 years) significantly more likely to indicate the most recent IPV incident was drug-related. Those in older age groups (51–65 years and 66 plus years) were significantly less likely to indicate the most recent IPV incident was drug-related.

The mean age of respondents who reported recent violence was 12 years younger than respondents who did not. The proportion of respondents who reported violence in the past 12 months decreased across age groups. Respondents aged from 18 to 25 years comprised 42.0 percent of the group that reported recent violence, yet represented only 22.3 percent of the total sample.

Given that young people are at an elevated risk of intimate partner violence (Graham et al. 2008) and heavy episodic drinking (Wilsnack et al. 2009) the finding that younger individuals were at increased risk of involvement in an alcohol-related IPV incident is unsurprising. While this suggests that at least some of the population will experience less violence (as 'perpetrator', 'victim', 'participant' or 'witness'), it is unclear how measures can be targeted at younger people other than focussing on early developmental interventions which have been shown to be effective in reducing violence overall. However, even in this space, far too few interventions have been evaluated, and existing evaluations are often limited in methodological and conceptual terms (Cornelius & Resseguie 2007). According to the most up-to-date and independent evaluations of effective programs, the three strongest relevant programs across different levels of prevention are LifeSkills Training, Multisystemic Therapy® (MST®), and Positive Action (see Box 1). Others exist which have achieved some promising results (see http://www.blueprintsprograms.com), but are yet to prove effective in independent evaluations. This remains a major concern in the prevention field (Gorman 2015).

To summarise, being young appears to be a significant risk factor for both victimisation and perpetration of family and domestic violence.

Box 1 Examples of model programs for violence prevention

LifeSkills Training (LST)

LifeSkills Training is a classroom-based universal prevention program designed to prevent adolescent tobacco, alcohol, marijuana use, and violence. This program contains 30 sessions to be taught over three years (15, 10 and 5 sessions). Additional violence prevention lessons also are available each year (3, 2 and 2 sessions). Three major program components teach students personal self-management skills, social skills, and information and resistance skills specifically related to drug use. Skills are taught using instruction, demonstration, feedback, reinforcement and practice.

Source: http://www.blueprintsprograms.com/factSheet.php?pid=ac3478d69a3c81fa62e60f5c3696165a4e5e6ac4

Multisystemic Therapy® (MST®)

Multisystemic Therapy® is an intensive family- and community-based treatment that addresses the multiple causes of serious antisocial behaviour in juvenile offenders. The program seeks to improve the real-world functioning of youth by changing their natural settings—home, school and neighbourhood—in ways that promote pro-social behaviour while decreasing antisocial behaviour. Therapists work with youth and their families to address the known causes of delinquency on an individualised, yet comprehensive basis. By using the strengths in each system (family, peers, school and neighbourhood) to facilitate change, the program addresses the multiple factors known to be related to delinquency across the key systems within which youth are embedded. The extent of treatment varies by family according to clinical need. Therapists generally spend more time with families in the initial weeks (daily if needed) and gradually taper their time (to as infrequently as once a week) over the three- to five-month course of treatment.

Source: http://www.blueprintsprograms.com/factSheet.php?pid=cb4e5208b4cd87268b208e49452ed6e89a68e0b8

Positive Action

Positive Action is a school-based social emotional learning program for students in elementary and middle schools. It seeks to increase positive behaviour, reduce negative behaviour, and improve social and emotional learning and school climate. The classroom-based curriculum teaches understanding and management of self and how to interact with others through positive behaviour. School climate programs are used to reinforce the classroom concepts school-wide.

Source: http://www.blueprintsprograms.com/factSheet.php?pid=58f0744907ea8bd8e0f51e568f1536289ceb40a5

Socioeconomic disadvantage

Family and domestic violence incidents in New South Wales, Tasmania and South Australia most often occurred in areas of greatest socioeconomic disadvantage. This was also the case with victims living in the Australian Capital Territory. Across the reporting period, 26 percent of incidents in New South Wales, 29 percent in Tasmania, and 48 percent in South Australia occurred in the most disadvantaged areas. In contrast, incidents in Western Australia most often occurred in areas of moderate advantage (third SEIFA quintile). A small proportion of FDV incidents (6–12%) across states occurred in areas of least disadvantage. In Queensland, although FDV incidents most likely occurred in an area of moderate disadvantage (4th SEIFA quintile), they were least likely to take place in the area of least disadvantage. In Victoria, almost a third (31.7%) of offenders lived in the most disadvantaged area.

The findings from both the survey data and police figures are consistent with previous research from Australia and internationally which has consistently highlighted that violence and AOD misuse is disproportionately higher among those from lower socioeconomic backgrounds (FARE 2015). The association between HED and IPV has also been found to be stronger among those from lower socioeconomic backgrounds (Pillai et al. 2013). This is likely due to, and compounded by, factors associated with socioeconomic disadvantage, including poverty, stress and limited access to healthcare (Schmidt et al. 2010). The relationship can be bi-directional and multiplicative, where someone who experiences violence at home can use alcohol or drugs to cope with subsequent feelings, which can then lead to poor decisions about seeking help or can place them in greater danger of subsequent violence. While there appeared to be an association between relative socioeconomic disadvantage and the odds that an incident was alcohol-related, this association was not consistent across states. In the SA data there was no association for either IPV or FV, and in Tasmania only a single quintile (third) predicted lesser odds of experiencing alcohol-related IPV. In Queensland, the three most-disadvantaged areas were associated with a greater likelihood of experiencing alcohol-related IPV and FV, whereas the second-least disadvantaged area (4th quintile) predicted lesser odds of alcohol-involved IPV. As a result, the relationship between disadvantage and alcohol-related IPV remains unclear and may be strongly influenced by a range of other factors such as social policy, alcohol access and FDV programs already in place.

This study's findings are generally consistent in showing an increased likelihood of experiencing violence for those living in an area that has greater disadvantage. However, the picture is not uniform, although this may not be highly relevant from an intervention perspective, as it is clear that FDV can cut across all levels of society. While some areas will need more resources allocated to address family and domestic violence, this is most likely best driven by local data and insight.

Alcohol

In the survey data, alcohol was consumed (by one or more individuals) at 32.7 percent (n=745) of incidents. No significant differences were evident between incident type and alcohol involvement. Alcohol was consumed at 33.6 percent of IPV incidents, 29.4 percent of FV incidents, and 32.8 percent of 'other violence' incidents. Of the FDV incidents reported to police in the panel survey, 40.7 percent of IPV and 32.7 percent of FV incidents were alcohol-related. This suggests that incidents reported to police, may be more likely to be those involving alcohol, potentially because they are more severe. Intimate partner violence and 'other violence' incidents reported to the police were 1.45 and 1.46 times respectively, more likely to involve alcohol than unreported incidents. Family violence incidents reported to police were not more likely to involve alcohol. When reporting on their most recent experience of violence, 19.6 percent of IPV events and 17.7 percent of family incidents involved the other person being 'drunk'. These findings align strongly with the large body of evidence which associates alcohol use, specifically high-risk drinking, with violence (WHO 2005), intimate partner violence (Barrett, Habibov & Chernyak 2012; Leonard 2005; Leonard & Quigley 1999; Leonard & Roberts 1998; Shorey et al. 2014), dating violence (Shorey, Stuart & Cornelius 2011), family violence (Laslett et al. 2010; Laslett et al. 2011), and other violence (Miller et al. 2015b; Miller et al. 2014).

The panel survey found important associations between heavy episodic drinking and IPV. Partners who engaged in HED increased the likelihood of IPV by 1.99 times compared with other violence, and 1.92 times compared with FV. Experience of alcohol-related IPV incidents with a current or most recent partner also increased by 5.80 times when a partner engaged in HED and 2.95 times when a respondent and partner engaged in HED together. Taken together, respondent HED increased the risk of IPV especially for men and women, which supports previous research (eg Leonard & Quigley 1999).

Respondent and partner drinking behaviours were also found to significantly vary by the type of couple-level coercive controlling behaviour that was experienced. Within the panel sample, compared with those who experienced no CCB in their current or most recent relationship, neither respondent nor partner drinking-behaviour were associated with CCB perpetration. Only HED was associated with CCB victimisation, but all the partner-drinking variables were associated with CCB victimisation. Both respondent and partner drinking behaviour were associated with mutual coercive controlling behaviour.

Even a low frequency of high-risk alcohol consumption appears to increase the risk of violence, including alcohol-related partner violence, especially for men. The stronger associations between men's HED and violence supports several other studies that have found men's drinking behaviours to be stronger correlates of IPV than women's (Follingstad et al. 1999; Hammock & O'Hearn 2002), and women's drinking behaviours to not be associated with IPV (Lewis, Travea & Fremouw 2002; Straight, Harper & Arias 2003). It is also possible that men's drinking has a disproportionately stronger impact on relationship-level factors. For example, men not contributing to household responsibilities due to spending more time away from home, or excessive alcohol use causing financial strain that subsequently leads to arguments and violence between partners (Holmila et al. 2014).

Partners' drinking behaviour was found to be a more consistent predictor of IPV than respondent drinking behaviour, which is consistent with prior literature (eg Lipsky et al. 2005b). This may reflect a reporting bias; however, it may also reflect the fact that experiences captured by the survey were likely comprised mostly of victimisation. A clear relationship exists between alcohol use and IPV perpetration; however, research investigating the association between alcohol use and victimisation is less robust, and available evidence is inconsistent, especially relating to women (Shorey et al. 2011). In the NSW police data, offender, but not victim alcohol use, significantly increased the likelihood of offender recidivism. In the panel data, all partner drinking behaviours, but only one victim drinking behaviour, was associated with CCB victimisation across IPV types.

Both respondent and partner drinking behaviours were associated with mutual CCB relationships. Similarly, in one of the few studies that has investigated alcohol use and mutual IPV, McKinney, Caetano, Ramisetty-Mikler and Nelson (2009) also found higher rates of binge drinking and problematic alcohol use among both partners in mutual IPV relationships compared with partners not experiencing IPV. However, in another study (Testa, Hoffman & Leonard 2011), neither respondent nor partner HED was associated with mutual IPV among a sample of female college students. Instead mutual IPV was associated with witnessing a mother hit a father, psychological aggression, partner marijuana use, partner antisocial behaviour, and (greater) relationship satisfaction. Thus, HED and other risky drinking behaviours may be prevalent among those in mutual IPV relationships, but other correlates may mediate this association.

After controlling for demographic factors, HED, and drug use—hazardous alcohol use did not significantly predict alcohol-related violence or type of violence. This may be due to the type of violence experienced by this population, which as discussed earlier, would most likely comprise situational couple violence or SCV. In contrast, Reingle et al. (2014) reported alcohol dependence to be a significant risk for alcohol-related IPV perpetration and victimisation in a national US population survey. However, their study did not control for HED which is not necessarily part of the symptomology of an alcohol dependence diagnosis (American Psychiatric Association & American Psychiatric Association. Task Force on DSM-IV. 2000). Findings among nationally representative samples of men support the finding of HED as a consistent predictor of violence. Although there is a small linear association (ie the more drinking the greater likelihood of IPV) between frequency of alcohol use and IPV perpetration, heavy drinking patterns (ie high quantities in a single occasion) are more important in predicting intimate partner violence (O'Leary & Schumacher 2003).

The above findings discuss the association between usual alcohol use and the experience of violence. It is unknown to what extent alcohol use directly or indirectly contributed to the violence reported. It is probably a combination of both. Nevertheless, consistent with the proximal effects model of the association between IPV and alcohol use (eg Leonard & Quigley 1999), researchers found that the association with alcohol use remained, after controlling for known factors associated with FDV (eg education level, geographical location, age, and illicit substance use). This supports alcohol's influence on experience of family and domestic violence.

Alcohol involvement and severity

Alcohol-related intimate partner violence (when either or both partners consume alcohol) has consistently been associated with more severe violence and a greater likelihood of injury (Graham et al. 2011; Laslett et al. 2010). Findings from the panel survey and police data studies support this association for IPV incidents, but not necessarily for FV incidents.

Involvement of alcohol in an incident reported to police increased the likelihood that an incident involved an offence against the person by 2.09 times in Western Australia and by 2.45 times in the Australian Capital Territory. In Tasmania, alcohol involvement increased the likelihood of assault by 1.4 times. In the panel data, alcohol-related IPV incidents frequently involved physical violence and psychological aggression that resulted in injuries. Furthermore, alcohol-related IPV incidents were more often reported to police compared with incidents that did not involve alcohol.

Conversely, in the panel data, alcohol use at FV incidents had no significant impact on type of violence or resulting injuries. In the ACT police data, alcohol involvement in FV incidents was not significantly associated with the incident involving an offence against the person. In the WA data FV and IPV incidents could not be distinguished. The lack of association between alcohol involvement and severity may be due, at least in part, to how FV was defined in both the panel and police data. Family violence incidents were far more heterogeneous than those of intimate partner violence, in relation to individuals involved (eg mother, father, brother, sister, other relative). In the panel data, many FV incidents were recalled from childhood where the involvement of alcohol in the specific incident would have been difficult to recall.

In addition to pharmacological effects of alcohol increasing the likelihood of violence, alcohol can also provide an excuse for behaviour that would not otherwise be tolerated (Graham et al. 2011). Holmila et al. (2014) explored young adults' understandings of the association between IPV and alcohol use in a series of focus groups conducted across seven countries. Across cultures, participants similarly expressed the commonly held attitude that alcohol intoxication was a legitimate excuse to behave in socially unacceptable ways, such as behaving aggressively or violently. Panel survey respondents perceived alcohol-related incidents had a significantly lower impact on their lives than incidents where no alcohol was consumed. There was no interaction between violence type and alcohol involvement indicating that alcohol-involvement had a similar impact on life for IPV, FV and other violence. While a similar proportion of IPV and FV incidents involved alcohol (34% vs 29%), and a similar proportion of IPV and FV incidents resulted in injuries (26% vs 23%), alcohol involvement was not a key predictor of severity of violence for FV incidents. This finding supports previous findings that alcohol may help to mitigate the subjective experience of violence (Kinnane et al. 2009a).

When alcohol is involved, both victims and perpetrators are able to minimise the impact of the incident on their lives, blaming the incident on alcohol, rather than underlying relationship dynamics. Alcohol, especially at heavy levels, also affects people's memory. It may dull their reactions and even add to a lack of clarity about what happened, and certainty about their role in the incident, which may consequently influence their decision to take action. An interesting example of this comes from the findings of policy evaluations of restricting alcohol access in Fitzroy Crossing and Halls Creek in Western Australia (Kinnane et al. 2009a). In a setting where packaged liquor was restricted to only 2.7 percent g/ml, reports of family violence to police increased, while attendances at local shelters decreased. The findings suggest that although the level of actual harm may have decreased, ability to report incidents may increase, a reminder of the complexity of interpreting statistical trends, especially when considering complex interactions such as the one between alcohol and violence. While heavy alcohol use is associated with increased severity and incidence of family and domestic violence, some trends are more complex than initial associations suggest.

New South Wales is one of three states to report a reduction in the number of alcohol-related IPV incidents attended. The trend is consistent over time and mirrors reductions in non-domestic alcohol-related assaults observed in and around licensed venues (Menéndez, Tusell & Weatherburn 2015). The decline in non-domestic assaults has been associated with the 'declared premises' licensing scheme and other initiatives in place since 2008. These use 'last drinks' data collected by police attending incidents to identify venues associated with the most harm in the community. Being scheduled as 'declared premises' carries substantial trading restrictions, such as limits on the types of alcohol that can be sold (ie shots restrictions) and a lockout (Menéndez, Tusell & Weatherburn 2015). It is plausible that improved responsible service of alcohol, and subsequent reductions in intoxicated people returning home to/with partners may translate to reductions in alcohol-related intimate partner violence. This would require further research, potentially using the same 'last drinks' data to identify any changes in the proportion of cases where alcohol use was related to on-licence consumption.

Place of purchase and incident location

Survey data showed that more than half of the alcohol consumed during IPV incidents was purchased between 500m and 10km from the incident location. While nine percent of IPV incidents took place within 500 meters of the place of purchase, 26 percent of incidents occurred between 500 m and 2 km from the place of purchase with 27 percent of incidents occurring between 2 km and 10 km. A further 10 percent of incidents occurred more than 10 km from where the alcohol was purchased. The most frequent place of purchase for alcohol consumed at IPV incidents was at a supermarket liquor store, followed by a pub or bar. Other violence incidents took place near to where the alcohol was purchased. A third (33%) of other violent incidents took place within 500 m from where the alcohol was purchased. For other violence, the most frequent place of purchase was a pub or bar. When respondents were asked the distance between the place where they purchased alcohol and the location of the incident, these trends remained consistent for both IPV and other violence. Regardless of the distance to where the incident took place, respondents who experienced IPV most frequently purchased alcohol from a supermarket liquor store, and respondents who experienced other violence most frequently bought alcohol from a pub or bar. Caution should be taken in interpreting these findings due to the substantial proportion of respondents who indicated they could not recall details about where the alcohol had been bought, as well as unreliability of retrospective recall. Although FV incidents showed similar trends to IPV incidents, the results are not discussed here due to low sample size

These findings should be seen in context regarding the incident location. For IPV this was most likely the respondent's home (75%), while for other violence, this was outdoors (27.1%), at their workplace (19.6%), or outside or inside licensed premises (14.8%). Since most IPV and FV occurs in the home, with alcohol purchased from a supermarket liquor store, there are some obvious practical limitations to how violence in this context can be reduced. This is especially difficult when the incident location is not necessarily near the place of alcohol purchase.

Since August 2013, WA police have been recording the location of where alcohol was consumed for alcohol-related offences. Because this information is collected at the offence level, and individuals involved in an incident may have consumed alcohol at different locations, this data is presented at offence level, rather than incident level. The vast proportion of alcohol involved in offences that took place at a dwelling (eg flat/unit, house) was also consumed at a dwelling (77.3%). Only a very small proportion of alcohol involved in offences that took place at dwellings was consumed at licensed premises (eg casino, hotel/tavern, nightclub, restaurant; 5.2%). Further, 28.9 percent of the alcohol involved in offences that took place in 'other' locations was also consumed at dwellings.

Studies have demonstrated that increasing the price of alcohol is directly associated with a reduction in acute and chronic health concerns, accidents, crime and violent incidents (Brennan et al. 2009). With a broad and international body of supporting research, excise taxation appears to be the most successful alcohol policy in terms of cost-effectiveness, reductions in level of consumption, and overall social benefit (Babor et al. 2010). Numerous studies have firmly established a negative correlation between alcohol price and general use (Babor et al. 2010) and violence (Cook & Moore 1993; Matthews, Shepherd & Sivarajasingham 2006). This applies across gender and age, socioeconomic status and geographical location.

Another promising way of reducing consumption through the price of alcohol is by increasing its minimum cost. In a United Kingdom review of the effects of alcohol cost, Meier et al. (2008) found a continually decreasing drop in consumption accompanying increasing levels of minimum pricing by 5p increments from 20p to 70p. For instance, a 50p, 60p, and 70p increase in price per unit would decrease overall consumption by 6.9 percent, 12.8 percent, and 18.6 percent, respectively. As such, higher price consistently equated to disproportionately lower consumption. The review found that this strategy was most successful when applied to all alcohol products rather than targeted at certain types.

More recently, definitive evidence from Canada has shown that, following adjustments to minimum alcohol prices in British Columbia over the past 20 years, consumption has reduced significantly across beverage types (Stockwell et al. 2012). Stockwell and colleagues (2012) report that time-series estimates indicate that a 10 percent increase in minimum prices reduced consumption of spirits and liqueurs by 6.8 percent, wine by 8.9 percent, alcoholic sodas and ciders by 13.9 percent, beer by 1.5 percent, and all alcoholic drinks by 3.4 percent. Thus, similar to studies on excise taxation, these findings again attest to the firmly established negative correlation between price of alcohol and alcohol consumption.

One way to target environmental influences on IPV and FV rates is via alcohol outlet density. Greater alcohol outlet density may influence IPV in several ways, both directly and indirectly. For example, a greater number of nearby alcohol outlets encourages:

- relaxed norms against alcohol intoxication and violence (physical signs such as public intoxication and broken bottles or non-physical such as signalling lack of formal sanctions against unruly behaviour);
- problem drinking among couples at risk of IPV; and
- groups of at-risk couples to form and mutually reinforce each others' problematic behaviours and beliefs (Cunradi 2010).

Consistent with the current panel survey findings, an increase in off-premises alcohol outlets over a 10 year period in one Californian city was associated with a corresponding increase in IPV-related police calls and attendances. On-premises outlets (bars, pubs) were not similarly associated with changes in IPV rates (Cunradi, Ames & Duke 2011). Australian research has found that off-site alcohol sales (bottle shops) predicted total assaults and all other dependent assault variables tested (Gilmore et al. 2015). The impact of greater alcohol-outlet density on IPV may also be stronger in socially disadvantaged and disorganised neighbourhoods where unfavourable conditions (eg poor access to amenities and exposure to antisocial behaviour and crime) and lack of social ties among residents, foster a more permissive environment for behaviours such as public drunkenness and FDV (Cunradi 2010; Cunradi, Mair & Todd 2014).

Given that situational couple violence is the most prevalent type of intimate partner violence in the general population, targeting the broader environmental context, such as the availability of alcohol, will have far-reaching impacts on the rates of intimate partner violence.

Drugs

While the overall prevalence of drug use is low in the community, it appears to have a substantial impact on the levels and type of violence experienced by families in which drug use occurs. Incidents of family violence reported to police were three times more likely to involve drugs (OR=3.05). More than one quarter (26.4%) of IPV incidents and 33.3 percent of FV incidents that were reported to the police involved drugs. Drug-involvement in FDV incidents was also associated with an increased likelihood that the incident was reported to the police, with IPV and FV incidents 1.85 times and 3.05 times respectively, more likely to involve drugs than incidents that were not reported to police.

Illicit drug use and experience of violence

Investigating the influence of illicit drugs on FV and IPV is made difficult given that only about 15 percent of Australians aged 14 years and older indicated illicit drug use (including pharmaceuticals) in the past 12 months (compared with 80% reporting alcohol use; Australian Institute of Health and Welfare 2014). Overall, 5.6 percent of the current panel survey sample reported illicit drug use, but 11 percent of the 18 to 25 year age group reported illicit drug use. Understanding the impact of drugs on FDV is further limited by variability in how drug-involvement was recorded within the police data. Despite these limitations, drug involvement in incidents and usual drug use was found to significantly impact on the rates of family and domestic violence.

The proportion of drug-related IPV and FV incidents in the police data varied widely across states, for example 1.1 percent in the Australian Capital Territory; 1.2 percent in New South Wales; 1.9 percent in Western Australia; 3.0 percent in Queensland, and 8.9 percent in Tasmania. The definition of drug-related incidents also varied across states (see Appendix B). Except Tasmania and Queensland, drug flags across states did not necessarily indicate that either victim(s) or offender(s) (were judged to have) used drugs *at that incident* (ie the flags referred to drugs being seized, a drug-related offence, or history of drug-offences by parties involved). As a result, the proximal effects of drug-involvement in IPV and FV incidents are difficult to extrapolate. The association between drug use and FDV has been substantiated in populations likely to have a similar profile to the police data used in the current study, including emergency department data (eg Bazargan-Hejazi et al. 2014; Lipsky et al. 2005b) and targeted at-risk samples (eg Fals-Stewart, Golden & Schumacher 2003; Mattson et al. 2012; Mouzos & Smith 2007; Rodriguez & Gomez 2015). Although it is hypothesised that the panel data have a different profile of FDV than the police data, it was found that illicit drug use increased the risk of violence, including specifically intimate partner and family violence.

Controlling for demographic factors and alcohol use, respondents who were classified with mild substance dependence were 2.93 times more likely, and those with severe substance dependence were 7.06 times more likely, to experience lifetime violence compared with those who indicated no illicit drug use in the previous 12 months. Those who had used illicit drugs were also 3.55 times as likely to experience violence in the past 12 months compared with those who did not use illicit drugs.

In relation to couple-level coercive control type, compared with those who experienced no CCB, a significantly greater proportion of respondents within each IPV type (CCB victim, CCB perpetrator, mutual CCB) used illicit drugs. Notably, the proportion of respondents classified with severe substance dependence was significantly greater only for those within mutual CCB relationships compared with non-controlling relationships (25.9% vs 9.1%). This proportion was also greater, but non-significant, for CCB perpetrators (21.7%). According to the Holtzworth-Munroe & Meehan (2004) typology of male batterers, substance abuse problems are more likely to be found among both generally violent/antisocial offenders and borderline-dysphoric offenders (akin to Johnson's intimate terrorism or IT), and less likely among family-only offenders (akin to Johnson's SCV). This supports the notion that some patterns of IPV, particularly those characterised by high levels of controlling behaviours, are underpinned by enduring individual-level factors (Johnson & Cares 2004). This IPV type may require a different response (ie treatment, prevention) than violence not characterised by high levels of controlling behaviour97 These comparisons were based on the small number of respondents who indicated illicit substance use over the past 12 months (n=277) and should be replicated.

Illicit drug use in the past 12 months increased the risk of violence, particularly between intimate partners, suggesting drug use and misuse are important factors to consider in relation to family and domestic violence.

Drug involvement and severity

Incidents of family and domestic violence involving illicit drugs are more likely to involve physical violence (Fals-Stewart, Golden & Schumacher 2003; Salom et al. 2015), result in injuries (Thompson, Saltzman & Bibel 1999) and lead to poorer mental health outcomes (Salom et al. 2015). Teasing out the impact of drug-involvement on the severity of incidents (attended by police) was limited by the nature of the police data available. In Western Australia, incidents involving a drug-related offence were significantly less likely to involve offences against the person (OR=0.51). In contrast, in Tasmania, the odds of a victim (OR=1.77) or offender (OR=1.53) being removed from the incident was significantly increased when offender and victim, respectively, were judged to be affected by drugs. Also in Tasmania, the offender being drug-affected (OR=1.31) significantly increased the likelihood of the incident involving an assault. Such actions taken by the police suggest they were of greater severity due to warranting immediate intervention by attending officers.

In the panel survey, the impact of drug involvement on the severity of violence varied by context. Drug-related IPV incidents were significantly more likely to involve physical violence (OR=1.64) and intimidation (OR=1.52), and to increase the likelihood of any injuries (OR=2.51), physical injuries (OR=2.69), and psychological injuries (OR=2.33). For family violence, the involvement of drugs increased the likelihood that FV incidents involved verbal aggression (OR=2.33), that a person was removed from the incident (OR=6.00) and that the matter was subject to a court hearing (OR=3.72)—although the low sample size reduced power substantially for most comparisons. For all three types of violence, drug involvement increased the likelihood that the police were involved (ORs=1.85–3.76). Meanwhile, for other violence, drug involvement increased the likelihood of sexual violence (OR=3.19), injuries (ORs=2.64–3.48), and that police arrested someone (OR=3.52), detained someone (OR=2.04), or that a person was charged (OR=3.00), and that the matter was subject to a court hearing (OR=5.38). Thus, the involvement of drugs had a different impact on incident severity, according to incident type. This suggests that situational and contextual factors (including victim-offender relationship) are particularly important in relation to the harms experienced.

The actions police of police were largely driven by victims. To a large extent, victims of IPV and FV are less willing or able to pursue actions against a spouse or other family member than they are with other types of violence, consistent with prior research (eg Hare 2010; Wolf et al. 2003). Among respondents who did not report the incident, fear of the other person/s or other negative consequences was a major reason for not reporting to police (17.7% IPV and 15.6% FV). Other reasons cited more frequently by those who experienced IPV and FV included shame and embarrassment, not wanting the other person to be arrested, not knowing what to do, and not wanting to ask for help. A key issue for victims of family violence was being a child or being 'too young'.

Drug involvement in the most recent incident increased the likelihood that the incident had a significant impact on the respondent's life (OR=1.75, controlling for age, sex, and injuries). It had a similar impact on life for IPV, FV and other violence. In a community-based study of 114 battered women (controlling for age, race, sex, length of relationship, education, frequency of abuse, and perpetrators' weapons use) victims who reported that both they and their partner had ever been drunk or high during an abusive incident reported significantly poorer functional impairment (ability to carry out family and social roles) compared with those who reported that neither they nor their partner had been drunk or high during an abusive incident (Lee, Ju & Lightfoot 2010).

Family violence orders, recidivism and repeat victimisation

Family violence orders (FVOs) and apprehended (domestic) violence orders (AVOs) are designed to protect victims of family and domestic violence from perpetrators. Such orders must be applied for through the magistrates court with interim orders available for those who believe they are in immediate danger (Victoria Legal Aid 2015). Police-issued protection orders (or 'police safety notices') exist in Victoria, Western Australia, South Australia, Tasmania and the Northern Territory. They allow a police officer to issue an order to perpetrators of FDV outside of the judicial process (Australian Law Reform Commission 2010). While no police-issued orders exist in Queensland and New South Wales, in certain circumstances (ie the victim is in immediate danger) police in these states can apply for protection orders on behalf of victims, in which case they will go through the judicial process themselves (QLD) or will attend with the victim (NSW)—see www.ncsmc.org.au.

Overall, the association between alcohol and drug use, and breaches, was inconsistent. In New South Wales, South Australia, Queensland and Western Australia, AOD involvement was significantly associated with recidivism. Specifically, in New South Wales, offender alcohol use (OR=1.23) and incident drug involvement (OR=1.76); in South Australia, victim alcohol use (OR=1.32) and incident drug involvement (OR=1.52); in Queensland, offender alcohol use (OR=1.17) and incident drug involvement (OR =1.68); and in Western Australia, incident alcohol-involvement (OR=1.18) and incident drug-involvement (OR=1.25), were each associated with an increased likelihood that an incident involved recidivist offenders. On the other hand, a breach of FVOs in the Australian Capital Territory, Queensland and Tasmanian police data and a breach of restraining orders in Western Australia (which was used as a proxy) were less likely at AOD-related incidents (OR=0.33–0.90), than incidents that did not involve AOD use. There was an exception in Queensland for drug-related incidents, which increased the odds that FV incidents involved a contravention of the Act (OR=1.18). No significant differences were evident in the panel data between AOD-related family and domestic violence incidents and whether a police order was put in place. However, although the outcome of a hearing is unknown, a significantly greater proportion of drug-related FV incidents subsequently involved a court hearing (19%) compared with non-drug-related incidents (6%). Unlike previous findings discussed, which found that AOD increased severity, breaches do not necessarily constitute a severe (ie violent) incident—just that the offender breached a condition of their order. This study's findings suggest the possibility that situational factors such as AOD use have less influence on breaches than interpersonal and relationship-level factors.

The main goal of a court order is to protect victims. However, they also deter recidivism and repeat victimisation. Rates of prior offending are high among perpetrators who breach intervention orders. For example, in 2013 among those guilty of breaching an apprehended violence order in New South Wales, only 22 percent of offenders had no prior court appearance in the preceding five years (Trimboli 2015).

Overall, although there was some variability, AOD was mostly associated with an increased likelihood that the incident involved a repeat victim or offender. Conversely in the panel data, usual or incident-specific AOD use was not significantly associated with previous experience of IPV or FV incident/s with the same person(s).

It is also possible that the association between alcohol and drug use and recidivism varies across types of intimate family violence. For example, as suggested by Holtzworth-Munroe's typology, the alcohol and drug involvement typically found in police data may be part of a broader history of developmental factors and pathology, whereas the alcohol involvement in the panel data (again, not all forms) may reflect risky substance use behaviours. In both the panel and the police data, substance use increases the severity of the violence experienced. Substance use in the panel study was found to be associated only with the repeated experience of violence. Consistent with this study's findings, analysis of IPV assault data across three states in the United States (Hirschel, Hutchison & Shaw 2010) found that the seriousness of the offence (aggravated assault vs intimidation), but not AOD at the time of the incident, was associated with the likelihood of an arrest, but likelihood of re-arrest was associated with AOD at the time of the incident. Although AOD use plays a role in recidivism and repeat victimisation in the police data, it is likely to be indirect. Alcohol and drug use still plays a key role in the need for FVOs and AVOs in the first place, influencing the severity of violence experienced.

A recent report released by Australia's National Research Organisation for Women's Safety—ANROWS—provides important contextual information, shedding light on some findings (Taylor et al. 2015). The report highlights previous research showing that most violations of domestic violence protection orders do not result in an arrest. The report highlights that:

> A protection order can only be considered effective if it deters further violence or reduces the severity of violence, which is often associated with the ability and willingness of police to take action to enforce a breach (Taylor et al. 2015: 30).

The report identifies key issues as being:

- a lack of consistency in the definitions and scope of domestic and family violence;
- differing approaches to the nature of the conditions attached to an order; and
- variations in the procedural approaches and protective scope of various laws.

It further identifies that there has been:

> …a paucity of research into the relative effectiveness of different sanctions in criminological research and this is acknowledged as a complex area of research. It is questionable whether the breaches of protection order sanctions impact perpetrator behaviour, given the number of repeat breaches for particular offenders, and this bears further investigation (Taylor et al. 2015: 16).

Within this context, the report concludes that:

> Currently, an individual jurisdiction's legislative responses are dictated by local policy imperatives and their particular understanding and perspective of the dynamics of domestic violence, which send the community clear messages on the seriousness with which governments view domestic and family violence and breaches of orders. Some states and territories appear to take breaches of orders more seriously than others (Taylor et al. 2015: 19).

Mental health

The experience of family and domestic violence has been associated with mental health problems such as depression (Beydoun et al. 2012; Golding 1999), anxiety (Afifi et al. 2008; Follingstad, Rogers & Duvall 2012), and stress (Arias & Pape 1999; Mechanic, Weaver & Resick 2008). In the panel survey, experience of IPV and FV was associated with higher depression, anxiety and stress levels, than experience of other violence. This suggests the victim-perpetrator relationship has important implications for mental health outcomes, specifically that abuse at the hands of those who are closer has a deleterious influence on a range of mental health indicators. Little research compares differing violence types along a relationship dimension and their influences on mental health outcomes. One analogous finding comes from a study of 634 Canadian women, in which Dennis and Vigod (2013) found that both IPV and FV were risk factors for depression, but the risk factors were consistently higher for a range of IPV behaviours. The current finding builds on this to show that the victim-perpetrator relationship is important for several dimensions of mental health. Of note is that these differences only occurred for males, suggesting either the mental health of males is less associated with community violence or is more associated with violence where there is a more intimate relationship (ie IPV or FV).

As with previous research, which has found differences in mental health outcomes by the type of IPV experienced (Anderson 2008; Johnson & Leone 2005; Leone 2011), it was found that respondents within mutual CCB relationships reported the most severe depression, anxiety, and stress symptoms. Victims and perpetrators of coercive controlling behaviour reported similar levels of depression, anxiety and stress symptoms, and both reported more severe symptoms than respondents who experienced no CCB. Mutual CCB relationships were also associated with high levels of respondent and partner alcohol use, and high substance use dependency symptoms. Relationships characterised by mutual CCB are associated with an array of dysfunctional and less obvious behaviours that may make prevention and intervention strategies targeted to mutually controlling and violent couples more complex than for other IPV types. This study's findings, and those of previous research, continue to point to the importance of mental health as a consequence of, and correlate with, family and domestic violence for all involved.

Understanding police attendance data

Police attendance data is the most commonly used source of information for descriptions of family and domestic violence trends in Australia. This data is collected first and foremost for operational purposes by operational police dealing with complex situations and will always carry some limitations. By definition, the events that are reported to police are different to those which remain unreported, although further work remains to be done about why events are not reported (Birdsey & Snowball 2013).

It should also be emphasised that the alcohol and drug involvement within police data is likely to vary from population statistics. Typically, attending police officers are making subjective judgements about whether they believe the individuals involved were under the influence of alcohol and/or drugs. Practices vary for 'flagging' an incident as substance-related; for example, whether there was *any evidence* of drug or alcohol use by any parties involved, versus whether or not parties involved were *affected* by a substance, versus whether the attending police officer judged alcohol or drugs were *causal* (ie a contributing factor) in the incident.

Comparing police data is difficult due to different data collection and reporting practices (see Appendix B), but the proportion of alcohol-related incidents identified in the panel survey are similar to those reported in the NSW police data (IPV=43.7%; FV=31.3%) and higher than that reported in Tasmania (IPV=33.5%), Queensland (IPV=35.6%; FV=34.8%) and the Australian Capital Territory (IPV=27.6%; FV=18.3%). Differences in proportions may be due to differences in how the involvement of alcohol was coded in the police data across states. In New South Wales alcohol-related incidents were defined as those where attending police officers indicated alcohol use was an associated factor. In Tasmania, Queensland and the ACT incidents coded as alcohol-related were those where the victim or the offender were judged to be *affected* by alcohol—either person(s) involved may have consumed alcohol, but they may not have been judged to be affected. In the panel data, incidents were coded as alcohol-related when the respondent indicated either they or the other person(s) involved had *consumed* alcohol.

The proportion of incidents flagged as drug-related (1.2%–8.9%) in the police data was considerably lower than the proportion within the panel data. This suggests that the proportions of incidents that are purported to be drug-related in the police data are likely to be a considerable underestimate. This is at least partially attributable to using proxies for actual drug-involvement, rather than an indication of drug-intoxication by the victim and the offender. For example, in the Australian Capital Territory, drug-involvement was flagged when drugs were seized at the incident, and in Western Australia, researchers created a proxy based on whether the incident involved a drug-related offence. In Tasmania and Queensland, where drug intoxication is judged by attending police officers, the proportion of drug-related incidents is still well below that found in the panel data.

In the WA data, although not analysed extensively since it had only been collected from August 2013, 17.9 percent of incidents were flagged as positive for 'drug-history' (ie the victim or the offender had problems in the past with drugs) and 18.3 percent of incidents were flagged as 'unknown'. Compared with the panel data where just six percent of respondents indicated illicit substance use in the past 12 months, this implies that drug use problems are much more prevalent in the police data.

As already discussed, substance abuse problems are a risk factor for offenders who perpetrate severe and frequent violence (Holtzworth-Munroe et al. 2000; Holtzworth-Munroe & Stuart 1994). These types of offenders are also more likely to perpetrate violence outside the family unit and are more likely to have other mental health issues, such as an antisocial personality disorder (Holtzworth-Munroe et al. 2000; Holtzworth-Munroe & Stuart 1994). Given the links between drug involvement and severity discussed in previous sections for both IPV and FV, this suggests that drug involvement is a key factor that should be recorded in police-attended incidents in relation to risk assessment.

Regarding police actions, the Tasmanian police data indicates that drug use by the victim at the incident increased the likelihood that the offender was removed from the incident (OR=1.53) as did offender drug use (OR=1.77). Similarly, in the panel data, for FV only, drug involvement in the incident increased the likelihood that someone was removed from the incident (58%) compared with when no drugs were involved (19%). No other significant findings were discovered for actions taken by police at FV incidents, but this may be due to low sample numbers for these comparisons. Nevertheless, drug-involvement was found to have no impact on any of the actions taken by police at IPV incidents, and alcohol-involvement was found to have no impact on the actions taken by police at IPV or FV incidents. These findings are despite alcohol and drug-involvement increasing the likelihood that FDV incidents were reported to police. Conversely, for other violence incidents, drug and alcohol use increased the likelihood of a number of police actions, including whether someone was removed or detained for either drug or alcohol involvement, arrested for drug involvement, and charged for alcohol involvement. As discussed above, this may be due to the reluctance of victims of IPV and FV to pursue action against perpetrators. It supports the implementation of police-imposed intervention orders to protect victims, including the children who witness such events, in contexts where they are unwilling or unable to pursue action themselves. For example, NSW legislation (apprehended violence orders) allows police to take out third-party intervention orders on behalf of women and children (Parkinson & Humphreys 1998). As already discussed, the consequences for children as witnesses of FDV are detrimental and long-lasting (Costa et al. 2015). Efforts to reduce such impacts on children should be of the utmost importance.

Conclusions

Violence in all its forms is a complex phenomenon. Violence that occurs in families or between intimate partners is among the most complex form of violence in society. This report demonstrates the many different types of behaviour that fall under the umbrella term of family and domestic violence. It shows how important it is to understand the nature of these different types of violence, and the many diverse factors that influence whether an act of violence ultimately occurs. Even simple constructs of offenders and victims need to be considered carefully as the evidence repeatedly points to the complex role of developmental factors in people ultimately being involved in FDV. Many trends have emerged and point to clear priority areas, such as the massively disproportionate representation of women and girls as victims, while still acknowledging that men and boys also suffer from violence in many ways.

Most apparent from this study is that the issue facing society is enormous, the nature of the cycle of violence is intergenerational, and the impact of violence on children in families who suffer such violence is devastating.

The hidden nature of so many of these incidents and the ongoing complexity has a devastating impact on families and future chances of children and their parents. Victims and perpetrators have their lives ruined. The vast range of violent incidents covered under the banner of family and domestic violence—such as mutual violence and child abuse—demonstrates the need for complex, systematic, and targeted responses (McEwan et al. 2015).

Different incidents are influenced by a myriad of factors, ranging from history of violence to relationship dynamics and situational factors. Substance use (and most prominently alcohol use) plays a complex role, affecting individuals in the moment, reflecting ongoing personality issues such as addiction and poor emotion control, and can also be a symptom of people trying to deal with their violence/abuse histories. Alcohol and drug use are interwoven for many, but not most, incidents of violence and abuse and often make things worse, certainly adding to the severity of specific incidents. Responses to family and domestic violence, which address the use of alcohol and other drugs, and mental health issues, are strongly indicated.

Further considerations

Beyond these conclusions, the findings suggest a number of points to consider and further explore.

Alcohol and drug responses

This study clearly shows that alcohol and drug use plays a substantial role in family and domestic violence for many people, at a range of developmental stages, and also as situational influences. It concludes that a variety of interventions could be used that acknowledge and respond to the interwoven nature of AOD use and FDV. Because AOD use can both be a signal of FDV and also a contributing factor, even in parents—a systematic approach is warranted that builds lines of communication between the agencies dealing with FDV and those that deal with AOD use. Framework responses are needed to build and encourage combined resources. Excellent examples of such programs supported by strong evidence include Parents under Pressure (http://www.pupprogram.net.au). This program combines psychological principles relating to parenting, child behaviour and parental emotion regulation within a case management model to address issues such as substance misuse and family conflict and severe financial stress. A strong argument also exists to consider trialling programs that address substance use and FDV in a combined program where this is indicated in the case history. One such program is Substance Abuse Domestic Violence, which has been found to be effective in reducing the number of violent incidents occurring in families, compared with addiction treatment as normal (Easton et al. 2007a; Easton et al. 2007b). Evidence also exists to support helping victims to deal with their AOD use (Lipsky et al. 2005a; Mignone, Klostermann & Chen 2009; Stith et al. 2012). Reciprocal screening of people in AOD treatment for family and domestic violence issues, and screening for alcohol and other drug issues of people receiving FDV support (including offender rehabilitation programs) is therefore indicated.

This study found consistent associations between recidivism and drug and alcohol use in the police data, suggesting an opportunity for intervention where indicated. Evidence from programs in the United States suggests that attaching mandatory sobriety/treatment orders to sentences, especially any community-based orders, will result in significant reductions in FDV. The strongest evidence around these justice reinvestment interventions for alcohol and drug offenders comes from the South Dakota 24/7 Sobriety Program and the Hawaii HOPE program. The 24/7 program, which enforces mandatory sobriety through regular monitoring and testing, observed a 12 percent reduction in recidivist drink-driving across the state. It also observed a nine percent reduction in reported family violence (Kilmer et al. 2013). This suggests that if alcohol is taken away from people who are offenders, it can reduce not only the targeted behaviour of drink-driving but also violent behaviour in the home. Success has also been reported in similar programs that deal with methamphetamines, and drugs more generally (Hawken 2010b; Hawken & Kleiman 2009).

Looking at alcohol supply, strong evidence supports the relationship between alcohol availability and community levels of FDV and other violence (Livingston 2011). This study adds to the existing literature by demonstrating that more than half of the alcohol consumed during IPV incidents was purchased between 500 m and 10 km from the incident location, and that the most frequent place of purchase for alcohol consumed at IPV incidents was at a supermarket liquor store. Along with previous literature, the findings of this study suggest a number of policy responses that might reduce the supply of alcohol to the community, including caps on the number of packaged liquor outlets and restrictions on the strength of alcohol sold through packaged liquor outlets. While there is no direct evidence about the impact of freezing liquor licences, strong evidence shows that additional licences, and especially increased outlet density, are associated with increased family and domestic violence (Livingston 2011). Restricting the strength of alcohol also has been found to be associated with substantial reductions in family and domestic violence (Miller et al. 2015a). The sale of packaged liquor, exceeding a concentration of ethanol in liquor of 2.7 percent at 20°C, is prohibited to any person (Kinnane et al. 2009b; Kinnane et al. 2010). Evaluations have shown that the number of alcohol-related emergency department presentations decreased by 36 percent, and the women's refuge reported a 25 percent decrease in the number of women seeking support.

Another legislative option worth considering, and already in place in some Australian states, is the use of legislation that makes specified premises 'dry zones'. For example, s.152P of the *Liquor Control Act 1988* (WA)—the declaration of liquor-restricted premises—once declared makes it unlawful for anyone to take liquor onto particular premises or be intoxicated on those premises. This law can, and has, been applied to individual houses and is also being used in the Northern Territory. A comprehensive evaluation is required, but police and community informants report positive outcomes for affected families (Miller et al. 2015a).

With virtually no implementation cost, a wide array of empirical support, and very few limitations of any type—excise taxation and minimum pricing of alcohol can certainly be regarded as a highly (if not the most) efficient, cost-effective and encompassing approach to reducing overall alcohol consumption and alcohol-related harm and social costs. Evidence from British Columbia has shown a 9 percent reduction in violence, while the price of most alcohol sold has remained unaffected (Stockwell et al. 2015). Increasing the taxation on alcohol sold has also shown significant reductions in violence, with the added benefit of increase revenue to the government which could be further used to improve support services (Wagenaar et al. 2010).

Recidivism

This study found that recidivism was also a major contributor to incidents of family and domestic violence. This suggests that a substantial unmet need exists in terms of current responses across the country. The rationale for intervening with known perpetrators is that interventions that are even modestly successful in preventing further violence, will make a significant contribution (Day et al. 2009; McEwan et al. 2015). Evidence also indicates that alternatives, such as imprisonment, do little to deter criminal behaviour; that longer sentences are not associated with reduced offending; and that punishment-based responses are an ineffective way of changing behaviour, unless some very specific conditions are in place (Day 2015). What will have a much greater chance of success are policies and programs that focus on addressing the causes of

family violence in known perpetrators and equipping them with the motivation, problem awareness, and skills that are needed for them to act in ways that do not involve violence (Day 2015).

Exposure to, or perpetrating, one form of family violence, is associated with perpetrating other forms of family violence. This is not reflected in most models of service provision, resulting in the lack of an integrated understanding and response to intimate partner violence, stalking, child to parent violence, severe sibling violence, and child abuse and neglect. Failing to implement joint responses to these interrelated behaviours will not only leave victims and perpetrators without much-needed assistance, it will mean missing important opportunities to intervene early, and potentially prevent violence transmitting to future generations (McEwan et al. 2015).

Future research recommendations

A substantive research agenda is currently being carried out under the auspices of Australia's National Research Organisation for Women's Safety or ANROWS agency. This research is acknowledged and is crucial. There is no wish to replicate the agency's work or directions in this document. Instead, this study aims to identify additional research ideas that may not be included in the ANROWS agenda, and focus on areas that incorporate consideration of family and domestic violence that take into account all victims, including children and men.

This study's findings suggest the worth of further investigating intimate partner violence typologies in Australia. Such information could act as an initial step towards developing intervention approaches targeted at different FDV types, and could suggest a range of targeted responses for all forms of violence.

A clear need exists for research that can offer insights into temporal associations, and can address current debates about 'causality', along with identifying crucial early intervention signals. Prospective longitudinal studies may be well suited to tracking how developmental, situational and person factors contribute to the perpetration and victimisation of different IPV types, and how alcohol and other drugs impact on these different types. Detailed studies are also warranted into specific populations such as homelessness, children seeking support, and people accessing drug treatment.

Systematic data collection and data linking has been found to be effective in other areas of alcohol-related harm such as street assaults using police data (Menéndez, Tusell & Weatherburn 2015; Wiggers et al. 2004) and injuries using emergency department mandatory questions (Shepherd et al. 1993; Shepherd, Shapland & Scully 1989; Shepherd, Sivarajasingam & Rivara 2000). Early identification of cases using systematically collected ambulance data, cross-linked with police data may provide an early warning, as well as opportunities for complex and predictive modelling.

A strong case exists for evaluating the efficacy of any programs receiving funding to implement perpetrator interventions (McEwan et al. 2015). These evaluations should report both qualitative and quantitative outcomes wherever possible. Ideally, funding agreements would specify core outcome variables and the proportion of funds provided to support evaluation (McEwan et al. 2015). Similarly, it is logical to ensure a funding stream for local pilots of interventions that have been found effective internationally.

References

All URLs correct at September 2016

ABS 2014. 3235.0—*Population by age and sex, regions of Australia.* Canberra: ABS

ABS 2013. 4906.0—*Personal safety, Australia, 2012.* Canberra: ABS

ABS 2006. 4906.0—*Personal safety, Australia, 2005 (reissue)*. Canberra: ABS

Addis M & Mahalik J 2003. Men, masculinity, and the contexts of help seeking. *The American Psychologist* 58(1): 5–14

Afifi T, MacMillan H, Cox B, Asmundson G, Stein M et al. 2008. Mental health correlates of intimate partner violence in marital relationships in a nationally representative sample of males and females. *Journal of Interpersonal Violence* 24(8): 1398-1417

Allen M 2011. Is there gender symmetry in intimate partner violence? *Child & Family Social Work* 163: 245–254

American Psychiatric Association Task Force on DSM-IV. 2000. *Diagnostic and statistical manual of mental disorders: DSM-IV*, 4th ed text revision 2000. Washington, DC: American Psychiatric Association

Anderson KL 2008. Is partner violence worse in the context of control? *Journal of Marriage and Family* 70(5): 1157–1168

Antony M, Bieling P, Cox B, Enns M & Swinson R 1998. Psychometric properties of the 42-item and 21-item versions of the Depression Anxiety Stress Scales in clinical groups and a community sample. *Psychological assessment* 10(2): 176

Arias I & Pape K 1999. Psychological abuse: Implications for adjustment and commitment to leave violent partners. *Violence and Victims* 14(1): 55–67

Australian Bureau of Statistics see ABS

Australian Institute of Health and Welfare 2014, *National Drug Strategy Household Survey detailed report: 2013*. Canberra: AIHW

Australian Law Reform Commission & NSW Law Reform Commission 2010. *Family violence: A national legal response.* ALRC Report 114

Babor T, Caetano R, Casswell S, Edwards G, Giesbrecht et al. 2010, *Alcohol: No ordinary commodity—research and public policy* 2nd ed. Oxford: Oxford University Press

Barrett B, Habibov, N & Chernyak E 2012. Factors affecting prevalence and extent of intimate partner violence in Ukraine: Evidence from a nationally representative survey. *Violence against women* 18(10): 1147–1176

Bazargan-Hejazi S, Kim E, Lin J, Ahmadi A, Khamesi M et al. 2014. Risk factors associated with different types of intimate partner violence (IPV): An emergency department study. *Journal of Emergency Medicine* 47(6): 710–720

Beydoun H, Beydoun M, Kaufman J, Lo B & Zonderman A 2012. Intimate partner violence against adult women and its association with major depressive disorder, depressive symptoms and postpartum depression: A systematic review and meta-analysis. *Social science & medicine* 75(6): 959–975

Birdsey E & Snowball L 2013. Reporting violence to police: A survey of victims attending domestic violence services. *Crime and Justice Statistics* 91: 1-9

Birnbaum M 2004. Human research and data collection via the Internet. *Psychology* 55(1): 803

Braaf R 2012. *Elephant in the room: Responding to alcohol misuse and domestic violence*. Sydney: University of New South Wales Australian Domestic and Family Violence Clearinghouse

Brennan A, Purshouse R, Rafia R, Taylor K & Meier P 2009. *Independent review of the effects of alcohol pricing and promotion: Part B. Results from the Sheffield Alcohol Policy Model.* Sheffield: University of Sheffield http://www.dh.gov.uk/dr_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_091364.pdf

Brookoff D, O'Brien K, Cook C, Thompson T & Williams C 1997. Characteristics of participants in domestic violence: Assessment at the scene of domestic assault. *Jama* 277(17): 1369–1373

Bush K, Kivlahan D, McDonell M, Fihn S & Bradle, K 1998. The AUDIT alcohol consumption questions (AUDIT-C): An effective brief screening test for problem drinking. *Archives of Internal Medicine* 158(16): 1789–1795

Coker A, Weston R, Creson D, Justice B & Blakeney P 2005. PTSD symptoms among men and women survivors of intimate partner violence: The role of risk and protective factors. *Violence and Victims* 20(6): 625–643

Cook P & Moore M 1993. Economic perspectives on reducing alcohol-related violence. *Alcohol and Interpersonal Violence: Fostering Multidisciplinary Perspectives* 24(1): 193–211

Cornelius T & Resseguie N 2007. Primary and secondary prevention programs for dating violence: A review of the literature. *Aggression and Violent Behavior* 12(3): 364–375

Costa B, Kaestle C, Walker A, Curtis A, Day A et al. 2015. Longitudinal predictors of domestic violence perpetration and victimization: A systematic review. *Aggression and Violent Behavior* 24: 261–272

Cui, M, Gordon M, Ueno K & Fincham F 2013. The continuation of intimate partner violence from adolescence to young adulthood. *Journal of Marriage and Family* 75(2): 300–313

Cunradi C 2010. Neighborhoods, alcohol outlets and intimate partner violence: Addressing research gaps in explanatory mechanisms. *International Journal of Environmental Research and Public Health* 7(3): 799–813

Cunradi C, Mair C & Todd M 2014. Alcohol outlet density, drinking contexts and intimate partner violence: A review of environmental risk factors. *Journal of Drug Education* 44(1/2): 19–33

Cunradi C, Ames G & Duke M 2011. The relationship of alcohol problems to risk for unidirectional and bidirectional intimate partner violence among a sample of blue collar couples. *Violence and Victims* 26(2): 147

Day A 2015. *Witness statement of Professor Andrew Day: Submission to the Royal Commission on Family Violence* Melbourne, Victoria. http://www.rcfv.com.au/MediaLibraries/RCFamilyViolence/Statements/WIT-0008-001-0001-Day-10.pdf

Day A & Bowen E 2015. Offending competency and coercive control in intimate partner violence. *Aggression and Violent Behavior* 20: 62–71

Day P, Breetzke G, Kingham S & Campbell M 2012. Close proximity to alcohol outlets is associated with increased serious violent crime in New Zealand. *Australian and New Zealand Journal of Public Health* 36(1): 48–54

Day A, Chung D, O'Leary P & Carson E 2009. Programs for men who perpetrate domestic violence: An examination of the issues underlying the effectiveness of intervention programs. *Journal of Family Violence* 24(3): 203–212

Dennis C-L & Vigod S 2013. The relationship between postpartum depression, domestic violence, childhood violence, and substance use epidemiologic study of a large community sample. *Violence Against Women* 19(4): 503–517

Doherty T & Kartalova-O'Doherty Y 2010. Gender and self-reported mental health problems: Predictors of help seeking from a general practitioner. *British Journal of Health Psychology* 15: 213–228

Douglas E & Hines D 2011. The helpseeking experiences of men who sustain intimate partner violence: An overlooked population and implications for practice. *Journal of Family Violence* 26(6): 473–485

Easton C, Mandel D, Babuscio T, Rounsaville B & Carroll K 2007a. Differences in treatment outcome between male alcohol dependent offenders of domestic violence with and without positive drug screens. *Addictive Behaviors* 32(10) 2151–2163

Easton C, Mandel D, Hunkele K, Nich C, Rounsaville B et al. 2007b. A cognitive behavioral therapy for alcohol-dependent domestic violence offenders: An integrated substance abuse–domestic violence treatment approach (SADV). *American Journal on Addictions* 16(1): 24–31

Fals-Stewart W, Golden J & Schumacher JA 2003. Intimate partner violence and substance use: A longitudinal day-to-day examination. *Addictive Behaviors* 28(9): 1555–1574

FARE 2015, *National framework for action to prevent alcohol-related family violence*, Canberra. http://www.fare.org.au/wp-content/uploads/research/FARE-National-framework-to-prevent-alcohol-related-family-violence-web.pdf

Farrell D & Petersen J 2010. The growth of internet research methods and the reluctant sociologist. *Sociological Inquiry* 80(1): 114–125

Follingstad D, Bradley R, Laughlin J & Burke L 1999. Risk factors and correlates of dating violence: The relevance of examining frequency and severity levels in a college sample. *Violence and Victims* 14(4): 365–380

Follingstad D, Rogers M & Duvall J 2012. Factors predicting relationship satisfaction, investment, and commitment when women report high prevalence of psychological abuse. *Journal of Family Violence* 27(4): 257–273

Foundation for Alcohol Research and Education see FARE

Gilmore W, Liang W, Catalano P, Pascal R, Broyd A et al. 2015. *Off-site outlets and alcohol-related harm*. NDLERF Monograph no. 56

Golding J 1999. Intimate partner violence as a risk factor for mental disorders: A meta-analysis. *Journal of Family Violence* 14(2): 99–132

Gorman D 2015. 'Everything works': The need to address confirmation bias in evaluations of drug misuse prevention interventions for adolescents. *Addiction* 110(10): 1539–1540

Gossop M, Darke S, Griffiths P, Hando J, Powis B et al. 1995. The Severity of Dependence Scale (SDS): Psychometric properties of the SDS in English and Australian samples of heroin, cocaine and amphetamine users. *Addiction* 9(5): 607–614

Graham-Kevan N & Archer J 2003a. Intimate terrorism and common couple violence. A test of Johnson's predictions in four British samples. *Journal of Interpersonal Violence* 18(11): 1247–1270

Graham-Kevan N & Archer J 2003b. Physical aggression and control in heterosexual relationships: The effect of sampling. *Violence and Victims* 18(2): 181–196

Graham K, Bernards S, Wilsnack S & Gmel G 2011. 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. *Journal of Interpersonal Violence* 26(8): 1503–1523

Graham K, Bernards S, Munne M & Wilsnack S 2008. *Unhappy hours: Alcohol and physical partner aggression in the Americas*. Washington, DC: Pan American Health Organisation

Grech K & Burgess M 2011. Trends and patterns in domestic violence assaults: 2001 to 2010. *Crime and Justice Statistics* 61

Greenlaw C & Brown-Welty S 2009. A comparison of web-based and paper-based survey methods testing assumptions of survey mode and response cost. *Evaluation Review* 33(5): 464–480

Gustafson R 1994. Alcohol and aggression. *Journal of Offender Rehabilitation* 21(3-4): 41–80

Hammock G & O'Hearn R 2002. Psychological aggression in dating relationships: Predictive models for males and females. *Violence and Victims* 17(5): 525–540

Hare S 2010. Intimate partner violence: Victims' opinions about going to trial. *Journal of Family Violence* 25(8): 765–776

Hawken A 2010a. Behavioral triage: A new model for identifying and treating substance-abusing offenders. *Journal of Drug Policy Analysis* 3(1)

Hawken A 2010b. HOPE for probation: How Hawaii improved behavior with high-probability, low-severity sanctions. *The Journal of Global Drug Policy and Practice* 4(3): 1–5

Hawken A & Kleiman M 2009. *Managing drug involved probationers with swift and certain sanctions: Evaluating Hawaii's HOPE: Executive summary*. Washington, DC: National Criminal Justice Reference Services

Henry J & Crawford J 2005. The short-form version of the Depression Anxiety Stress Scales (DASS-21): Construct validity and normative data in a large non-clinical sample. *British Journal of Clinical Psychology* 44(2): 227–239

Hines D, Brown J & Dunning E 2007. Characteristics of callers to the domestic abuse helpline for men. *Journal of Family Violence* 22(2): 63–72

Hines D & Douglas E 2010. Intimate terrorism by women towards men: Does it exist? *Journal of Aggression, Conflict and Peace Research* 2(3): 36–56

Hines D & Malley-Morrison K 2001. Psychological effects of partner abuse against men: A neglected research area. *Psychology of Men & Masculinity* 2(2): 75–85

Hirschel D, Hutchison I & Shaw M 2010. The interrelationship between substance abuse and the likelihood of arrest, conviction, and re-offending in cases of intimate partner violence. *Journal of Family Violence* 25(1): 81–90

Holder R 2007. *Police and domestic violence: An analysis of domestic violence incidents attended by police in the ACT and subsequent actions.* Research paper no.4. Sydney: Australian Domestic and Family Violence Clearinghouse

Holmila M, Beccaria F, Ibanga A, Graham K, Hettige S et al. 2014. Gender, alcohol and intimate partner violence: Qualitative comparative study. *Drugs: Education, Prevention & Policy* 21(5): 398–407

Holtzworth-Munroe A & Meehan J 2004. Typologies of men who are maritally violent scientific and clinical implications. *Journal of Interpersonal Violence* 19(12): 1369–1389

Holtzworth-Munroe A, Meehan J, Herron K, Rehman U & Stuart G 2000. Testing the Holtzworth-Munroe and Stuart (1994) batterer typology. *Journal of Consulting and Clinical Psychology* 68(6): 1000–1019

Holtzworth-Munroe A & Stuart G 1994. Typologies of male batterers: Three subtypes and the differences among them. *Psychological Bulletin* 116(3): 476

Jessor R & Jessor S 1977. Problem behavior and psychosocial development: A longitudinal study of youth. New York, New York, *Academic Press*.

Johnson M 2008. *A typology of domestic violence: Intimate terrorism, violent resistance, and situational couple violence*. Boston: Northeastern University

Johnson M 2006. Apples and oranges in child custody disputes: Intimate terrorism vs. situational couple violence. *Journal of Child Custody* 2(4): 43–52

Johnson M 2005. Domestic violence: It's not about gender—or is it? *Journal of Marriage and Family* 67(5): 1126–1130

Johnson M, Leone J & Xu Y 2014. Intimate terrorism and situational couple violence in general surveys ex-spouses required. *Violence Against Women* 20(2): 186–207

Johnson M & Leone J 2005. The differential effects of intimate terrorism and situational couple violence: Findings from the National Violence Against Women Survey. *Journal of Family Issues* 26(3): 322–349

Johnson M & Cares A 2004. Effects and non-effects of childhood experiences of family violence on adult partner violence. Paper to annual meeting of the National Council on Family Relations, Orlando, Florida, November 2004

Kelly J & Johnson M 2008. Differentiation among types of intimate partner violence: Research update and implications for interventions. *Family Court Review* 46(3): 476–499

Kilmer B, Nicosia N, Heaton P & Midgette G 2013. Efficacy of frequent monitoring with swift, certain, and modest sanctions for violations: Insights from South Dakota's 24/7 Sobriety Project. *American Journal of Public Health* 103(1): e37–e43

Kinnane S, Golson K, Henderson-Yates L & Melbourne J 2010. *Halls Creek alcohol restriction report: An evaluation of the effects of a restriction on take-away alcohol relating to measurable health and social outcomes, community percpetions and behaviours after a 12 month period*. Broome: University of Notre Dame Australia

Kinnane S, Farringdon F, Henderson-Yates L & Parker H 2009. *Fitzroy Valley alcohol restriction report: An evaluation of the effects of a restriction on take-away alcohol relating to measurable health and social outcomes, community perceptions and behaviours after a 12 month period*. Mt Lawley, Western Australia: University of Notre Dame Australia, Drug and Alcohol Office

Kruger D, Hutchison P, Monroe M, Reischl T & Morrel-Samuels S 2007. Assault injury rates, social capital, and fear of neighborhood crime. *Journal of Community Psychology* 35(4): 483–498

Laslett A, Dietze P, Cvetkovski S, McElwee P, Heale P et al. 1999. *The Victorian drug statistics handbook: Patterns of drug use and related harm in Victoria.* Melbourne, Victoria: Drugs and Health Protection Services Branch, Public Health Division, Department of Human Services

Laslett A, Catalano P, Chikritzhs T, Dale C, Doran C et al. 2010. *The range and magnitude of alcohol's harm to others.* Melbourne: Alcohol Education and Rehabilitation (AER) Centre for Alcohol Policy Research, Turning Point Alcohol and Drug Centre

Laslett A, Room R, Ferris J, Wilkinson C, Livingston M et al. 2011. Surveying the range and magnitude of alcohol's harm to others in Australia. *Addiction* 106(9): 1603–1611

Lebel C & Beaulieu C 2011. Longitudinal development of human brain wiring continues from childhood into adulthood. *The Journal of Neuroscience* 31(30): 10937–10947

Lee H, Ju E & Lightfoot E 2010. The role of substance use by both perpetrators and victims in intimate partner violence outcomes. *Journal of Social Work Practice in the Addictions* 10(1): 3–24

Leonard K 2005. Alcohol and intimate partner violence: When can we say that heavy drinking is a contributing cause of violence? *Addiction* 100(4): 422–425

Leonard K & Quigley B 1999. Drinking and marital aggression in newlyweds: An event-based analysis of drinking and the occurrence of husband marital aggression. *Journal of Alcohol Studies* 60(4): 537–545

Leonard K & Roberts L 1998. The effects of alcohol on the marital interactions of aggressive and nonaggressive husbands and their wives. *Journal of Abnormal Psychology* 107(4): 602–615

Leone J 2011. Suicidal behavior among low-income, African American female victims of intimate terrorism and situational couple violence. *Journal of Interpersonal Violence* 26(13): 2568–2591

Lewis S, Travea L & Fremouw W 2002. Characteristics of female perpetrators and victims of dating violence. *Violence and Victims* 17(5): 593–606

Lipsky S, Caetano R, Field C & Larkin G 2005a. Is there a relationship between victim and partner alcohol use during an intimate partner violence event? Findings from an urban emergency department study of abused women. *Journal of Studies on Alcohol* 66(3): 407–412

Lipsky S, Caetano R, Field C & Larkin G 2005b. Psychosocial and substance-use risk factors for intimate partner violence. *Drug and Alcohol Dependence* 78(1): 39–47

Livingston M 2011. A longitudinal analysis of alcohol outlet density and domestic violence. *Addiction* 106(5): 919–925

Livingston M 2008. Alcohol outlet density and assault: A spatial analysis. *Addiction* 103(4): 619–628

Lovibond, S.H. & Lovibond, P.F. (1995). Manual for the Depression Anxiety Stress Scales. (2nd. Ed.) *Sydney: Psychology Foundation.* ISBN 7334-1423-0.

Marcus G, Campbell G, Steendam W & Little C 2009. *Better policing, better outcomes: Changing police culture to prevent domestic violence and homicide.* Sydney: Australian Domestic and Family Violence Clearinghouse

Martin G, Copeland J, Gates P & Gilmour S 2006. The Severity of Dependence Scale (SDS) in an adolescent population of cannabis users: Reliability, validity and diagnostic cut-off. *Drug and Alcohol Dependence* 83(1): 90–93

Martin S & Bachman R 1997. The relationship of alcohol to injury in assault cases, in Galanter M & Galanter M (eds), *Recent developments in alcoholism, vol 13: Alcohol and violence: Epidemiology, neurobiology, psychology, family issues.* New York, NY: Plenum Press: 41–56

Matthews K, Shepherd J & Sivarajasingham V 2006. Violence-related injury and the price of beer in England and Wales. *Applied Economics* 38(6): 661–670

Mattson R, O'Farrell T, Lofgreen A, Cunningham, K & Murphy C 2012. The role of illicit substance use in a conceptual model of intimate partner violence in men undergoing treatment for alcoholism. *Psychology of Addictive Behaviors* 26(2): 255–264

McEwan T, Wood M, Ogloff J & Norton J 2015. *Understanding and responding to complex criminal behaviour resulting in family violence: Submission to the Royal Commission on Family Violence.* Melbourne: Centre for Forensic Behavioural Science, Swinburne University of Technology and Forensicare http://www.rcfv.com.au/getattachment/0D9DC8A2-8655-4048-B3DB-BE5AA51E8A3C/Centre-for-Forensic-Behavioural-Science---Swinburne-University;-Victorian-Institute-of-Forensic-Mental-Health-(Forensicare)

McKinney C, Caetano R, Ramisetty-Mikler S & Nelson S 2009. Childhood family violence and perpetration and victimization of intimate partner violence: Findings from a national population-based study of couple. *Annals of Epidemiology* 19(1): 25–32

Mechanic M, Weaver T & Resick P 2008. Mental health consequences of intimate partner abuse a multidimensional assessment of four different forms of abuse. *Violence Against Women* 14(6): 634–54

Meier P, Brenna A, Stockwell T, Sutton A, Wilkinson A et al. 2008. Independent review of the effects of alcohol pricing and promotion: Part A: Systematic reviews http://www.dh.gov.uk/en/Publichealth/Healthimprovement/Alcoholmisuse/DH_4001740

Menéndez P, Tusell F & Weatherburn D 2015. The effects of liquor licensing restriction on alcohol related violence in NSW, 2008–2013. *Addiction*., Available online early

Miczek K, DeBold J, van Erp A & Tornatzky W 1997. Alcohol, GABAA-benzodiazepine receptor complex, and aggression. *Recent Developments in Alcoholism* 13: 139–171

Mignone T, Klostermann K & Chen R 2009. The relationship between relapse to alcohol and relapse to violence. *Journal of Family Violence* 24(7): 497–505

Miller B 1993. Investigating links between childhood victimization and alcohol problems. Alcohol and Interpersonal Violence: *Fostering Multidisciplinary Perspectives, Monograph* 24: 315–323

Miller P, Curtis A, Chikritzhs T & Toumbourou J 2015a. *Interventions for reducing alcohol supply, alcohol demand and alcohol-related harm: Final Report*. Canberra: National Drug Law Enforcement Research Fund (NDLERF) http://www.ndlerf.gov.au/publications/monographs/monograph-57

Miller P, Droste N, Baker T & Gervis C 2015b. Last drinks: A study of rural emergency department data collection to identify and target community alcohol-related violence. *Emergency Medicine Australasia* 27(3): 225–231

Miller P, Wells S, Hobbs R, Zinkiewicz L, Curtis A et al. 2014. Alcohol, masculinity, honour and male barroom aggression in an Australian sample. *Drug and Alcohol Review* 33(2): 136–143

Mitchell L 2011. Domestic violence in Australia: An overview of the issues. *Parliament of Australia, Research Papers*. Canberra. http://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Library/pubs/rp/rp1415/ViolenceAust Morgan A & Chadwick H 2009. Key issues in domestic violence. Canberra: Australian Institute of Criminology. http://www.aic.gov.au/media_library/publications/rip/rip07/rip07.pdf

Mouzos J & Smith L 2007. Partner violence among a sample of police detainees. *Trends & Issues in Crime & Criminal Justice* 337: 1–6

Murphy C, O'Farrell T, Fals-Stewart W & Feehan M 2001. Correlates of intimate partner violence among male alcoholic patients. *Journal of Consulting and Clinical Psychology* 69(3): 528

Nam K, Lee G & Hwang J-S 2011. Gender stereotypes depicted by Western and Korean advertising models in Korean adolescent girls' magazines. *Sex Roles* 64(3–4): 223–237

Narayan R 2014. Domestic violence rampant among Indian community in Canada. *IANS English* 2014 Jan 08

New South Wales Department of Justice 2014. *It stops here: Safer Pathway overview.* Parramatta: NSW Dept. of Justice

New South Wales Government 2012, *New domestic violence framework unveiled* https://www.nsw.gov.au/news/new-domestic-violence-framework-unveiled

Nicholas R, White M, Roche A, Gruenert S & Lee N 2012. *Breaking the silence: Addressing family and domestic violence problems in alcohol and other drug treatment practice in Australia. Review of the literature.* Adelaide: National Centre for Education and Training on Addiction, Flinders University

O'Leary K & Schumacher J 2003. The association between alcohol use and intimate partner violence: Linear effect, threshold effect, or both? *Addictive Behaviors* 28(9) 1575–1585

Okuda M, Olfson M, Hasin D, Grant B, Lin K-H et al. 2011. Mental health of victims of intimate partner violence: Results from a national epidemiologic survey. *Psychiatric Services* 62(8): 959–962

Parkinson P & Humphreys C 1998. Children who witness domestic violence: The implications for child protection. *Child & Fam.* LQ 10: 147

Pillai A, Nayak M, Greenfield T, Bond J, Nadkarni A et al. 2013. Patterns of alcohol use, their correlates, and impact in male drinkers: A population-based survey from Goa, India. *Social Psychiatry & Psychiatric Epidemiology* 48(2): 275–282

Queensland Government 2015. *Not Now, Not Ever.* https://www.qld.gov.au/community/getting-support-health-social-issue/dfv-read-report-recommendation/index.html

Raine A, Brennan P, Mednick B & Mednick S 1996. High rates of violence, crime, academic problems, and behavioral problems in males with both early neuromotor deficits and unstable family environments. *Archives of general psychiatry* 53(6): 544–549

Raine A, Brennan P & Mednick S 1994. Birth complications combined with early maternal rejection at age 1 year predispose to violent crime at age 18 years. *Archives of General Psychiatry* 51(12): 984–988

Randle A & Graham C 2011. A review of the evidence on the effects of intimate partner violence on men. *Psychology of Men & Masculinity* 12(2): 97–111

Reingle Gonzalez J, Connell N, Businelle M, Jennings W & Chartier K 2014. Characteristics of adults involved in alcohol-related intimate partner violence: Results from a nationally representative sample. *BMC Public Health* 14(1): 193–206

Reingle J, Staras S, Jennings W, Branchini J & Maldonado-Molina M 2012. The relationship between marijuana use and intimate partner violence in a nationally representative, longitudinal sample. *Journal of Interpersonal Violence* 27(8): 1562–1578

Rodriguez N & Gomez J 2015. Alcohol consumption, illicit substances, and intimate partner violence in a sample of batterers in psychological treatment. *Consumo de alcohol, sustancias ilegales y violencia hacia la pareja en una muestra de maltratadores en tratamiento psicológico* 27(1): 27–36

Roman C & Reid S 2012. Assessing the relationship between alcohol outlets and domestic violence: Routine activities and the neighborhood environment. *Violence and Victims* 27(5): 811–28

Salom C, Williams G, Najman J & Alati R 2015. Substance use and mental health disorders are linked to different forms of intimate partner violence victimisation. *Drug and Alcohol Dependence* 151: 121–7

Schmidt L, Makela P, Rehm J & Room R 2010. Alcohol: Equity and social determinants. In Blas E & Kurup AS, *Equity, social determinants and public health programs.* Geneva: World Health Organization: 11–13

Shepherd J, Ali M, Hughes A & Levers B 1993. Trends in urban violence: A comparison of accident department and police records. *Journal of the Royal Society of Melbourne* 86(2): 87–88

Shepherd J, Shapland M & Scully C 1989. Recording of violent offences by the police: An accident and emergency department perspective. *Medicine, Science the Law* 29: 251–257

Shepherd J, Sivarajasingam V & Rivara F 2000. Using injury data for violence prevention. *BMJ* 321(7275): 1481

Shin E, Johnson T & Rao K 2012. Survey mode effects on data quality: Comparison of web and mail modes in a US national panel survey. *Social Science Computer Review* 30(2): 212–228

Shorey R, Stuart G, McNulty J & Moore T 2014. Acute alcohol use temporally increases the odds of male perpetrated dating violence: A 90-day diary analysis. *Addictive Behaviors* 39(1): 365–368

Shorey R, Stuart G & Cornelius T 2011. Dating violence and substance use in college students: A review of the literature. *Aggression & Violent Behavior* 16(6): 541–550

Smith P, Homish G, Leonard K & Cornelius J 2012. Intimate partner violence and specific substance use disorders: Findings from the National Epidemiologic Survey on Alcohol and Related Conditions. *Psychology of Addictive Behaviors* 26(2): 236

Stark E 2007. *Coercive control: The entrapment of women in personal life.* Oxford USA: Oxford University Press

Stith S, McCollum E, Amanor-Boadu Y & Smith D 2012. Systemic perspectives on intimate partner violence treatment. *Journal of Marital and Family Therapy* 38(1): 220–240

Stockwell T, Auld M, Zhao J & Martin G 2012. Does minimum pricing reduce alcohol consumption? The experience of a Canadian province. *Addiction* 107(5): 912–920

Stockwell T et al. 2015. Relationships Between Minimum Alcohol Pricing and Crime During the Partial Privatization of a Canadian Government Alcohol Monopoly. *Journal of Studies on Alcohol and Drugs* 76(4): 628–634

Straight E, Harper F & Arias I 2003. The impact of partner psychological abuse on health behaviors and health status in college women. *Journal of Interpersonal Violence* 18(9): 1035–1054

Stuart G, Moore T, Elkins S, O'Farrell T, Temple J et al. 2013. The temporal association between substance use and intimate partner violence among women arrested for domestic violence. *Journal of Consulting and Clinical Psychology* 81(4): 681

Stuart G, Temple J, Follansbee K, Bucossi M, Hellmuth J et al. 2008. The role of drug use in a conceptual model of intimate partner violence in men and women arrested for domestic violence. *Psychology of Addictive Behaviors* 22(1): 12–24

Taylor A, Ibrahim N, Wakefield S & Finn K 2015. *Domestic and family violence protection orders in Australia: An investigation of information sharing and enforcement: State of knowledge paper.* Australia's National Research Organisation for Women's Safety (ANROWS). http://anrows.org.au/publications/landscapes/domestic-and-family-violence-protection-orders-in-australia-investigation

Taylor S, Schmutte G, Leonard K & Cranston J 1979. The effects of alcohol and extreme provocation on the use of a highly noxious electric shock. *Motivation and Emotion* 3(1): 73–81

Testa M, Hoffman J & Leonard K 2011. Female intimate partner violence perpetration: Stability and predictors of mutual and nonmutual aggression across the first year of college. *Aggressive Behavior* 37(4): 362–373

Thompson M, Saltzman L & Bibel D 1999. Applying NIBRS data to the study of intimate partner violence: Massachusetts as a case study. *Journal of Quantitative Criminology* 15(2): 163–180

Tilbrook E, Allan A & Dear G 2010. *Intimate partner abuse of men.* Perth, Western Australia: Edith Cowan University

Trimboli L 2015. Persons convicted of breaching Apprehended Domestic Violence Orders: Their characteristics and penalties. *Crime and Justice Statistics* 102: 1-8

Tsui V 2014. Male victims of intimate partner abuse: Use and helpfulness of services. *Social work* 59(2): 121–130

Victorian Auditor-General 2012. *Effectiveness of justice strategies in preventing and reducing alcohol-related harm.* Melbourne: Victorian Auditor-General's Office

Victoria Legal Aid 2015. *Family violence intervention orders.* https://www.legalaid.vic.gov.au/find-legal-answers/family-violence-intervention-orders

Virkkunen M, Goldman D & Linnoila M 1996. Serotonin in alcoholic violent offenders. *Genetics of criminal and antisocial behaviour* 194

Wagenaar AC, Tobler AL & Komro KA 2010. Effects of alcohol tax and price policies on morbidity and mortality: A systematic review. *American Journal of Public Health* 100: 2270–2278

White H 2002. Longitudinal perspective on alcohol use and aggression during adolescence. *Recent developments in alcoholism* Spring: 81–103

WHO 2010. *Violence prevention: The evidence*. Geneva: WHO

WHO 2005. *Alcohol and Interpersonal Violence: Policy Briefing.* Geneva: WHO

WHO 2002. *World report on violence and health.* Geneva: WHO

Wiggers J, Jauncey M, Considine R, Daly J, Kingsland M et al. 2004. Strategies and outcomes in translating alcohol harm reduction research into practice: The Alcohol Linking Program. *Drug & Alcohol Review* 23(3): 355–364

Wilsnack R, Wilsnack S, Kristjanson A, Vogeltanz-Holm N & Gmel G 2009. Gender and alcohol consumption: Patterns from the multinational GENACIS project. *Addiction* 104(9): 1487–1500

Wolf M, Ly U, Hobart M & Kernic M 2003. Barriers to seeking police help for intimate partner violence. *Journal of Family Violence* 18(2): 121–129

World Health Organization see WHO

APPENDIX A—Panel survey

Deakin University Personal Safety Survey

Please read each question carefully and answer as truthfully as you can. For some questions you are asked to select one or more responses from a number of options. For other questions you are asked to provide a short written response. There are no right or wrong answers. It is important that you respond to all questions (other than when you are asked to skip a question).

Important: For questions that require you to select an option(s), please indicate your response by completely **shading in** the bubble next to your response with a blue or black ball-point pen.

Please fill in bubbles like this: ● Not this: ☒ ✓ ⊖ If you make a mistake, cross it out: ✖

If you prefer to complete an online version of this questionnaire, please enter the following link into your web browser:

https://www.surveymonkey.com/s/Deakin_SafetySurvey

Section One – Demographics

1. What is the postcode where you live? _____

2. Which of the following describes your current household?

- O Couple family with dependent children only
- O Couple family with dependent children and other persons
- O Couple family with non-dependent children
- O Multiple family household with dependent children
- O Multiple family household with no dependent children
- O One parent family with dependent children only
- O Shared accommodation
- O Couple only
- O Lone person household

3. What is the gross annual income of your household?

O Less than $25, 000 O $26, 000 - $50, 000 O $51, 000 - $100,000 O $101,000 or above

4. What is your age? [ ]

5. What is your Sex? O Male O Female O Transgender O Other (please specify) _____

6. What is your current marital status?

- O Never married
- O Married/De facto
- O Separated
- O Divorced
- O Widowed
- O Other (please specify) _____

1

Please read the following before answering the following questions: For the purposes of this survey, **'a relationship'** is defined as: "An interpersonal relationship between either same sex or opposite-sex partners which involves either physical, sexual, emotional, passionate, or romantic intimacy." By this definition, for example, **"your partner"** includes but is not limited to, the person you are married to, your de facto, your boyfriend/girlfriend, your fiancé, or someone you are only sexually intimate with.

7. Are you in a **current relationship**? O Yes – **go to Question 9** O No

8. If you are not in a current relationship, have you *ever* been in a relationship?

O Yes – *Note*. For questions relating to "your partner", please refer to *your most recent partner*.

O No—**go to Question 10.** *Note*. Please skip any questions that relate to "your partner".

9. What is/was the **sex** of your current or most recent partner (if you are not in a current relationship)?

O Male O Female O Transgender O Other (please specify)_____

10. How long have you been in your current relationship OR how long was your most recent relationship (if you are not in a current relationship)?. Please round to the nearest month. _____ years and _____months

11. Were you born in Australia? O Yes- **go to Question 14** O No

12. In which country were you born? _____

13. In which year did you arrive to live in Australia? _____

14. What is your nationality? _____

15. Do you belong to the Aboriginal/Torres Strait Islander group? O Yes O No

16. What is the main language you speak at home? _____

17. What is the employment status of yourself and your current or most recent partner (if you are not in a current relationship)?

Self:	**Partner:**
O Employed casually	O Employed casually
O Employed part-time	O Employed part-time
O Employed full-time	O Employed full-time
O Home duties	O Home duties
O Unemployed	O Unemployed
O Not in the labour force (e.g., retired)	O Not in the labour force (e.g., retired)
O Don't know	O Don't know
O Prefer not to answer	O Prefer not to answer

18. (a) What is your current occupation (if you have one)? _____

(b) What is your current partner's occupation (if they have one) **OR**, if you are not in a current relationship, what was your most recent partner's occupation while you were together? (if he or she had one)?

_____

2

19. What is/was the highest level of education for you and your current or most recent partner (if you have one)?

Self:	**Partner:**
O Never attended school	O Never attended school
O Year 8 or below	O Year 8 or below
O Year 9 to 11	O Year 9 to 11
O Year 12 or equivalent	O Year 12 or equivalent
O Vocational qualification, e.g., TAFE	O Vocational qualification, e.g., TAFE
O Tertiary qualification	O Tertiary qualification

Section Two – Experience of controlling behaviour, aggression or violence

Violence is any behaviour that harms or threatens to harm an individual, and can include controlling behaviour, and physical, sexual, or verbal aggression.

20. Have you ever experienced violence during your lifetime (either as a victim and/or a perpetrator)?
    - O No – go to **Question 23**
    - O Yes, more than 12 months ago – go to **Question 23**
    - O Yes, in the last 12 months

21. If you have experienced violence in the past 12 months, please indicate **how many times** (i.e., write the number) you have experienced each of the following types of violence in the **last 12 months. If you haven't experienced a type of violence write "0"**:

Physical violence	_____	Unwanted sexual attention	_____
Sexual violence	_____	Intimidation	_____
Verbal aggression	_____	Other (please specify)	_____

22. Please indicate where you have experienced each type of violence in the **last 12 months** (shade all that apply).

Physical violence

O At my home	O At my workplace	O On public transport
O At the perpetrator's home	O Inside a licensed premises	O At a sporting venue
O At another person's home	O Outside a licensed premises	O Other (please specify):
O Outdoors	O In a private vehicle	

Sexual violence

O At my home	O At my workplace	O On public transport
O At the perpetrator's home	O Inside a licensed premises	O At a sporting venue
O At another person's home	O Outside a licensed premises	O Other (please specify):
O Outdoors	O In a private vehicle	

Verbal aggression

O At my home	O At my workplace	O On public transport

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O At the perpetrator's home O Inside a licensed premises O At a sporting venue
O At another person's home O Outside a licensed premises O Other (please specify):
O Outdoors O In a private vehicle

Intimidation

O At my home O At my workplace O On public transport
O At the perpetrator's home O Inside a licensed premises O At a sporting venue
O At another person's home O Outside a licensed premises O Other (please specify):
O Outdoors O In a private vehicle

Unwanted sexual attention

O At my home O At my workplace O On public transport
O At the perpetrator's home O Inside a licensed premises O At a sporting venue
O At another person's home O Outside a licensed premises O Other (please specify):
O Outdoors O In a private vehicle

Other

O At my home O At my workplace O On public transport
O At the perpetrator's home O Inside a licensed premises O At a sporting venue
O At another person's home O Outside a licensed premises O Other (please specify):
O Outdoors O In a private vehicle

23. For the following question please rate the extent to which each statement applies to **your current** or **most recent partner's** (if you do not have a current partner) behaviour toward **you**. If you have never had a partner **please go to Question 25**.

		Never	Sometimes	Often	Almost always
1	My partner is jealous or possessive	O	O	O	O
2	My partner provokes arguments	O	O	O	O
3	My partner limits contact with my family or friends	O	O	O	O
4	My partner insists on knowing who I am with	O	O	O	O
5	My partner calls me names in public	O	O	O	O
6	My partner makes me feel inadequate	O	O	O	O
7	My partner shouts or swears	O	O	O	O
8	My partner frightens me	O	O	O	O
9	My partner prevents my knowledge of or access to income	O	O	O	O

4

24. For the following questions please rate the extent to which each statement applies to **your** behaviour toward **your current** or **most recent partner** (if you do not have a current partner). If you have never had a partner **please go to Question 25**.

		Never	Sometimes	Often	Almost always
1	I am jealous or possessive	O	O	O	O
2	I provoke arguments	O	O	O	O
3	I limit contact with my partner's family or friends	O	O	O	O
4	I Insist on knowing who my partner is with	O	O	O	O
5	I call my partner names in public	O	O	O	O
6	I make my partner feel inadequate	O	O	O	O
7	I shout or swear	O	O	O	O
8	I frighten my partner	O	O	O	O
9	I prevent his/her knowledge of or access to income	O	O	O	O

IMPORTANT: Questions 25 to 73 ask only about your **most recent** experience of violence. If you have not experienced violence over your lifetime, please skip to **Section Four (Question 74)**

25. How long ago was the most recent violent incident you experienced (either as a victim and/or a perpetrator)?

O Less than a month ago
O 1 month to less than 6 months ago
O 6 months to less than 12 months ago
O More than 1 year ago

26. What was the type of violence experienced during the most recent incident? (shade all that apply)

O Physical
O Sexual
O Verbal
O Intimidation
O Unwanted sexual attention
O Other (please specify)_____

27. What is the nature of the violence you experienced during the most recent incident?

O Assault only
O Threat only
O Assault and threat

28. What was the sex of the other person(s) involved in the most recent violence incident?

O Male only
O Female only
O Male and female

29. Other than you, how many people were involved in the most recent incident? _____

30. Other than the most recent incident, how many times have you experienced similar incidents with this/these individual/s? _____

31. Approximately over what time period have these incidents occurred (e.g., 3 months)? _____

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32. Who instigated (started) the most recent violent incident you experienced (e.g., the other person, yourself)? _____

At the most recent violent incident you experienced:

		Yes	No
33.	Were you hit by the other person(s)?	O	O
34.	Did you hit the other person(s)?	O	O
35.	Were you yelled or sworn at by the other person(s)?	O	O
36.	Did you yell or swear at the other person(s)?	O	O
37.	Did you react (retaliate) to the other person(s)' provocation or assault?	O	O

38. What was/is **your** relationship to the other person(s) involved in the most recent incident? (Select all options that apply)

- O Stranger
- O Previous partner
- O Brother or sister
- O Friend
- O Teacher
- O Prison officer
- O Counsellor or psychologist or psychiatrist
- O Boyfriend or girlfriend or date
- O Father or mother
- O Other relative or in-law
- O Acquaintance or neighbour
- O Doctor
- O Minister or priest or clergy
- O Current partner
- O Son or daughter
- O Employer or boss or supervisor
- O Co-worker or co-volunteer
- O Ex-boyfriend or ex-girlfriend
- O Other (please specify):

39. Where did the most recent violent incident take place?

- O At my home
- O At the perpetrator's home
- O At another person's home
- O Outdoors
- O At my workplace
- O Inside a licensed premises
- O Outside licensed premises
- O In a private vehicle
- O On public transport
- O At sporting venue
- O Other (please specify):

40. Were you injured as a result of the most recent incident? O Yes O No – **go to Question 43**

41. If you were injured as a result of the most recent incident, please indicate the type of injury you received (shade all that apply):

- O Bruises
- O Cuts
- O Penetrative injury/stab/gun shot
- O Broken teeth
- O Fractured or broken bones
- O Miscarriage (women only)
- O Psychological/emotional
- O Other (please specify): _____

42. Did you see a doctor (or other health professional) for an injury resulting from the most recent incident? O Yes O No

43. Was the most recent violence incident seen or heard by other people? (shade all that apply)

- O No
- O Witnessed by child/ren
- O Witnessed by stranger/s
- O Witnessed by friend/s
- O Witnessed by other family member/s
- O Don't know
- O Other (please specify): _____

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44. Was the most recent incident reported to the police?

- O No
- O Yes, I reported it to the police-
- O Yes, a family member reported it to the police
- O Yes, a friend reported it to the police
- O Yes, a stranger reported it to the police
- O Yes, a neighbour reported it to the police
- O Yes, it was reported by someone else (please specify)_____

45. If the most recent incident **was not** reported to the police, what were the main reasons (shade all that apply)?

- O Shame/embarrassment
- O Did not want the other person/s arrested
- O Did not regard it as a serious offence
- O Did not think the police could do anything
- O Did not think the police would do anything
- O Did not think I would be believed
- O Did not know what to do
- O Fear of legal processes
- O Cultural reasons
- O Language reasons
- O Did not want to ask for help
- O Felt I could deal with it myself
- O Fear of the other person/s
- O Other (please specify):

If the most recent incident **was reported**, please indicate how it was dealt with by the police:

	Yes	No	Don't Know
46. Someone was arrested in relation to the violent incident	O	O	O
47. Someone was removed in relation to the violent incident	O	O	O
48. Someone was detained (locked up) in relation to the violent incident	O	O	O
49. Someone was charged with an offence relating to the violent incident	O	O	O
50. A police order was put in place that restricted communication and/or contact between those involved in the incident (e.g., a Police Family Violence Order or Notice)	O	O	O
51. Referral to support services was made	O	O	O
52. Information about violence was provided	O	O	O
53. Emergency/safe accommodation was organised	O	O	O
54. Police attended the scene, but no action was taken	O	O	O
55. Police attended the scene, but perceived that the incident was something that 'just happened'	O	O	O
56. Was/were any other action(s) taken by the police? If yes, please specify in the text box below.	O	O	O

57. Was the matter subject to a court hearing? O Yes O No O Don't know

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58. Did you report or tell anyone else about the most recent incident (shade all that apply)?

- O No
- O Yes, I reported it to/told a friend
- O Yes, I reported it to/told a family member
- O Yes, I reported it to/told a neighbour
- O Yes, I reported it to/told a health professional
- O Yes, I reported it to/told someone else (please specify): _____

59. Who did you seek help from after the most recent incident? _____

60. What other support services did you use after the most recent incident? (shade all that apply)

- O None
- O Crisis help
- O Legal help
- O Financial help
- O Any other support service including a telephone helpline (please name)_____

61. Did you have to take time off work because of the violent incident?

- O Yes
- O No – **go to Question 63**
- O I don't/didn't work at the time of the most recent incident – **go to Question 66**

62. How much time off work did you have because of the violent incident?

- O Up to 1 day
- O 1 month to less than 6 months
- O 2 to 5 days
- O 6 months to less than 12 months
- O 6 days to less than 1 month
- O 1 year or more

63. Did you seek support in your workplace for this incident? O Yes O No- **go to Question 65**

64. Who did you seek support from?

- O Manager
- O Team member
- O Employee Assistance Program workplace support
- O Other (please specify) _____

65. On a scale of 1 to 10, how much did the most recent incident affect your performance at work (1 being performance was not affected to 10 being performance was extremely affected)? Please shade.

1	2	3	4	5	6	7	8	9	10
O	O	O	O	O	O	O	O	O	O

66. On a scale of 1 to 10, how much did the most recent incident affect your life (1 being your life was not affected to 10 being your life was extremely affected)? Please shade:

1	2	3	4	5	6	7	8	9	10
O	O	O	O	O	O	O	O	O	O

Section Three- Substance use during the most recent incident

67. Was **alcohol** involved in the most recent violent incident? (Shade all that apply)

- O No
- O I had been drinking but wasn't drunk
- O I was drunk
- O I can't remember my alcohol use
- O I believe alcohol was added to my drink without my consent
- O The other person/s had been drinking but weren't drunk
- O The other person/s was drunk
- O I don't know what my alcohol use was

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- O I can't remember the other person/s alcohol use
- O I don't know about the other person/s alcohol use

68. Was anyone using other **drugs** (including prescription drugs) prior to the most recent violent incident?

- O No (if you answered 'no' to both Questions 67and 68, please **go to Question 74, Section Four**)
- O I had been taking drugs but wasn't heavily affected
- O I was heavily affected by drugs
- O I can't remember my drug use
- O I can't remember the other person/s drug use
- O I believe drugs were added to my drink without my consent
- O The other person/s had been taking drugs but weren't heavily affected
- O The other person/s were heavily affected by drugs
- O I don't know what my drug use was
- O I don't know about the other person/s drug use

69. Which drugs had been used? Please name all that were used. Leave box blank if no drugs had been used (or you can't remember or don't know).

70. Where was the alcohol purchased that you and/or the other person/s had consumed prior to or during the most recent violent incident? (shade all that apply). Please skip to **Question 74 (Section Four)** if you answered '**no**', '**can't remember**', or '**don't know**' to **Question 67**.

- O Licensed restaurant
- O Supermarket liquor shop (e.g. Liquorland)
- O Nightclub
- O Bottleshop. Please name: _____
- O Pub or bar
- O Don't know

71. What is the distance of the place where the alcohol (consumed at the most recent incident) was purchased from your home?

- O Less than 500m
- O 500m – 1km
- O 1 - 2km
- O 2 - 5 km
- O 5 - 10 km
- O More than 10kms
- O Don't know

72. What is the distance of the place where the alcohol was purchased from the place where the most recent violent incident took place?

- O Less than 500m
- O 500m – 1km
- O 1 - 2km
- O 2 - 5 km
- O 5 - 10 km
- O More than 10kms
- O Don't know

73. Where was the alcohol consumed? (shade all that apply)

- O At my home
- O Outdoors
- O At my workplace
- O In a private vehicle
- O At the other person's home
- O On public transport
- O At a sporting venue
- O At licensed premises
- O At another person's home
- O In an institution such as a prison
- O Other (please specify):

Section Four – Substance Use

Please use the guide below when answering the following questions regarding drinking behaviour over the past 12 months:

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74. Over the past 12 months, how often did **you** have a drink that contains alcohol?

O Never – **go to Question 77** O Monthly or less O 2 – 4 times per month
O 2 – 3 times per week O 4+ times per week O Daily

75. Over the past 12 months, how many standard alcoholic drinks did **you** have on a typical day when you were drinking? Please give a whole number (i.e., 3): _____

76. Over the past 12 months, how often did **you** have 6 or more standard drinks on one occasion?

O Never O Monthly or less O 2 – 4 times per month
O 2 – 3 times per week O 4+ times per week O Daily

IMPORTANT: The following questions relate to **YOUR PARTNER'S** (or most recent partner's if you do not have a current partner) alcohol use, please note:

- **If you have a current partner**, please indicate drinking behaviour in the past 12 months **OR** if you have not been with your current partner for 12 months, please indicate drinking behaviour for as long as you have been together.
- **If you do not have a current partner**, please indicate drinking behaviour in the most recent 12 months of your relationship **OR** if you were not with your most recent partner for at least 12 months, please indicate drinking behaviour for as long as you were together.
- **If you have never had a partner**, please **go to Question 85**

77. How often did your current or most recent partner (if you do not have a current partner) have a drink that contains alcohol?

O Never – **go to Question 85** O Monthly or less O 2 – 4 times per month
O 2 – 3 times per week O 4+ times per week O Daily
O I don't know/can't remember

78. How many standard alcoholic drinks did your current or most recent partner (if you do not have a current partner) have on a typical day when they were drinking? Please give a whole number (i.e., 3). Leave blank if you don't know: _____

79. How often did your current or most recent partner (if you do not have a current partner) have 6 or more standard drinks on one occasion?

O Never O Monthly or less O 2-4 times per month
O 2-3 times per week O 4+ times per week O Daily
O I don't know/can't remember

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80. How often did you and your current or most recent partner (if you do not have a current partner) have a drink that contains alcohol together?

O Never – **Go to Question 85** O Monthly or less O 2-4 times per month
O 2-3 times per week O 4+ times per week O Daily
O I don't know/can't remember

81. When you and your current or most recent partner (if you do not have a current partner) drank together, how many standard drinks did you both have on a typical day? Please give a whole number (i.e., 3). (Leave blank if you don't know/can't remember):

82. When you and your current or most recent partner (if you do not have a current partner) drank together, how often did you both have 6 or more standard drinks of alcohol on one occasion?

O Never O Monthly or less O 2-4 times per month
O 2-3 times per week O 4+ times per week O Daily
O I don't know/can't remember

83. When you and your current or most recent partner (if you do not have a current partner) were drinking together, how often did it lead to a violent or aggressive incident?

O Never – **Go to Question 85** O Sometimes O Often O Almost always
O N/A (i.e., you have never experienced a violent incident in your lifetime, you and your partner never drink together, or you don't know/can't remember)- **Go to Question 85**

84. If you answered 'Sometimes', 'Often', or 'Almost always' to **Question 83**, please describe the nature (e.g., yelling at each other) of the typical incidents that occurred over the past 12 months between you and your partner when drinking:

85. How often do you think alcohol is a cause of the violence you have been involved in?

O Never O Less than monthly O Monthly
O Weekly O Daily or almost daily
O N/A (i.e., you have never experienced violence in your lifetime)

86. How often do you think drugs are a cause of the violence you have been involved in?

O Never O Less than monthly O Monthly
O Weekly O Daily or almost daily
O N/A (i.e., you have never experienced violence in your lifetime)

87. Please explain how you think alcohol and/or drugs influenced the violent incident/s you have been involved in (skip to **Question 88** if you answered 'never' to Questions 85 and 86):

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88. In the last 12 months have **you** used an illicit substance? If yes, please list the drug(s) **you** have used in the past 12 months: O Yes O No- go to **Question 95**

89. In the past 12 months, what has been **your** drug of choice? _____

Please use the scale below to answer questions 90-94 regarding your drug use:

0	1	2	3	4	5	6	7	8	9	10
never/almost never			sometimes			often			always/nearly always	

90. Do you think your drug use is out of control?	O	O	O	O	O	O	O	O	O	O	O
91. Does the possibility of missing a dose/hit/fix stress you out?	O	O	O	O	O	O	O	O	O	O	O
92. Do you worry about your drug use?	O	O	O	O	O	O	O	O	O	O	O
93. Do you wish you could stop taking drugs?	O	O	O	O	O	O	O	O	O	O	O
94. How difficult do you find it to stop, or go without drugs?	O	O	O	O	O	O	O	O	O	O	O

Section Six – Feelings of Personal Safety & Wellbeing

95. In the past 12 months, did you ever feel unsafe in any of the following situations?

	Yes	No	N/A
Using public transport alone at night	O	O	O
Walking alone in the local area at night	O	O	O
Being home with only my partner	O	O	O
Being home alone at night	O	O	O
Being home alone during the day	O	O	O

96. In the past 12 months, did you avoid any of the following situations due to feeling unsafe? Shade all options that apply.

	Avoided due to feeling unsafe	Avoided for reason other than safety	Did not avoid	N/A
Using public transport alone at night	O	O	O	O
Walking alone in the local area at night	O	O	O	O
Being home with only my partner	O	O	O	O
Being home alone at night	O	O	O	O
Being home alone during the day	O	O	O	O

97. Please read each statement and shade a number 0, 1, 2 or 3 which indicates how much the statement applied to you **over the past week**. There are no right or wrong answers. Do not spend too much time on any one statement. The rating scale is as follows:

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0	1	2	3
Did not apply to me at all	Applied to me to some degree, or some of the time	Applied to me a considerable degree or a good part of the time	Applied to me very much, or most of the time

		0	1	2	3
1.	I found it hard to wind down	O	O	O	O
2.	I was aware of dryness in my mouth	O	O	O	O
3.	I couldn't seem to experience any positive feeling at all	O	O	O	O
4.	I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the absence of physical exertion)	O	O	O	O
5.	I found it difficult to work up the initiative to do things	O	O	O	O
6.	I tended to over-react to situations	O	O	O	O
7.	I experienced trembling (e.g., in the hands)	O	O	O	O
8.	I felt that I was using a lot of nervous energy	O	O	O	O
9.	I was worried about situations in which I might panic and make a fool of myself	O	O	O	O
10.	I felt like I had nothing to look forward to	O	O	O	O
11.	I found myself getting agitated	O	O	O	O
12.	I found it difficult to relax	O	O	O	O
13.	I felt down-hearted and blue	O	O	O	O
14.	I was intolerant of anything that kept me from getting on with what I was doing	O	O	O	O
15.	I felt I was close to panic	O	O	O	O
16.	I was unable to become enthusiastic about anything	O	O	O	O
17.	I felt I wasn't worth much as a person	O	O	O	O
18.	I felt I was rather touchy	O	O	O	O
19.	I was aware of the action of my heart in the absence of physical exertion (e.g., sense of heart rate increase, heart missing a beat)	O	O	O	O
20.	I felt scared without any good reason	O	O	O	O
21.	I felt that life was meaningless	O	O	O	O

98. Use the following scale to indicate how truthful your responses to the questions asked in this survey have been:

Very untrue **Very true**

1 2 3 4 5 6 7 8 9 10

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Thank you for your time and participation in this study.

If you are feeling distressed, we suggest that you speak with a trusted family member or friend or contact one of the organisations listed in the plain language statement to assist you in dealing with your personal situation.

If you require immediate assistance or feel that you are in danger, please contact Police by calling 000

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APPENDIX B—Police data variable comparison

Significant differences exist across police record management systems in each state in the nature and type of data captured. Table 305 summarises the key variables, and compares the nature and type of information collected from each state for the current project.

Table 305 Police data variable comparison

Variable	ACT	NSW	SA	Tas	WA	QLD	NT	Vic
Incident								
Type(s) of DV incidents within data	All DV	DV assaults	Offences against the person cleared by apprehension	DV incidents (excludes DV arguments)	All DV	All DV	All DV	All DV, offenders and victim only
Date range	July 2009–June 2014	2009–13	2010–14	July 2009–June 2014 + prospective data (November 2014)	2009–14	1 Jan 2010–11 Dec 2015	January 2010–December 2014	2009–13
Month	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Day of the week	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Offence postcode (SEIFA)	Victim residence postcode only	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3-hr time interval of offence	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Violence type (IPV or FV)	Yes	Yes	Yes	IPV only	No, therefore all classified as DV	Yes	Yes	Yes
Offender alcohol use[c]	n.a.	Yes	n.a.	n.a.	n.a.	Yes	Yes	Yes
Victim alcohol use[c]	n.a.	Yes	Yes	n.a.	n.a.	Yes	Yes	Yes
Offender drug use[c]	n.a.	No	n.a.	n.a.	n.a.	Yes	No	Yes
Victim drug use[c]	n.a.	No	Yes	n.a.	n.a.	Yes	No	Yes

Table 305 Police data variable comparison

Variable	ACT	NSW	SA	Tas	WA	QLD	NT	Vic
Alcohol-related flag	Yes, from April 2010. Level of intoxication rated by police officer when victim or offender indicated they consumed alcohol prior to the incident (classified as affected vs not affected)	Yes. Incident associated or additional factor flagged as alcohol-related	Yes. Victim showed signs of being alcohol-affected at incident	Yes. Attending officers judge offender or victim to be affected by alcohol	Yes. Flag indicating if there was alcohol involved in the incident (as perceived by the attending officer)	Yes. Coded when either victim or offender judged to be affected by alcohol	Yes. Coded when either victim or offender judged to be affected by alcohol	No
Drug-related flag	No. The proxy 'drug seized' (at incident) was used	Yes. Incident associated or additional factor flagged as drug related	Yes. Victim showed signs of being drug-affected at incident	Yes. Attending officers judge offender or victim to be affected by drugs	No. Two proxies were used: 'drug history' and 'drug-related offence' (separate variables). Drug history only available from August 2013	Yes. Coded when either victim or offender judged to be affected by drugs (including illicit drugs and volatile substances)	Yes. Incident drug flag provided by NT police	No
Child present/witness	No. The proxy 'child victim' was created by coding 'yes' to incidents involving a child victim <18 years	Yes	Yes	Yes, from 16 October 2011–June 2014	Yes, only from August 2013	No. The proxy 'child victim' created by coding 'yes' to incidents involving a child victim <18 years	Yes	Yes
Offender recidivism[a]	n.a.	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Repeat victim[a]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Offence against the person	Yes[b]	n.a.?	n.a.?	n.a.?	Yes[c]	n.a.	No	No
FVO or other order breach	Yes, breach of family violence order or breach of justice order	n.a.	n.a.	Yes, family violence order (FVO) breaches	Yes. Restraining order breaches	Yes. Contravening domestic and family violence prevention Act	No	No
Weapons present flag	Yes	n.a.				n.a.	No	No

Table 305 Police data variable comparison

Variable	ACT	NSW	SA	Tas	WA	QLD	NT	Vic
Person								
Offender age	n.a.	Yes				Yes	Yes	Yes
Victim age	Yes	Yes				Yes	Yes	Yes
Offender sex	n.a.	Yes				Yes	Yes	Yes
Victim sex	Yes	Yes				Yes	Yes	Yes
Offender ATSI	n.a.	n.a.				n.a.	No	Yes
Victim ATSI	Yes	n.a.				n.a.	No	Yes

n.a.=not available; IPV=intimate partner violence; FV=(other) family violence; DV=domestic violence; FVO=family violence order

a: offender recidivism and repeat victimisation was calculated by counting whether offender and victim IDs appeared in more than one incident during the measurement period

b: classified as an 'offence against the person' according to the Australian Standard Offence Classification (ASCO) codes relating to homicide and related offences, acts to cause injury, sexual assault and related offences, dangerous or negligent acts endangering individuals, abduction, harassment and other offences against the person

c: offender and victim variables not available in all states