

Discussion paper: Criminalising coercive control in South Australia – implications for women with disability

Introduction

We are seeking your expertise and views about how legislating against coercive control in South Australia will impact women with disability. This paper provides a brief overview of the research and the key issues raised through previous consultation with South Australian stakeholders about the proposed legislation over 2022.

Seeking your input

In order for legislation to be effective, targeted information and education campaigns must be undertaken to reach specific groups. A set of questions is included in this discussion paper for you to consider in your thinking and views on this topic.

Please be aware that the content in this document may be distressing or raise issues of concern for some readers. There are a range of services available if you require support after reading this paper. Lifeline provide 24/7 crisis support and can be contacted on 131 114. Beyond Blue also provide support services and can be contacted on 1300 224 636. Confidential information, counselling and support services can also be accessed through 1800RESPECT.

What is coercive control?

Coercive control, as a broad definition, refers to an ongoing pattern of controlling and coercive behaviours that may include physical, sexual, psychological, financial and/or emotional abuse and intimidation. It is not a single act of violence, but a broader pattern of abusive behaviours used to dominate and control a person over time. Anybody can be a victim of family and domestic violence (FDV), and anyone can be a perpetrator. The vast majority of victims are women, and most perpetrators are men – this is particularly so in relation to coercive control. Perpetrators use tactics such as isolating the victim-survivor from their friends and family, tracking their movements, and controlling their access to money, where they go and what they wear, who they speak to, and whether they work.

Fundamentally, coercive control is about power, and the motivator is for a perpetrator to gain power and control and exert dominance over a victim-survivor. Coercive control can have a devastating impact on a victim's identity, their physical health and social and emotional wellbeing, and their connection with friends, family and culture.

We know that coercive controlling behaviours, and subsequent systemic responses, differ across age cohorts, Aboriginal and Torres Strait Islander Peoples, culturally and linguistically diverse communities, the LGBTIQ+ community and women with disability. Controlling and coercive behaviours also differ significantly within individual relationships – but perpetrators are overwhelmingly men.

Data collected earlier this year by the [Monash Gender and Family Violence Prevention Centre](#) on victim-survivor views about, and experiences of, coercive control has revealed that women with disability encounter additional specific forms of this abuse, and also specific barriers to seeking help.

The purpose of this discussion is to ensure that information and education campaigns are inclusive, and that people from all cultures, backgrounds, ages, gender identities, abilities and sexual orientations can see themselves in the behaviours described or depicted.

Why is South Australia legislating to criminalise coercive control?

Currently coercive control is not a specific criminal offence in South Australia. There are strong reasons to criminalise coercive control.

Firstly, it is important to note that **coercive control can predict future intimate partner homicide**. According to research by [the NSW Domestic Violence Death Review Team](#), coercive controlling behaviours were a feature in 99% of domestic homicides in Australia between June 2008 and July 2016 – meaning out of 112 incidents of intimate partner homicide, coercive control was a feature of every relationship except one. A number of these cases did not have any evident history of physical violence. According to [Our Watch](#), in Australia on average one woman per week is murdered by her current or former partner. Homicide can often be the first act of physical violence in this type of abusive relationship, which is why it is so important that everyone recognises coercive control for what it is – a particularly insidious, highly dangerous form of FDV.

Secondly, and very much related to the point above, as highlighted by [Women's Safety NSW](#) it is important to recognise the gravity of this behaviour in the eyes of the law. **Legislating**

against coercive control in South Australia is a way to improve the legal system's response to all forms of FDV. The South Australian Government wants the law to accurately reflect the experiences of victim-survivors and hold perpetrators accountable for the abuse they inflict on their partners. This includes a commitment to inclusive, culturally safe and responsive implementation to protect victim-survivors who come forward. Legislation will assist the justice system to meet community expectations in this respect and enable the prosecution of perpetrators. It will also give police the ability to intervene and stop offenders using criminal charges, without needing to wait for abuse to escalate into physical violence. **Criminalising coercive control will affirm community understanding that it is unacceptable behaviour.**

What does the research tell us?

Prevalence of violence experienced by women with disability

Women with disability experience FDV at [higher rates](#) than women without disability.

The 2016 Australian Bureau of Statistics' (ABS) Personal Safety Survey (PSS) [reports](#) that

- 1 in 4 (25% or 748,000) women with disability have experienced sexual violence after the age of 15, compared with 15% (or 978,000) without disability
- 2 in 5 (40% or 1.2 million) women with disability have experienced physical violence after the age of 15, compared with 26% (or 1.7 million) without disability

The PSS also found more women with disability reported that they had experienced emotional abuse from a current or previous partner since the age of 15, compared with 1 in 5 (19%, or 1.2 million) women without disability.

The PSS also reports that there are specific types of non-physical abuse that women with disability are more likely to have experienced. Among people who were emotionally abused by their most recently emotionally abusive previous partner, people with disability were more likely to report that they had experienced:

- insults intended to cause shame or humiliation (56%, or 668,000), compared with people without disability (46%, or 707,000).
- financial abuse (50%, or 591,000), compared with people without disability (37%, or 579,000)
- deprivation of basic needs such as food, shelter, sleep or assistive aids (14%, or 172,000), compared with people without disability (8%, or 124,000)

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability [reports](#) that distinct forms of violence experienced by women with disability can include:

- withholding of food, water, medication or personal care
- restrictive practices
- reproductive control, and
- seclusion.

Coercive control can be all or one of these types of abuse, perpetrated in a sustained and ongoing pattern of behaviour over time. It has a devastating impact on a victim's sense of autonomy and personal safety.

[Initial findings](#) from Monash University have found that women with disability were almost 15% more likely to have experienced coercive and controlling behaviours from both a parent and an intimate partner than victim-survivors without disability.

Questions

1. In addition to the definition described above, are there other ways that coercive control can be used specifically against women with disability?
2. Through your experiences, how are non-physical forms of violence understood, recognised and openly discussed as a form of FDV?

Additional risk factors for violence against women with disability

Women with disability are more likely to experience coercive controlling behaviours than women without disability, and are [less likely](#) to recognise those behaviours as a form of abuse. Monash survey participants were asked whether at the time they were experiencing coercive and controlling behaviours, they recognised them as a form of FDV – 59% of women with disability who answered this question said no; they did not recognise the behaviours as a form of abuse.

Additional barriers for victim-survivors seeking justice

There are [significant barriers](#) for women with disability who are experiencing FDV to accessing support. For example, the abuse itself might restrict help-seeking, by restricting or controlling communication, activities, friendships, employment and lack of support to connect with networks. Women with disability can also face physical access barriers, inaccessible information or communication, discrimination and lack of knowledge or confidence in assisting women with disability.

It is important that government considers the unique needs of women with disability, and ensure we reduce barriers to accessing and navigating justice systems.

3. What do you view as barriers to obtaining services and support specific to people with disability? Do these barriers differ for different groups within the community (i.e., age, gender and sex, people living in regional areas)?
4. What can mainstream services do to make themselves more accessible to women with disability? Are there any examples you can think of?
5. What should frontline service providers and respondents including the police consider when assisting women with disability?
6. What are the most effective communication methods to provide information about coercive control?
7. What improvements can services make to ensure better responses for victim-survivors of coercive control?

Your contribution

What we know is that in order for legislation to be effective, targeted information and education campaigns must be undertaken to reach specific groups, such as women with disability. This process must also involve extensive education and training for first responders, police and the justice system, to understand the nuanced issues experienced by peoples and their communities. We must ensure that responses to coercive control is equitable, appropriate and effective.

Your input into this process is highly valued and greatly appreciated.

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