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The Hon Chanston Paech MLA
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Emailed to: Policy.AGD@nt.gov.au

Dear Minister,

Review of Legislation and the Justice Response to Domestic and Family Violence in the Northern Territory

The Australian Psychological Society (APS) is pleased to provide a response to *Review of Legislation and the Justice Response to Domestic and Family Violence in the Northern Territory - Proposals for consultation* (“*The Proposals*”). Many of our psychologists work with clients who are victim-survivors or perpetrators of coercive controlling behaviours throughout Australia on a daily basis in a range of settings.

The APS supports and congratulates the Northern Territory (NT) Government for its comprehensive approach to considering the broad systemic changes necessary to address coercive control. We appreciate that the process is part of a broad plan under the *Northern Territory’s Domestic, Family and Sexual Violence Reduction Framework 2018-2028: Safe, Respected and Free of Violence*¹ as success in reducing coercive control will ultimately require broad social change. *The Proposals* are well considered and far reaching which we believe to be crucial to the success of the initiative.

As with all our work at the APS, we consider the issues in light of the Sustainable Development Goals (SDGs)². Of particular relevance to coercive control is SDG Target 5.2 Eliminate all forms of violence against all women and girls³ and 16.1 Significantly reduce all forms of violence and related death rates everywhere in the public and private spheres, including trafficking and sexual and other types of exploitation⁴.

As we have mentioned in responses to other consultations^{5,6}, we applaud the fact that the question of whether to legislate against coercive control is currently being considered by the Standing Council of Attorneys-General⁷. Working towards national consistency, this collective effort will help raise awareness of this devastating social issue. We also acknowledge and commend the NT’s contribution to this work.

Irrespective of whether, and how it is legislated in each jurisdiction, a common agreement of principles is an important step to ultimately increase community understanding and improve the safety of future (would be) victims. In our response we note, however, that there are other individuals and organisations that are better placed to comment on the suitability of the detailed proposed legislative and criminal justice process changes included in *The Proposals*. Instead, we have focussed on the psychological considerations of some of the issues raised.

In considering our response, we would like to reiterate the importance of cultural safety and sensitivity being at the heart of all proposed changes. *The Proposals* acknowledge the complexity of Aboriginal people’s (in particular women’s) experiences of domestic violence. It is essential that the initiatives and activities that are implemented are genuinely co-developed with Aboriginal and Torres Strait Islander Territorians. This is particularly important for a number of reasons including:

- The unique impact of colonisation means that there must be deep recognition of the intergenerational trauma and ongoing disenfranchisement that has been created in Australian society.
- The important role of culture as a protective factor and as part of positive wellbeing of individuals and groups⁸. This can be expressed or experienced in a number of different forms such as being on country, or through language or art. These factors all need due attention and must be responsive to the individual and community’s needs. Culture can be used to build and strengthen social and emotional wellbeing and resilience.⁹

- Acknowledging that many of the social determinants of domestic and family violence are not uniform across communities. Interaction with the criminal justice system,⁸ racism and discrimination,¹⁰ service inequalities, disconnection from country, education outcomes, health outcomes, substance use are some of the many factors that may contribute to domestic violence and poor mental health. These inequalities must be addressed appropriately in order to see tangible progress.
- Recognising that access to mainstream domestic violence services is not equitable. When dedicated services for Aboriginal people are not available, some initiatives need to be adapted to become more responsive to the particular needs of Aboriginal and Torres Strait Islander peoples. For example, victim-survivors in remote and very remote Aboriginal communities face particular challenges when seeking refuge, due to the lack of anonymity in small communities and distances to available services.

Criminalisation of Coercive control

In principle, whilst there may be benefits in criminalising coercive control, questions remain about the readiness of the legal system and broader social systems to do so. These considerations are very clearly articulated in *The Proposals* and we commend the NT Government in its realistic longer-term approach. The APS remains neutral whether the proposed Option 1 or Option 2 are more appropriate for the NT context as we believe that the social change required for both options would be a positive outcome. However, committing to criminalisation of coercive control in the future sends a clear signal that the NT takes the matter seriously and that this behaviour will be associated with serious consequences.

A negative outcome of criminalisation, however, could be increased incarceration, particularly of Aboriginal and Torres Strait Islander peoples, if other social issues accompanying domestic violence are not addressed. As with the other jurisdictions, the NT must manage the risks of the justice response being inadequate, biased or criminalisation being seen as a panacea. For example, criminalisation itself will not provide adequate support and resources for victim-survivors to have true freedom of choice (like addressing current social housing problems). Similarly, successful implementation would also require providing perpetrators an evidence-based opportunity to change.

While we support having a long lead time which may be required to achieve the systemic, legislative, and social reforms required for successful preparation and implementation, we emphasise the importance of creating regular, measurable targets to keep on track. It will be important to determine whether the preparations are working, and the NT implementation is risk mitigated.

If criminalisation is to occur, the APS considers an appropriate definition of coercive control integral to any new legislation, and further, that it is recognised that this is a *pattern of behaviour* that cannot be understood by considering individual incidents in isolation from each other. We would like to emphasise significant psychological factors in the consideration of codification, particularly as the number of convictions may not equate to better outcomes for victim-survivors¹¹. We commend the NT Government for closely examining other jurisdictions' approaches in this regard. From a psychological perspective, the APS suggests that there may be both advantages and disadvantages to legislating against coercive control:

Possible benefits of criminalising coercive control

If successfully developed, managed and administered, making coercive control illegal could take steps towards addressing the lived reality of most victim-survivors by:

- Validating the rights of the victim-survivor to be protected within the context of a relationship,
- Validating the feelings of victim-survivors in attempting to understand the behaviour as “not being acceptable”,
- Supporting general deterrence by sending the message that this behaviour is damaging, against human rights and unacceptable both socially and legally,
- Providing the means to legally intervene with coercive controlling behaviours to prevent possible escalation of violence. In the absence of codification, victim-survivors of coercive control are less likely to report the abusive behaviour, risking increasingly violent acts on the part of the perpetrator - including homicide,
- Encouraging recognition of coercive control as a pattern of abusive behaviour which increases the likelihood of prosecution and moves the legal system towards “offender accountability” rather than “victim-blaming”^{12(p. 86)}.

Risks of criminalising coercive control

- Research clearly demonstrates that punitive measures (imprisonment) do not necessarily lead to a decrease in aggressive behaviour or changes to perpetrator attitudes towards domestic violence¹³. Although complex and fraught with methodological challenges, evidence suggests that the reconviction rate varies considerably internationally, with Australia being one of the highest¹⁴. Other measures may need to be considered as part of any new legislation, for example court diversion programs,
- There is a risk that the evidence threshold will be set too high for an offence to have occurred and the burden of proof will be placed on the victim-survivor, causing them undue stress without securing a conviction,

- In addition, coercive control may be too difficult to police and prosecute and seen as a ‘lesser’ offence than physical assault¹¹. It may also open the door for ‘system abuse’ and for perpetrators to make claims of contributing behaviour against their partners,
- One concern with the introduction of coercive control legislation is adding to an already ‘stressed’ system. Evidence-based standards and approaches for working with victim-survivors and perpetrators will be essential to ultimately improve outcomes.

Legislative reforms

As previously mentioned, we have commented upon a selection of the proposed legislative reforms which are within the scope of the APS. We suggest:

- **Proposal LR1** – having a stronger human rights focus in the preamble to strongly convey the fundamental nature of living free from aggression and violence of any kind.
- **Proposal LR2** – reordering the objects of the act to make it clear that prevention is the primary aim and the power of ‘accountability’ is the primary mechanism of response (given laws are a tool to respond to incidents where prevention is achieved via general and specific deterrence).
- **Proposal LR3** – considering making the police a ‘party’ to the matter is outside the scope of the APS. However, it may provide a level of protection to women and children who do not have to be singled out as the ‘named party’ and therefore the target of the perpetrators anger at being held accountable.
- **Proposal LR5 & 6** – that instead of including a ‘list’ of examples of ways coercive control can manifest, concentrate on the *impact* of the behaviour on the victim-survivor and the *intention* of the perpetrator. Individually, the behaviours may not constitute abuse, however, together, in the context of a coercive-controlling relationship, the pattern of behaviours effectively subjugate the victim-survivor. We commend the use of the Scottish model as the basis of the definitions, however question the appropriateness of the ‘reasonable person’ test being the only way to establish the offence. We advocate that victim-survivors’ *experience* of harm is able to be considered.
- **Proposal LR7** – creating a statutory guidance framework that includes non-legal stakeholders (such as stakeholders from the health system, Aboriginal communities, and the disability sector) to ensure the legal response is implementable in collaboration with a coordinated response. Importantly, any legislative framework needs to be not so narrow as to exclude the victim-survivor’s experience of harm as being relevant to the offence.
- **Proposal LR8** – that Section 11 is problematic as the third dot point suggests that non-consensual ‘sexual incident(s)’ (i.e. rape) is an ‘intimate personal relationship’.

In addition:

- **Proposal LR 18** – We support this proposal, noting that psychologists have an important role to play but need to be resourced to be able to provide the best quality services possible (please also see ‘Appropriate responses to and for perpetrators’ section below).
- **Proposal LR 54** – As outlined below, we advocate to allow expert evidence of domestic family violence to be admissible and, therefore, support this amendment.

Providing evidence in the context of coercive control

Irrespective of the legislative pathway chosen, compassion and respect for victim-survivors, and consideration of their safety and the impact of legislation is paramount. Given this, we recommend that the court and associated personnel be trained and exposed to the lived experience of victim-survivors of coercive control to gain insight into the impact of these complex behaviours and victim-survivors’ interaction with the justice system. A trauma-informed approach should be taken^{19,20}. As suggested, this may mean that court proceedings, evidence gathering and sentencing procedures need to consider the psychological impact of these processes on those experiencing coercive control – beyond the trauma and distress that they have likely already suffered. This may include a number of options, for example, a prohibition on the accused cross examining the victim-survivor in person. Other considerations include:

- **Inability of victim-survivors to fully explain the impact of the behaviours** – due to the complexity and the effects of being a victim-survivor of a coercive-controlling behaviour, it may be impossible for them to realise, understand, and/or articulate the dynamics of the relationship and the full impact. It is critical, therefore, that psychologists are able to undertake a thorough assessment of victim-survivors and, ideally, perpetrators to fully elucidate the intent and impact of the behaviours.
- **Importance of the admissibility of psychologists’ statements** – expert evidence from psychologists must be admissible to supplement victim-survivors’ evidence. Not only does this provide insight into the context of the behaviour, it may help to explain retaliatory or compliant behaviour of victims who are trying to maximise their safety or the safety of their loved ones (e.g. children or relatives). This is also applicable to Proposal LR 7.

Systemic reforms

In response to the proposed system reforms, the APS would like to emphasise the following two points:

1. The importance of prevention as the primary aim of any of these initiatives, including criminalisation of coercive control. Greater emphasis should be placed on initiatives that target controlling behaviours early (e.g. at school, in sporting clubs, with programs including psychologically-informed consent and respect training).
2. Initiatives will need to be appropriately funded for any tangible outcomes to be achieved. As discussed below and in *The Proposals*, these changes will be far reaching.

The APS believes that the current discussion around criminalising coercive control indicates an increased understanding of the complexity of the dynamics of non-physical violence, in particular perpetrator behaviour and the impact on victim-survivors. Regardless, if the NT government were to proceed with codification or not, changes to legislation seeking criminalisation should be part of an integrated response including continuing community education and specific training for all relevant parties.

Community education about coercive control and its psychological, behavioural, and socio-cultural underpinnings, could help to improve understanding and action. As previously discussed, some groups are especially vulnerable to coercive control due to risk factors such as economic inequality, disability, and cultural norms and biases¹². Co-produced community education should explicitly address coercive control for these vulnerable groups. This should include plain English and information in other languages about the evidence-based psychological, behavioural and social-cultural factors and processes associated with coercive control and the opportunities to improve identification and intervention at individual and societal levels. For example, media kits based on these educational resources can be developed to inform the media and producers about appropriate ways to report on and represent coercive control in popular entertainment programming.

In particular, the language used to communicate the impact of coercive control on victim-survivors is important for the following reasons:

- Language provides a way to articulate the behaviours and their impact which helps victim-survivor, perpetrator, and community understanding,
- Appropriate language corresponds to the seriousness of the impact of the behaviours on victim-survivors,
- Appropriate language cannot ‘rationalise’ or ‘explain away’ the behaviour of the perpetrator.

The term ‘coercive control’ is effective in that it starts to describe the *function* of the behaviours and the intent of perpetrators to control or subjugate the other¹⁵. Nationwide, the inclusion of ‘coercive control’ in any relevant legislation is critical in increasing community awareness by contributing to a national understanding of these behaviours and their impact on victim-survivors.

Support to seek help

It is important to note that the impact of the introduction of the legislation will be minimal unless victim-survivors are supported in their attempt to seek assistance, and ultimately, justice.

People experiencing family and domestic violence are less likely to leave abusive relationships when there is insufficient psychological support to make the decision, or without connection to safe, local services tailored to their individual need. This creates a revolving door of victim-survivors leaving and being forced to return to violent relationships, due to a lack of emotional, psychological, and practical resources. The initiatives will not be successful unless there are sufficient ‘holistic’, wrap around services to support victim-survivors and perpetrators at every stage (the earlier the better). There is a pressing need to ensure that the psychological workforce is trained to the highest standards to effectively assist victim-survivors in times of crisis and greatest risk.

By their nature, laws against coercive control rely on police involvement. However, victim-survivors may be reluctant to seek assistance from police due to their safety being endangered or fearing they will not be believed.

As previously mentioned, if the legislation does proceed, it will be important to establish a comprehensive definition of coercive control developed through professional consultation mechanisms with the police force, justice department and psychologists to ensure shared understanding. Any changes need to be accompanied by significant police training, increased legal support for victim-survivors, and improved resourcing for family violence services. The safety of victim-survivors needs to be ensured both while court proceedings are undertaken, and afterwards, in cases where a conviction is not secured. The APS recommends ongoing discussion and broad consultation regarding criminalising coercive control and continuing review of outcomes-based research evidence from Australia and overseas.

Further, successful implementation will require police liaison and training to address misperceptions about coercive control, and identify barriers to gathering evidence prior to laws being introduced, as they did in Scotland. Additional research and international benchmarking to improve understanding of perpetrator typology, in order to inform training

across all levels of intervention, is indicated. The use of evidence-based measures of coercive controlling behaviours (e.g. the Checklist of Controlling Behaviors) and psychological assessment to shift the burden of proof away from victim-survivors¹⁰ is also required. Finally, ensuring that victim-survivors trust that coercive control will be treated in the same way as physical violence, despite the lack of physical evidence, will be imperative.

From a psychological perspective, it is the impact of legislation on victim-survivor which is critical. Given this, the APS recommends that the court and associated personnel be trained and exposed to the lived experience of victim-survivors of coercive control to gain insight into the impact of these complex behaviours and victim-survivors' interaction with the justice system. Other considerations include:

- **Treating the behaviour as a pattern, not a stand-alone incident** - it is critical that the whole context of the relationship and the pattern of behaviours be examined and admissible in court. Otherwise, the acts in isolation may not be 'illegal' despite the devastating effects they may have on victim-survivors.
- **Victim-survivor safety** - perpetrators utilising coercive and controlling behaviour are often skilled at identifying their partners' thought patterns and vulnerabilities. Charges made against offenders need the full support of the court process, with the victim-survivor's short- and long-term safety being the overriding factor across all levels of intervention.

Supports and services for victim-survivors

The approach of the service system should be evidence-based with the principles of compassion and trauma-informed practice with family safety being paramount ^{see 11}. Service providers need to be appropriately trained and experienced^{5,12}. Given the complexity of the behaviours and the long-term devastating impact that coercive control can have on mental health, advanced training and expertise from mental health professionals is required. As regulated practitioners, APS members regularly work with victim-survivors of domestic violence to support them through each part of their experience. As previously mentioned, it is essential that the psychological workforce is appropriately trained to support victim-survivors of coercive control.

It is essential that the Department of the Attorney-General and Justice establishes processes to ensure equitable access to services and support. For example, residents in remote regions face particular challenges when accessing domestic and family violence services. One positive outcome of the global COVID-19 pandemic is the familiarisation with technological solutions to service delivery. Opportunities such as day and night online zoom support for victim-survivors should be expanded and properly resourced.

The possible inequalities for residents without internet access or who have limited digital literacy must also be addressed. Similarly, linguistically, ability, and culturally diverse NT residents should be supported as they often represent populations who are particularly vulnerable, partially due to the difficulty of accessing services. Problems may be exacerbated when diverse community groups do not consider some controlling behaviours as problematic in an intimate relationship. Sufficient translators, resources in language, and community awareness in culturally and linguistically diverse groups are required. It has also been found that LGBTIQ+ people who seek support if they are abused, or wish to change their behaviour toward their intimate partner, may find it particularly difficult to access appropriate services ¹³.

The APS suggests a comprehensive co-response model which prioritises victim-survivor and family safety. There are examples of effective co-response models in Australia that promote a shared understanding by the core service team. One example is the Family Violence Multi-Agency Risk Assessment and Management Framework (MARAM) in Victoria which outlines the common approach across services to identify, assess and manage family violence risk¹⁴. This approach facilitates information sharing across services to co-develop a management plan.

The APS acknowledges that not all victim-survivors of coercive control seek support from mainstream domestic violence services for a multitude of reasons. As previously described, increased public awareness may assist victim-survivors to identify and articulate their experience and, in turn, seek help.

Increased public awareness may also assist unrelated service personnel or mainstream medical (or otherwise) service providers to identify and assist victim-survivors and direct them to receive appropriate support¹⁵.

Given that victim-survivors may access assistance through a number of channels, it is important to:

- Provide education, and awareness training in coercive control for all front-line health workers as part of on-boarding ^{see 15},
- Extend education and training for mental health workers and teachers, and
- Develop education and training programs as a prevention mechanism for the general public, schools, the police and other stakeholders.

The nature of coercive control means that many victim-survivors may not have access to the financial resources necessary to pay for services in the private sector. Ideally, a co-ordinated and integrated system would be available to victim-survivors, according to their personal risk profile and circumstances. This may include more resources being dedicated to public support systems.

Logically, the APS expects that if coercive control were to be criminalised, more victim-survivors would potentially be identified – increasing the need for psychological support services. It is imperative that the NT Government is prepared to provide appropriate funding for these services.

However, given that this is a national issue, the APS has previously advocated for the Federal Government to also consider providing funding through the Medicare Benefits Schedule (MBS) to enable victim-survivors of coercive control to access an extended number of rebatable sessions - similar to the Eating Disorder Psychological Treatment MBS items.

Appropriate responses to and for perpetrators

Resourcing must also be provided to assist perpetrators to change their behaviour patterns, and not simply contribute to the prison population in a way that ensures victim-survivors' ongoing safety. Working with perpetrators to achieve behavioural change can be challenging, as it often requires a marked shift in their long-entrenched attitudes and beliefs⁶. If coercive controlling behaviour is not addressed, it is highly likely that perpetrators will use similar behaviours in the future ^{see 16}.

There is a critical need to develop and evaluate perpetrator programs to ensure that supported initiatives are evidence-based ^{see 16,17}. Funding such programs may not be as attractive to Governments as initiatives to support victim-survivors, however, action must be taken to stop the cycle of abuse.

Like support offered to victim-survivors, it is essential that there are opportunities for perpetrators living in rural and remote areas to participate in behavioural change programs. Online opportunities also may address some of the reported incidences of perpetrators not attending behavioural change programs because they are “inconvenient” or “too difficult to attend in person”. For both online and in-person programs, it is important to acknowledge that effective cognitive and behavioural change is not the same as merely attending ^{see 18}. Thorough psychological assessment is required to determine whether any behavioural change program has been effective.

There is one program which utilises a different approach to working with perpetrators of domestic violence (and other offences). Using immersive, outdoor activities and other counselling and mentoring sessions, *Hard Cuddles* facilitators and mentors, some with lived experience, create an environment to remodel communication patterns and address a variety of emotional challenges¹⁹.

The role of psychology

Psychologists can play a key role in improving outcomes for those who use and experience coercive control. We suggest that this be extended to improving family and community outcomes by implementing psychologically-informed education, awareness and training programs and conducting appropriate research. Given that victim-survivors may access assistance through a number of channels, it is important to:

- Provide education, and awareness training in coercive control for all front-line health workers as part of on-boarding ^{see 22},
- Extend education and training for mental health workers and teachers,
- Develop education and training programs as a prevention mechanism for the general public, schools, the police and other stakeholders.
- Support trauma-informed policing practices that foster the empowerment of victim-survivors to have agency over their situation.
- Expand the provision of day and night online support services for victim-survivors, particularly those in regional and remote areas, and,
- Promote a comprehensive co-response model which prioritises victim-survivor and family safety.

The skillset and expertise of our members across Australia, including in the NT, means that the APS is well placed to support the reduction of coercive control, regardless of whether or not it is criminalised. In particular, psychologists are particularly able to assist in the assessment of victim-survivors and perpetrators, providing psychological support services, training of the police and judicial personnel, as well as raising community awareness.

If any further information is required from the APS, we would be happy to be contacted through the national office on (03) 8662 3300 or by email at z.burgess@psychology.org.au

Yours sincerely

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The APS would like to acknowledge and sincerely thank the members who so kindly contributed their time, knowledge, experience and evidence-based research to this submission.

References

1. Northern Territory Government. (2018). *The Northern Territory's Domestic, Family & Sexual Violence Reduction Framework 2018–2028*. https://territoryfamilies.nt.gov.au/__data/assets/pdf_file/0006/464775/Domestic,-Family-and-Sexual-Violence-Reduction-Framework.pdf
2. United Nations Department of Economic and Social Affairs. (2022). *Sustainable development*. <https://sdgs.un.org/>
3. United Nations Department of Economic and Social Affairs. (2022). *Goal 5—Achieve gender equality and empower all women and girls*. <https://sdgs.un.org/goals/goal5>
4. United Nations Department of Economic and Social Affairs. (2022). *Goal 16—Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels*. <https://sdgs.un.org/goals/goal16>
5. Australian Psychological Society. (2022). *Legislative Responses to Coercive Control in Western Australia*. <https://psychology.org.au/psychology/advocacy/submissions/professional-practice/2022/legislative-responses-to-coercive-control-in-west>
6. Australian Psychological Society. (2022). *Coercive Control Implementation Considerations—South Australia*. <https://psychology.org.au/psychology/advocacy/submissions/professional-practice/2022/coercive-control-implementation-considerations-sou>
7. Standing Council of Attorneys-General. (2022). *Consultation Draft – National Principles to Address Coercive Control*. <https://consultations.ag.gov.au/families-and-marriage/coercive-control/>
8. Dudgeon, P., Milroy, J., Calma, T., Luxford, Y., Ring, I., Walker, R., Cox, A., Georgatos, G., Holland, C., University of Western Australia, School of Indigenous Studies, Australia, & Department of the Prime Minister and Cabinet. (2016). *Solutions that work: What the evidence and our people tell us : Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project report*. School of Indigenous Studies, University of Western Australia. <http://www.atsispep.sis.uwa.edu.au>
9. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project. (2015). *FACT SHEET 2—The value of investing in upstream approaches across the lifecourse*. Telethon Kids Institute University of Western Australia. <https://cbpatsisp.com.au/wp-content/uploads/2021/03/fact-sheet-no-2-.pdf>
10. Haregu, T., Jorm, A. F., Paradies, Y., Leckning, B., Young, J. T., & Armstrong, G. (2022). Discrimination experienced by Aboriginal and Torres Strait Islander males in Australia: Associations with suicidal thoughts and depressive symptoms. *The Australian and New Zealand Journal of Psychiatry*, 56(6), 657–666. <https://doi.org/10.1177/00048674211031168>
11. Fitz-Gibbon, K., Walklate, S., & Meyer, S. (2020). *Australia is not ready to criminalise coercive control—Here's why*. The Conversation. <http://theconversation.com/australia-is-not-ready-to-criminalise-coercive-control-heres-why-146929>
12. Stark, E., & Hester, M. (2019). Coercive Control: Update and Review. *Violence Against Women*, 25(1), 81–104. <https://doi.org/10.1177/1077801218816191>
13. Gilligan, J. (2001). *Preventing violence*. Thames & Hudson.
14. Yuhnenko, D., Sridhar, S., & Fazel, S. (2020). A systematic review of criminal recidivism rates worldwide: 3-year update. *Wellcome Open Research*, 4, 28. <https://doi.org/10.12688/wellcomeopenres.14970.3>
15. Warren, L. (2021). *The invisible cage: Psychology's role in the criminalisation of coercive control*. InPsych. <https://www.psychology.org.au/for-members/publications/inpsych/2021/April-May-Issue-2/The-invisible-cage>
16. Walklate, S., Jude McCulloch, Kate Fitz-Gibbon, & JaneMaree Maher. (2019). Criminology, gender and security in the Australian context: Making women's lives matter. *Theoretical Criminology*, 23(1), 60–77.
17. Hamberger, L. K., Larsen, S. E., & Lehrner, A. (2017). Coercive control in intimate partner violence. *Aggression and Violent Behavior*, 37, 1–11. <https://doi.org/10.1016/j.avb.2017.08.003>
18. Logan, T. K. (2017). "If I Can't Have You Nobody Will": Explicit Threats in the Context of Coercive Control. *Violence and Victims*, 32(1), 126–140. <https://doi.org/10.1891/0886-6708.VV-D-14-00187>
19. blue knot foundation. (2021). *Building a Trauma-Informed World*. Blue Knot Foundation. <https://blueknot.org.au/resources/building-a-trauma-informed-world/>
20. Hopper, E. K., Bassuk, E. L., & Olivet, J. (2010). Shelter from the Storm: Trauma-Informed Care in Homelessness Services Settings. *The Open Health Services and Policy Journal*, 3(2), 80–100. <https://doi.org/10.2174/1874924001003020080>
21. *Evidence Act 1906*, (2022) (testimony of Western Australia). [https://www.legislation.wa.gov.au/legislation/prod/filestore.nsf/FileURL/mrdoc_45297.pdf/\\$FILE/Evidence%20Act%201906%20-%20%5B17-i0-00%5D.pdf?OpenElement](https://www.legislation.wa.gov.au/legislation/prod/filestore.nsf/FileURL/mrdoc_45297.pdf/$FILE/Evidence%20Act%201906%20-%20%5B17-i0-00%5D.pdf?OpenElement)
22. Loke, A. Y., Wan, M. L. E., & Hayter, M. (2012). The lived experience of women victims of intimate partner violence. *Journal of Clinical Nursing*, 21(15–16), 2336–2346. <https://doi.org/10.1111/j.1365-2702.2012.04159.x>