23 October 2023

Women's Safety and Violence Prevention
Department of Justice and Attorney-General
GPO Box 149
BRISBANE QLD 4001
Emailed to: ConsultationOWVP@justice.qld.gov.au.

Dear Members of the Women's Safety and Violence Prevention team,

APS response to *the Development of a Queensland domestic and family violence perpetrator strategy* **consultation paper**

The Australian Psychological Society (APS) is pleased to provide feedback on the *Development of a Queensland domestic and family violence perpetrator strategy consultation paper ('The Strategy*) and commends the Queensland (QLD) government for its holistic approach to addressing domestic and family violence. We appreciate the QLD government's attention to 'users of violence'[*] as opposed to perpetuating the onus being on victims (or would be victims) to reduce the impact of abuse. Consistent with *The Strategy*, the APS also strongly advocates for a preventative and early intervention approach.

Many of our members work with clients who are victim-survivors or perpetrators of domestic and family violence and coercive controlling behaviours in a range of settings. As with all our work at the APS, we consider the current issues in light of the Sustainable Development Goals (SDGs)[1]. Of particular relevance to coercive control is SDG Target 5.2 Eliminate all forms of violence against all women and girls[2] 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 exploitation[3].

In considering our response, we would like to reiterate the importance of cultural safety and sensitivity being at the heart of all proposed changes and programs. It is essential that the initiatives and activities that are implemented are genuinely co-produced with Aboriginal and Torres Strait Islander peoples. 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 groups[4]. 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.[5]
- Acknowledging that many of the social determinants of domestic and family violence are not uniform across communities. Interaction with the criminal justice system,[4] racism and discrimination,[6] service inequalities, disconnection from country, education outcomes, health

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[*]We support this language as it is less stigmatising than 'perpetrator', however it is important not to dimmish the impact of violence on victim-survivors. The main advantage of 'users of violence' is that it invites the opportunity for change (i.e. the user can choose not to use violence in the future) as opposed to 'perpetrator' which may characterise an individual for life. We suggest that the views of individuals with lived experience be taken into consideration to determine the most appropriate language.

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 and Torres Strait Islander peoples are not available, some initiatives need to be adapted to become more responsive to the particular needs of these communities.

While we have attempted to respond to the consultation questions in our submission, some content is outside the scope of the APS. For simplicity, we have arranged our recommendations in the following manner:

1. Prevention is key – attitudes and awareness

Working with people who use violence to achieve behavioural change can be challenging, as it often requires a marked shift in their long-entrenched attitudes and beliefs[7]. Insights gained from The National Community Attitudes Survey on Violence Against Women included an investigation of the current knowledge about, and attitudes towards, the various forms of sexual assault in Australia[8]. The results suggest that many Australians still think victims of sexual offences are at least partially to blame. Similar beliefs have also previously been reported in the police-force[9]. In particular, the following was found in Australians aged 16 and over:

- 1 in 5 (19%) were unaware that non-consensual sex in marriage is against the law,
- 1 in 10 (11%) believed that women were 'probably lying' about sexual assault if they did not report it straight away,
- 2 in 5 (42%) agreed that 'it was common for sexual assault accusations to be used as a way of 'getting back at men',
- 1 in 3 (33%) believed that 'rape resulted from men not being able to control their need for sex',
- 1 in 8 (13%) agreed that a man is justified in having non-consensual sex if the woman initiated intimacy in a scenario where a couple had just met, and
- 1 in 7 (15%) agreed this was justified in a scenario where the couple were married and the woman initiated intimacy.[8]

There will need to be widespread social change to reverse this culture in Australia. Psychologists are equipped to **support attitudinal change** and overcome biases in perception and information processing using evidence-based approaches[10,11], ideally early in life (during school age). Widespread attitudinal change programs should be targeted to the current community readiness level[12]. The APS would be pleased to assist in the co-design and implementation of initiatives to increase the knowledge and understanding of sexual and other offences against women with the aim to change the current damaging widespread attitudes.

Community education about coercive control and domestic and family violence and its psychological, behavioural, and socio-cultural underpinnings, could help to improve community understanding and action. Some groups are especially vulnerable to coercive control due to risk factors such as economic inequality, disability, and cultural norms and biases[13]. Community education should explicitly address domestic and family violence 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 inform the media and producers about appropriate ways to report on and represent coercive control in popular entertainment programming.

2. Addressing trauma and mental ill health in prison settings

Research clearly demonstrates that punitive measures (imprisonment) do not necessarily lead to a decrease in aggressive behaviour or changes to perpetrator attitudes towards domestic violence[14]. Although complex and fraught with methodological challenges, evidence suggests that the reconviction rate varies considerably internationally, with Australia being one of the highest[15]. In part, this could be due to their **experience in prison lacking opportunities** to learn new skills, approaches, or strategies to cope with, often very challenging life in the community. Importantly, a very high proportion (over 90%) of women in prison have histories of trauma which is a predictor of both

offending and reoffending[16]. At the very least, this indicates a need for **psychological support** for people in prison. For this reason, it is important to create an **environment of support**, rather than one that is intimidating and sterile[16].

3. Greater support for research to develop evidence-based interventions

There is a critical need to develop and evaluate perpetrator programs to ensure that supported initiatives are evidence-based [see 17,18]. Funding such programs may not be as attractive to Governments as initiatives to support victims, however, action must be taken to stop the cycle of abuse.

An APS member with specific expertise in the area of coercive control drew our attention to one program which uses 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 challenges[19].

Similarly, The Australian Institute of Criminology has recently released detail of an integrative 'nature-based' intervention with men who have used domestic and family violence[20]. Initial results are positive, with trends towards improving men's engagement and enabled informal conversations. It is clear, however, that more research is needed including larger sample sizes and different settings. Supporting research in this area should be a central initiative of *The Strategy*.

4. Psychological expertise is critical

Further supporting the importance of research is the emerging evidence that links domestic and family violence with certain personality traits and disorders [see 21]. For example, narcissism (in clinically significant cases Narcissistic personality disorder (NPD)[22]) is a belief of entitlement and an individual's importance and disregard for others' feelings[23] affecting an estimated 0.5-5% of adults[24]. Despite being well discussed in the public discourse, robust empirical understanding of NPD is limited. Emerging research suggests that NPD is maladaptive and strongly associated with 'causing pain and suffering to others' and with dysfunction in interpersonal domains[25]. Critically, a recent meta-analytic review found that narcissism is "an important risk factor for aggression and violence" [26(p. 477)].

Importantly, people who are diagnosed with a personality disorder may not respond to mainstream psychological treatments and so interventions might need to be adjusted to be most effective. When considering the best ways to prevent and address domestic and family abuse, psychological expertise is essential to ensure (a) individuals who use (or have higher risk of using in the future) violence are identified in a timely fashion, and (b) appropriate psychological treatment is available to individuals who have personality disorders to reduce the incidence of violent or abuse behaviour in the future.

5. Start in high-risk groups and expand

While we acknowledge that the vast majority of cases of domestic and family violence are males to females in the context of an intimate relationship, it is important to note that there are exceptions to this[27]. For example, better understanding and research into 'women who use force' has begun to find that these women have different motivations and reflections on their crime. It is important, therefore, to have tailored and evidence-based programs for women in prison[28] or undergoing release[29]. There is also relatively new work being done in Australia (e.g., positive SHIFT[30]) which support women who use force to explore alternatives in their intimate relationships. These approaches need to be appropriately evaluated so that evidence-based interventions can be utilised.

In addition, it is important that programs and initiatives are first implemented in vulnerable and high-risk groups, which are currently the best understood, and have the strongest evidence-base before expanding into other communities and demographics.

6. Pay attention to the unique challenges of rural and remote users of violence

Like support offered to victims, it is essential that there are opportunities for perpetrators living in rural and remote areas to participate in behavioural change programs. Online opportunities 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". It also helps overcome some of the issues of a lack of anonymity inherent to many small regional and remote communities. 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 31]. Thorough psychological assessment is required to determine whether any behavioural change program has been effective.

We thank you for the important work you are doing in this matter. 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

Dr Zena Burgess, FAPS FAICD
Chief Executive Officer

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. United Nations Department of Economic and Social Affairs. (2022). *Sustainable development*. https://sdgs.un.org/

2. 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

3. 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

4. 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

5. 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

6. 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

7. 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

8. Webster, K., Diemer, K., Honey, N., Mannix, S., Mickle, J., Morgan, J., Parkes, A., Politoff, V., Powell, A., Stubbs, J., & Ward, A. (2018). *Australians' attitudes to violence against women and gender equality* (Australia; Issue ANROWS Research report 03/2018) [Report]. Australia's National Research Organisation for Women's Safety. https://apo.org.au/node/207046

9. Maher, J., McCulloch, J., Fitz-Gibbon, K., & Walklate, S. (2017). *Finally, police are taking family violence as seriously as terrorism*. The Conversation. http://theconversation.com/finally-police-are-taking-family-violence-as-seriously-as-terrorism-88939

10. Puccetti, M., Greville, H., Robinson, M., White, D., Papertalk, L., & Thompson, S. C. (2019). Exploring Readiness for Change: Knowledge and Attitudes towards Family Violence among Community Members and Service Providers Engaged in Primary Prevention in Regional Australia. *International Journal of Environmental Research and Public Health*, *16*(21), 4215. https://doi.org/10.3390/ijerph16214215

11. Powell, A., & Webster, K. (2018). Cultures of gendered violence: An integrative review of measures of attitudinal support for violence against women. *Australian & New Zealand Journal of Criminology*, *51*(1), 40–57. https://doi.org/10.1177/0004865816675669

12. Oetting, E. R., Donnermeyer, J. F., Plested, B. A., Edwards, R. W., Kelly, K., & Beauvais, F. (1995). Assessing community readiness for prevention. *The International Journal of the Addictions*, *30*(6), 659–683. https://doi.org/10.3109/10826089509048752

13. Stark, E., & Hester, M. (2019). Coercive Control: Update and Review. *Violence Against Women*, *25*(1), 81–104. https://doi.org/10.1177/1077801218816191

14. Gilligan, J. (2001). *Preventing violence*. Thames & Hudson.

15. Yukhnenko, 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

16. Meyer, S. (2016). *Women in prison: Histories of trauma and abuse highlight the need for specialised care*. The Conversation. http://theconversation.com/women-in-prison-histories-of-trauma-and-abuse-highlight-the-need-for-specialised-care-68668

17. Hulme, S., Morgan, A., & Boxall, H. (2019). *Domestic violence offenders, prior offending and reoffending in Australia*. 22.

18. Misso, D. (2019). *Metacognition, personality functioning and domestic violence: A mixed methods analysis*. Queensland University of Technology.

19. Hard Cuddles. (2020). *The program*. Hard Cuddles. https://www.hardcuddles.com

20. Young, A., Boddy, J., O'Leary, P., & Mazerolle, P. (2023). *Trialling a nature-based intervention with men who perpetrate domestic and family violence*. Australian Institute of Criminology.

21. Fountoulakis, K. N., Leucht, S., & Kaprinis, G. S. (2008). Personality disorders and violence. *Current Opinion in Psychiatry*, *21*(1), 84–92. https://doi.org/10.1097/YCO.0b013e3282f31137
22. American Psychiatric Association. (2022). *Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR)*. American Psychiatric Association Publishing.
23. Krizan, Z., & Herlache, A. D. (2018). The narcissism spectrum model: A synthetic view of narcissistic personality. *Personality and Social Psychology Review*, *22*(1), 3–31. https://doi.org/10.1177/1088868316685018
24. Clevenland Clinic. (2023). *Narcissistic Personality Disorder*. Diseases & Conditions. https://my.clevelandclinic.org/health/diseases/9742-narcissistic-personality-disorder
25. Miller, J. D., Campbell, W. K., & Pilkonis, P. A. (2007). Narcissistic Personality Disorder: Relations with distress and functional impairment. *Comprehensive Psychiatry*, *48*(2), 170–177. https://doi.org/10.1016/j.comppsych.2006.10.003
26. Kjærvik, S. L., & Bushman, B. J. (2021). The link between narcissism and aggression: A meta-analytic review. *Psychological Bulletin*, *147*(5), 477–503. https://doi.org/10.1037/bul0000323
27. Joint select committee on coercive control. (2021). *Coercive control in domestic relationships*. Parliament of New South Wales. https://www.parliament.nsw.gov.au/ladocs/inquiries/2626/Report%20-%20coercive%20control%20in%20domestic%20relationships.pdf
28. Jones, J., Wilson, M., Simpson, P., & Butler, T. (2017). *Women who commit violent crimes need programs to help them while in prison*. The Conversation. http://theconversation.com/women-who-commit-violent-crimes-need-programs-to-help-them-while-in-prison-72279
29. Palombo, L. (2015). *Post-release mentoring succeeds in everything but winning funding*. The Conversation. http://theconversation.com/post-release-mentoring-succeeds-in-everything-but-winning-funding-40077
30. Berry Street. (2021). *Family Violence Support Services—Positive Shift*. Berry Street. https://www.berrystreet.org.au/what-we-do/family-violence-services/positive-shift
31. Frances, R., Alder, C., & Sutton, A. (1994). *Programs for men who are violent in the home*. Department of Criminology, University of Melbourne. https://www.aic.gov.au/sites/default/files/2020-09/CRG-19-92-FinalReport.pdf