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Domestic and family violence and parenting:
Mixed method insights into impact and
support needs: *Key findings and future directions*

ANROWS Compass (Research to policy and practice papers) are concise papers that summarise key findings of research on violence against women and their children, including research produced under ANROWS's research program, and provide advice on the implications for policy and practice.

This report addresses work covered in ANROWS research project 1.8 "Domestic and family violence and parenting: Mixed method insights into impact and support needs". Please consult the ANROWS website for more information on this project. In addition to this paper, ANROWS Landscapes and ANROWS Horizons papers are available as part of this project.

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Acknowledgement of Country

ANROWS acknowledges the traditional owners of the land across Australia on which we work and live. We pay our respects to Aboriginal and Torres Strait Islander elders past, present, and future; and we value Aboriginal and Torres Strait Islander history, culture, and knowledge.

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**Australian Institute of
Family Studies**

Domestic and family violence and parenting: Mixed method insights into impact and support needs: Key findings and future directions

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Introduction

This Compass paper provides an overview of the findings from the Domestic and Family Violence and Parenting Research Program—an extensive mixed method project that examined the impact of inter-parental conflict (IPC) and domestic and family violence (DFV) on parenting and parent–child relationships. This paper also sets out the implications of the findings for policy-makers and practitioners working with parents and children in the context of past or current family violence.

The research program had four components:

- a state of knowledge paper that examined literature about family violence and parenting and the nature of interventions and approaches applied in repairing relationships between mothers and children and fathers and children in this context (Hooker, Kaspiew, & Taft, 2016);
- an analysis of general population data from the Longitudinal Study of Australian Children (LSAC), using a measure of IPC, and the impact on parents' mental health, parenting, and a broad range of children's outcomes;
- an analysis of data from the Longitudinal Survey of Separated Families (LSSF) and Survey of Recently Separated Parents 2012 (SRSP), which form part of the Australian Institute of Family Studies (AIFS) Family Pathways suite of research about post-separation families. The analyses focus on reports of family violence experienced by parents before and during and after separation and the impact of these experiences on a range of outcomes for parents and children; and
- a qualitative component based on in-depth interviews with 50 women across Australia who have personal experiences of family violence and who reflected on the effects this had for their mothering, relationships with their children, characteristics of the perpetrators of DFV as fathers, and interactions with government and community services, including domestic violence, child protection, and family law services.

This multi-method project makes a unique contribution by bringing together evidence on a diversity of Australian populations, life-course stages, and experiences of IPC and DFV. Each study component provides a different perspective on the examination of parenting in the context of family violence. The research captures the experiences and impacts on fathers, mothers, and children at varying ages and stages of development and independence. This has enabled identification of important issues that are shared or differ across gender and family structure. The results illustrate the impacts of IPC and DFV that affect a large number of families, as well as the experiences of those who have undergone highly challenging and traumatic circumstances.

Definitions, prevalence, and characteristics

Overall, this research program used a definition of DFV broadly consistent with the definitions applied in the National Plan to Reduce Violence against Women and their Children 2010-2022 (Council of Australian Governments [COAG], 2011). Referring jointly to domestic violence and family violence as DFV recognises that violence in family settings may involve couples where one or both are parents to children in the household, former couples who are separated, and violence perpetrated towards family members of the couple, including children. DFV includes physical, psychological and emotional, sexual, financial, and other forms of violence associated with abusive control and coercion (Hooker et al., 2016; COAG, 2011; Campo, 2015). However, the behaviours measured in each of the quantitative studies are different. The LSAC analysis was based on a measure of IPC. The AIFS Family Pathways suite measured emotional abuse and physical hurt as indicators of DFV.

The LSAC data

The longitudinal LSAC research examined two cohorts of families, each involving around 3000 families in the analyses. Families were from all Australian states and territories and were broadly representative of the Australian population. Data were collected every 2 years since 2004, with five waves of data available for analysis: from birth up to age 8-9 years for the B (baby) cohort, and from ages 4-5 years to 12-13 years for the K (kindergarten) cohort. LSAC assessed mother-reported IPC, which referred to verbal or physical conflict between two people who were the parents of the child involved in the LSAC study. IPC may or may not involve DFV. Outcomes were assessed at three time-points representing important developmental stages for children: ages 4-5 years and 8-9 years for the B cohort, and age 12-13 years for the K cohort. Families were classified according to their current and prior experiences of family conflict as having: “no IPC” where none was reported, “past or emerging IPC” where IPC was reported as occurring in the past or currently but not both, and “persistent IPC” where it was reported both in the past and currently.

Experience of IPC was common across both cohorts. When the B cohort children were aged 8-9 years, and the K cohort were 12-13 years, 35-36 percent of mothers reported IPC across the five waves of data collection. One in four mothers (26-27%) reported past or emerging IPC and 8-9 percent reported persistent IPC. Higher levels of current IPC were evident among separated families, reported by 40 percent of mothers of children aged 12-13 years, compared with non-separated (intact) families (10%).

The AIFS Family Pathways data of separated parents

The LSSF and SRSP are focused studies of large, national samples of recently separated families who have registered with the federal government for child support. The first wave of LSSF in 2008 involved 10,002 parents, with a second wave of data in 2009, and a third wave in 2012 (including a “top-up” sample) for an average of 5 years post-separation. The SRSP 2012 involved 6119 parents and focused on parents whose main use of family law system services occurred in approximately 2011. These AIFS Family Pathways studies applied broad measures of DFV. The DFV measures refer separately to physical hurt caused and emotional abuse (a range of different types) reported to have been perpetrated by the other parent. Different time periods covering before as well as during and since separation were also analysed. However, a limitation of the AIFS Family Pathways data is that the measures do not account for the specific nature, power dynamics, and context of violence and these studies are likely to under-represent families in which there is severe DFV.

Overall, the prevalence rates of physical hurt before separation was one in four for mothers and one in six for fathers. For emotional abuse in the same period, about half of fathers and two-thirds of mothers reported such experiences. Analysis based on couple data, where both parents were participants in the LSSF, showed that one-directional violence (i.e. one parent reports experiencing DFV by the other parent) was reported more frequently by mothers than fathers. Bi-directional physical hurt (where both parents report this) was reported by one in ten former couples and bi-directional emotional abuse was reported by two in ten former couples. Twice as many mothers as fathers reported one-directional emotional abuse (18% cf. 9%) and mothers were two-and-a-half times as likely as fathers to have reported one-directional DFV, including physical hurt (7% mothers cf. 2% fathers). Although reported experiences of physical hurt were found to diminish after separation, some form of DFV was sustained for significant proportions of parents post-separation. Two in ten fathers and three in ten mothers reported DFV (mainly emotional abuse) in all three waves of the LSSF up to 5 years after separation, and approximately a quarter of parents (23% fathers and 25% mothers) reported DFV in two waves.

Qualitative interviews with mothers who have experienced family violence

The interview data indicate that the women who participated in the 50 qualitative interviews had experiences reflecting dynamics relevant to cases at the more severe end of the spectrum of DFV intensity patterns described previously in Kaspiew et al. (2015). This reflects the fact that the sampling strategy for this part of the research program involved specifically recruiting women who had used services in one or more of the family violence, child protection, and family violence sectors. Ninety-two percent had separated from the perpetrator and the perpetrator was a biological parent to at least one child for 45 out of 50 women.

These women commonly described being subject to multiple types of abuse, including emotional abuse, physical harm, sexual abuse, and financial abuse. Women pre-separation and women who had not separated from their partner most frequently described controlling and coercive behaviours ($n = 37/50$), which included rigid routines, and unreasonable expectations about housework and children's behaviour. Psychological and verbal abuse to the mother was also frequent, including where the perpetrator made threats to harm or did harm her ($34/50$). Ten women experienced threats to kill or attempts to kill them before separation. After separation, controlling and coercive behaviours ($n = 16/47$), verbal abuse ($n = 17/47$), and stalking ($n = 13/47$) were frequently present, and systems abuse (e.g. vexatious litigation) was also common, although physical threats and harm reduced in frequency. Cumulatively, this meant that DFV continued or escalated in some form post-separation for at least two-thirds of women. Out of the 50 interviewees, 45 mothers explicitly referred to the fact that their children had also been subjected to a form of abuse. Forms of child abuse included psychological or emotional abuse ($n = 31$), physical abuse ($n = 17$), sexual abuse and sexually abusive behaviours ($n = 5$), witnessing DFV ($n = 31$), and the child being a direct victim of family violence incidents that targeted his or her mother at the same time ($n = 13$). The abusive behaviours and the consequences described by the women shed some light on some of the dynamics that may be relevant in producing the population-level effects of IPC and the DFV patterns reported by separated parents in the AIFS Family Pathways studies. This sample of women who have interacted with services and agencies may be considered analogous to a clinical sample.

Impact of IPC and DFV on functioning: parents and children

Population-level effects

Overall, the research shows that IPC and DFV are associated with a range of negative consequences for parents and children, including in domains relevant to social and emotional wellbeing and parenting efficacy. Across all three age groups examined in the LSAC analyses (children 4-5 years, 8-9 years, and 12-13 years), mothers who experienced IPC were more likely to report dissatisfaction with the couple relationship, psychological distress, and parenting difficulties (low efficacy, high irritability, low consistency, or low warmth). Their children were also more likely than children whose mothers did not report IPC to have poor physical health, socio-emotional adjustment, and academic achievement. These findings may be considered to be robust, as they were evident across a range of measures, collected at different ages of children, and from mother-report, teacher-report, and direct child assessment sources. Furthermore, there was evidence that greater exposure to IPC was associated with more harm; for both mothers and children the best outcomes were found for those with no IPC, poorer outcomes were evident for those experiencing IPC in the past or currently, and the worst outcomes occurred for those who experienced both past and current IPC. These patterns remained after the analyses were adjusted for a range of maternal and family characteristics that are known to have adverse effects on children's health and development. The LSAC findings also demonstrated that IPC was associated with poorer functioning irrespective of whether parents were separated or not, with the poorest outcomes for mothers and children who were in separated families with ongoing conflict. Consistent with the LSAC findings about IPC and adverse outcomes for parents and children, the AIFS Family Pathways findings showed that DFV has negative consequences for parent and child wellbeing in separated families. Reported experiences of DFV were significantly linked with poorer mother-child and father-child relationships in separated families. The data suggest that the negative association between parent-child relationships and experiences of DFV may be partly mediated through the negative effects that DFV has on the quality of the inter-parental relationship, parents' safety concerns for themselves, and child and parental emotional health. Furthermore, financial hardship was more common overall among parents who reported violence or abuse than parents who did not, with a long-term association evident between financial hardship and experiences of physical hurt reported occurring before separation. The ratings of child

wellbeing by separated parents who reported experiences of violence or abuse were less favourable compared with those of parents without experiences of violence or abuse, regardless of the duration of separation. The analyses also showed that the reports of parents who experienced ongoing violence or abuse after separation were particularly negative about their child's wellbeing. The negative association between parental reports of child wellbeing and parental experience of DFV was conveyed through the negative effect of violence and abuse on the quality of inter-parental relationships, safety concerns and emotional health, and, for mothers, significant financial hardships after separation.

Together, the LSAC and the AIFS Family Pathways analyses established that when comparing families who do or do not report experiencing IPC or DFV, poorer outcomes are evident for the IPC and DFV groups overall, and are particularly evident where the experience of IPC and DFV is sustained over time. Both before and after separation, significant proportions of children and young people are cared for in families where IPC and DFV occurs, but continued IPC and DFV after separation may compound the negative effects of separation. The LSAC analyses showed that IPC is associated with mothers reporting that children have greater difficulty settling after contact visits with their father (40% compared with 16% no IPC reported) and children being more critical of the mother and other family members after spending time with fathers (32% compared with 12% no IPC reported). Unsurprisingly, this pattern also emerged in the qualitative data. The AIFS Family Pathways studies also suggest that the most salient influence on adverse outcomes is the presence of DFV and the extent to which it is sustained over time.

Insights from the qualitative "clinical sample"

Insights from the 50 interviews with women revealed that parenting in the context of DFV poses multiple ongoing challenges over the life course for mothers and children. The women interviewed had experienced multiple forms of DFV, and DFV had continued in some form after separation for most, including through the use of legal and service systems and administrative processes by ex-partners to maintain abuse. A number of common themes emerged from the women's accounts of the impact of DFV on their parenting capacity and their descriptions of their ex-partner's (and current partner's, in some cases) capacities as fathers. In relation to their own

parenting capacity, the accounts of the women highlighted direct and indirect consequences, including diminished physical and emotional capacity to meet their children's needs as a result of the violence. Confidence in their own abilities as mothers was also often undermined. Strong attempts to compensate for the abuse children had experienced through the DFV and the repair of relationships following separation were also in evidence. Many of the women reported high levels of stress and anxiety requiring ongoing therapeutic support. Consistent with the findings from the AIFS Family Pathways analysis, financial abuse, and the consequent financial hardship, was a substantial and ongoing source of difficulty and distress for the women.

In relation to men who perpetrated DFV, the women's descriptions indicated that a number of negative fathering behaviours were evident before and after separation, in addition to behaviour that was directly abusive to children. This included inattentive and inconsistent fathering, manipulative behaviours that had the effect of undermining relationships between mothers and children (often through the use of material resources), the exertion of controlling tactics in relation to mothers and children, and the manifestation of behaviours and negative attitudes to women in general and the mothers in particular, including abusive and denigrating attitudes that were adopted by some of the children. Many of the women whose children maintained contact with their fathers, either by agreement or as a result of court orders, reported that their children continued to be exposed to these behaviours after separation and into adulthood. The interviews with the women indicated that, for at least two-thirds of mothers and their children, there was ongoing or escalating abuse by the child's father. They tended to be worse off emotionally, physically, and financially following separation due to the abuse and the restrictions on their abilities to protect children who were having unsupervised contact with abusive fathers under shared-care or high care-time arrangements.

The mothers' accounts highlighted a number of adverse consequences for children. These included high levels of traumatic stress, anxiety, and behavioural problems that remained active after separation and were heightened by parenting arrangements involving time spent with fathers and limitations on access to therapeutic intervention for mothers and children. These accounts indicated that many children who spent time with their fathers after separation continued to manifest stress and anxiety as a result of previous or continued exposure to the fathers' abusive behaviour. Some women indicated these difficulties were sustained into adulthood and several reported that their own relationships with the children were fractured during childhood or as the children became adults, which they attributed to the abuse.

These qualitative data highlight the challenges for mothering that arise in multiple ways in the context of DFV, augmenting the insights available from the LSAC and AIFS Family Pathways quantitative data. The challenges include:

- the physical and emotional consequences of DFV on mothers' ability to function, including high levels of stress and anxiety;
- the ongoing physical and emotional consequences for children as a result of being abused or exposed to DFV, including high levels of stress and anxiety, and impaired social, emotional, and educational functioning;
- the challenges for mothers of simultaneously dealing with the consequences of DFV for themselves and their children: mothers may be experiencing stress, anxiety, and other difficulties, but children's needs are heightened and their behaviour may be particularly demanding;
- the implications for mothers and children of children's exposure to negative parenting behaviours and, in many cases, ongoing abuse from fathers;
- the problems that occur when children begin to mirror the abusive behaviour and attitudes of their fathers;
- the implications for mothers and children of continued exposure to DFV and abusive behaviour after separation during processes for making parenting arrangements and in the subsequent parenting arrangements;
- the need to access specialised therapeutic support for themselves and their children in the context of limitations on the availability of support of this nature and barriers to accessing it;
- the material and psychological difficulties of dealing with the combined financial consequences of DFV and separation, including in situations where financial abuse is occurring and fathers' greater access to material resources is being used as a means of undermining the child's relationship with the mother; and
- the limitations on women's abilities to challenge an ongoing parenting role for an abusive father given the priority placed on maintaining "meaningful relationships" between fathers and children after separation in the family law system, including through shared care and high levels of unsupervised care time. Furthermore, the women and some of the professionals they had contact with were concerned about potentially being seen as an "alienating" parent when mothers were seeking protective arrangements.

The data from the interviews indicate significant limitations in the extent to which approaches in the DFV sector, in child protection agencies, and in the family law sector are configured to address parenting capacity and the needs of parents and children against a background of family violence. Across these areas, the extent to which these issues are a focus is

inconsistent. Restoration of parenting capacity was found to be a focus via therapeutic support in some refuges that women had experienced, but a broader understanding of the extent to which such programs were available to women and children in intact families and in the aftermath of separation would be desirable. Furthermore, it is clear that therapeutic approaches that address women's and children's needs in this context are valuable, but, at the same time, there are limitations in the extent to which they are accessible or can withstand ongoing DFV. Restoration of parenting capacity did not appear to be a focus of child protection agencies in their contact with women. Experiences in the family law system suggested a lack of family violence expertise, together with disjointed service delivery and an emphasis on shared parenting after separation, which meant that ongoing relationships with fathers were sometimes emphasised at the expense of protection from harm, exposure to family violence, and child abuse. A significant proportion of women also faced circumstances in which various services and agencies, including child protection and family law, were being used by their ex-partners to perpetuate systems abuse and financial abuse. For 29 out of 47 women who were separated from their partner, perpetrators' tactics of systems abuse included one or more of the following: exploiting the intersections between family law, child protection, and criminal legal systems to their advantage; raising counter-allegations and unjustifiable applications in family law or personal protection orders; manipulative engagement with family law services; non-compliance with court orders; exhausting women's legal and financial resources; and using civil law processes to cross-examine women when fathers acted as self-represented litigants.

Policy and practice directions

The findings of this research have significant implications for policy and practice at a range of levels. From a prevention perspective, the high prevalence of IPC and DFV, the persistence of these issues in the population after separation, and the negative implications for parent and child wellbeing all reinforce the importance of prevention and early intervention. These approaches would aim to reduce the occurrence of IPC and DFV, with a focus on the high-risk pre-natal and post-partum periods and children's exposure early in childhood. The evidence of increased and sustained IPC and DFV after separation also point to a need for intervention measures that will reduce the occurrence of, and children's exposure to, IPC and DFV commencing early in the family separation process. This is necessary to reduce the burden of the combined impact of IPC and DFV and separation on wellbeing outcomes in the short and long term.

In combination, the findings from all parts of the project indicate that environments involving IPC or DFV create significant risks for children at multiple levels. First, an elevated risk of direct child abuse occurs in such environments. Second, children and young people are exposed to several further factors that individually or in combination may compromise social, emotional, and educational outcomes in these environments. These include heightened distress and compromised parenting from a parent who has experienced DFV and needs support, and from a parent who has perpetrated DFV and has compromised, neglectful, manipulative, or abusive parenting behaviours.

In addition to reinforcing the need for population-level prevention approaches, the findings underscore the necessity of recognising the negative implications of IPC and DFV for parenting capacity and child wellbeing outcomes and for this to be central to the development of policy and program approaches involving service delivery to parents and children. Three issues need to be centralised in this context:

- 1) recognition of the impact of IPC and DFV on parenting capacity, in particular that mothers may be experiencing compromised parenting capacity and that fathers may need access to support to develop healthy parenting behaviours;
- 2) the need to support recovery in parenting capacity of mothers and fathers where IPC and DFV has occurred or is occurring; and
- 3) recognition that children may have been directly or indirectly affected by IPC or DFV, including awareness

that measures to address resultant emotional, social, and educational challenges may be needed, as well as support for restoration in parent-child relationships.

The literature considered in the state of knowledge report (Hooker et al., 2016) indicated that there were a range of promising interventions overseas and in Australia that are oriented towards supporting the mother-child relationship in general population programs, and some that are specialised in the context of DFV. That literature also emphasises that a strong mother-child relationship may ameliorate some of the negative effects of exposure to DFV. The approaches underlying these interventions are varied and include psycho-therapeutic treatment models based on trauma and attachment theory as well as different models of group work and mother-child therapy. Overall, the literature indicates that further development, continuity of service provision, and evaluation of the effectiveness of such approaches in this area are required. The experiences of the women interviewed for the qualitative component of this research program indicated that they placed significant value on therapeutic support for their mother-child relationships, but that, in some cases, they had difficulty accessing sufficiently expert and sustained assistance. This shows that a more systematic assessment of the extent to which services based on these approaches are available to mothers affected by DFV in Australia would be of value in assessing service provision needs and gaps.

There is continuing urgency for the development of holistic responses to family violence that include a greater focus on approaches that support restoration in parenting capacity and the repair of parent-child relationships. In the child protection arena, this would mean a wider focus on the implications of family violence than on whether the couple's relationship has ended. That would necessitate the application of approaches oriented towards supporting recovery in mother-child relationships. In the family law system, the focus on shared parenting would need to give way to a more individualised and nuanced assessment of the child's needs that is informed by substantial expertise in DFV, including any need for therapeutic assistance, and the capacity of each parent to meet the child's needs where there is a past or ongoing history of DFV. The Family Law Council (FLC, 2016) has recently made a number of recommendations that are relevant to the findings in this research program. These include recommendations relating to enhanced training in DFV for professionals across the family law system and in

relation to research in two areas: dynamics in cases where agreement over parenting arrangements is reached where DFV has occurred and in the area of systems abuse.

Systems abuse raises significant policy and practice concerns, highlighted by the findings of this study. These findings add to the established body of evidence (see the discussion in Kaspiew et al., 2015, at section 7.3.3) that indicates perpetrators of violence can use various legal and administrative systems to perpetuate the dynamics of abuse and control even when separation has occurred. It is clear that the fragmented system of service delivery to women and children affected by violence is open to exploitation and that other aspects of the system, including private law, mediation, family dispute resolution, and adversarial processes for making parenting arrangements, are similarly open to abuse by perpetrators of family violence. In this context, a significant finding from the AIFS Family Pathways part of this research program is the association, for women, between financial hardship, poor wellbeing outcomes, and family violence, at a significant level. Together, the findings provide further evidence of an association between particularly severe patterns of family violence, financial abuse, and systems abuse. This suggests a more comprehensive assessment and analysis of systems abuse as a form of family violence is needed and greater empirical understanding of what can be done to intervene and prevent it. If the findings suggested by this research are sustained on the basis of a larger research program based on quantitative samples, then it is clear that a more robust approach to the prevention of systems abuse is required.

Specific implications for practitioners engaging with mothers, fathers, and children against a background of DFV

- Women who engage with services against a background of DFV have a number of complex material and psychosocial needs.
- If women are not already engaged with a specialist DFV service, then such a referral is usually necessary.
- It is likely that women and their children are experiencing ongoing abuse unless contact with the perpetrator has ceased and other safety measures to prevent abuse are available (e.g. being legally permitted to live at an undisclosed address to prevent stalking).
- Women may need assistance and referral in relation to financial and housing needs, including being informed about the availability of Financial Wellbeing and Capability services and Financial Counselling.
- Women and their children may be experiencing physical and emotional consequences from DFV and abuse and may need long-term therapeutic assistance.
- Mothers may need referrals to programs and services that will support the restoration of parenting capacity from a perspective of understanding the dynamics of DFV, including programs that offer services to mothers and children together. Children may also need assistance separately.
- Where relationships between fathers and children are being maintained, fathers may need referral to services in relation to parenting. Where this is occurring, the wellbeing and safety of children need to be monitored.
- Service providers should be alert to the fact that their services and other types of services and agencies may be used in a pattern of systems abuse. Staff, including legal professionals, should be trained to recognise this and provide appropriate advice and referrals where this is occurring.

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