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Coercive control victimisation

A comprehensive review of related abusive behaviours, risk factors and impacts

Child and Adolescent Mental Health Conference, Gold Coast, March 2025
Panel Presentation

Acknowledgement of Country



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The Australian Institute of Family Studies acknowledges the Traditional Owners of Country throughout Australia and recognises their continuing connection to lands and waters. We pay our respects to Aboriginal and Torres Strait Islander cultures, and to Elders past and present.



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Background



Panellists



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Dr Jasmine B. MacDonald
(AIFS)

Frequency, risk factors and
impacts of coercive control
victimisation



Dr Melissa Willoughby
(AIFS)

Technology-facilitated
coercive control



Kylie Butler
(AIFS)

Violence against family
animals in the context of
intimate partner violence



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Coercive control victimisation: A rapid review of frequency, risk factors and impact



Focus of this talk



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WHAT

Findings from a rapid review of:

- 13 Australian and international peer-reviewed quantitative studies
 - Australia, Canada, New Zealand, Republic of Ireland, England, Scotland, Wales and Northern Ireland.
- Published 2012–2022.

WHO

Evidence-based insights for:

1. Practitioners supporting victim-survivors
2. Researchers
3. Policy makers

What is coercive control?



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- Overarching context that **intimate partner violence (IPV)** occurs within.
- A kind of **male power** where physical and non-physical violence is used to subordinate and control the **female victim-survivor**.
- Involves ongoing, repetitive and cumulative strategies and behaviours that impact the victim-survivor's autonomy, liberty and equality.

(Australia's National Research Organisation for Women's Safety, 2021)

Overview



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- 1 How common is coercive control victimisation?
- 2 Risk factors associated with coercive control victimisation
- 3 Impacts of coercive control victimisation
- 4 Gaps in our knowledge





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How common is coercive control victimisation?



Frequency: Key messages



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1. It is not possible to assess from the available literature what the true prevalence of coercive control is in Australia.
2. Estimates in general population samples: 7.5%–28%.
3. Estimates in ‘clinical’ samples: 4.4%–100%.



Frequency: Potential implications



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Practice

- Victim-survivors may access frontline services that are not IPV focused to get support for a range of wellbeing purposes.
- They may not necessarily disclose their experiences of coercive control.
- Practitioners in frontline services should consider:
 - how they can adapt their practice to provide a safe space for disclosure
 - how they might personally respond to disclosures
 - which specialist services they can refer victim-survivors to.

Frequency: Potential implications



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Research

- The use of representative national samples could assist in establishing population-level frequency estimates.
 - This would involve matching the research sample to the broader population on various demographic factors (e.g. state of residence, age and gender).
- There is a need to build on existing research findings and to use validated measurement tools.



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Risk factors associated with coercive control victimisation



Risk factors: Key messages



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- The evidence about risk factors for coercive control victimisation is inconclusive.
- A broad number of risk factors have been identified but they vary between studies.
- Where risk factors have been assessed across more than one study, the findings are inconsistent.



Possible risk factors for further exploration



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Victim-survivor

- **Gender**
- Education
- Employment status
- Income
- Social class
- Psychopathy
- Childhood maltreatment
- Age at time of first childbirth
- Number of children
- Means of meeting partners

Perpetrator

- Substance use
- Mental health

Societal

- Perceived gender equality

Risk factors: Potential implications



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Practice

- The research cannot currently provide a good understanding of which characteristics or experiences indicate or cause elevated risk for experiencing coercive control victimisation.
- This means that practitioners need to keep an open mind when working with clients because anyone could be experiencing coercive control victimisation.

Risk factors: Research recommendations



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- Research has tentatively identified a wide range of potential individual-level risk factors.
- Focus on the development, validation and consistent application of measures to explore risk factors. This would allow for comparisons across studies and build knowledge over time and across population groups.
- Adopt a longitudinal design to provide information over time about the possible causal links between various risk factors.

Risk factors: Policy recommendations



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- It is not clear how resources may be best directed to support individuals at elevated risk of experiencing coercive control victimisation.
- While more conclusive insights are being formed, it may be beneficial to
 - focus on awareness raising within the Australia community
 - provide training for generalist practitioners to identify warning signs of clients potentially experiencing coercive control victimisation
 - strengthen referral pathways from generalist support services to specialist IPV services.



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Impacts associated with coercive control victimisation



Impacts: Key messages



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- None of the sampled studies examined the impacts of coercive control victimisation in Australia.
- Mental health outcomes are the most frequently researched impact factors among women, but the quality of the evidence varies.
 - coercive control victimisation decreased women's mental health and wellbeing.
- Other studied impacts included:



Decreased:

- Decision-making abilities
- Family health and wellbeing.



Increased:

- Physical injury levels
- Emotional injury levels
- Time taken off paid work.

Impacts: Potential implications



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Practice

- Women who are experiencing coercive control victimisation are likely to be experiencing mental health symptoms.
 - Practitioners working with victim-survivors need to be prepared to discuss mental health and provide referrals to mental health services if required.
 - Mental health workers are important frontline workers who may be able to identify and support victim-survivors who access support for their psychological distress (not for the abuse they have experienced).
- The impact of coercive control victimisation likely differs between people, with each victim-survivor requiring support specific to their needs.

Impacts: Potential implications



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Future research directions

- How the impacts of coercive control victimisation change over time.
- Who the most appropriate comparison or control groups might be for studies of the impact of coercive control.
- How to assess the impacts of coercive control victimisation for families and the broader community, not just the individual.

Impacts: Potential implications



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Policy

There is a need for:

- integration between mental health assessment and treatment services and DFV and IPV systems and services
- increased funding opportunities for high-quality quantitative research on coercive control victimisation in Australia.



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Gaps in our knowledge



Gaps in our knowledge



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Research design differences between studies make it challenging to:

- distinguish between IPV characterised by a coercive control pattern and that which is not
- identify coercive control in practice
- inform prevention and intervention
- know which risk factors and impacts are most robust and deserving of further investigation.

Gaps in our knowledge



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We currently know little about the unique experiences of:

- Aboriginal and/or Torres Strait Islander peoples
- people with disability
- LGBTQIA+ communities
- culturally and linguistically diverse (CALD) communities
- people in older age groups (65+ years)
- children and young people where there is coercive control between their parents
- intersectional experiences across more than one of the above.



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Technology-facilitated coercive control (TFCC): Evidence-based insights for practice

Focus of this talk



WHAT

- Findings from a rapid review of international literature.
- Evidence-based insights for practitioners supporting victim-survivors.

WHO

Non-specialist practitioners:

1. Working in areas that increase the likelihood of exposure to women and children experiencing coercive control.
2. Do not have specialist training or experience in family and domestic violence.

What is Technology-facilitated coercive control (TFCC)?



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- Use of digital technologies to coercively control current or former intimate partners

TFCC: Technology is a means to extend the perpetrators ability to monitor and maintain surveillance, harass, threaten and shame victim-survivors, manipulate their social relationships, and to ensure compliance with demands.

Overview

- 1 Strategies used
- 2 Interactions between face-to-face and technology-facilitated strategies
- 3 Client groups who may be at an elevated risk of victimisation
- 4 Outcomes associated with victimisation
- 5 Insights for practitioners supporting victim-survivors

Detail of methods

Limitations

How are technological strategies used to enact coercive control?



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- Harassment on social media
- Stalking using GPS data
- Clandestine and conspicuous audio and visual recording
- Threats via SMS
- Monitoring email
- Accessing accounts without permission
- Impersonating a partner
- Publishing private information (doxxing)
- Creating and/or sharing sexualised content without consent
- Controlling access to technology
- Using social media to interfere with relationships
- Using children to access victim-survivor's passwords, transport tracking and surveillance devices, identify location during video calls

(Dardis & Richards, 2022; Douglas et al., 2019; Dragiewicz et al., 2022; 2018; Henry et al., 2022)






How do face-to-face and technological strategies interact?



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Victim-survivors experiencing TFCC are likely to experience other kinds of abuse from the same perpetrator, including:

-  psychological abuse
-  physical abuse
-  sexual abuse
-  financial abuse
-  unwanted in-person pursuit behaviours.

(Dardis & Richards, 2022; Harris & Woodlock, 2022; Timmons Fritz et al., 2018)

Which client groups may be at elevated risk of victimisation?



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Migrant women

- Newly arrived migrant women are at a heightened risk due to their financial and other kinds of dependency on their partners.
- Perpetrators may force compliance by using threats of cutting access from technology that connects the victim-survivor with friends and family abroad.

(Douglas et al., 2019)

Which client groups may be at elevated risk of victimisation?



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Women in regional, rural and remote areas

- The use of technology to perpetuate harm, isolation and control is heightened for women in regional, rural and remote areas.
- Distance, limited resources and infrastructure, socioeconomic disadvantage, reduced security and privacy in small communities impact help-seeking and opportunities to exit violent relationships.

(Woodlock et al., 2020; Harris & Woodlock, 2019; Harris, 2018)

Which client groups may be at elevated risk of victimisation?



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Women with disabilities

- Women with disabilities may be more reliant on technology to communicate with others or contact support services and so may be more vulnerable to abuse facilitated by technology.

(Woodlock et al., 2020)

What outcomes are associated with TFCC victimisation?



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Decreased:

- Ability to engage in work, education and social life
(Douglas et al., 2019; Harris & Woodlock, 2022; Yardley, 2021)
- Ability to seek help from police, health providers, family and friends
(Douglas et al., 2019; Woodlock et al., 2020)
- Reduced confidence and self-esteem (Harris & Woodlock, 2022)

What outcomes are associated with TFCC victimisation?



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Increased:

- Sense of loss from relationship ending with the perpetrator, loss of connection with who they were before the abuse, reduced trust in technology, and loss of safety and freedom (Woodlock et al., 2022)
- Isolation from family and friends (Douglas et al., 2019; Dragiewicz et al., 2022; Harris & Woodlock, 2019; Woodlock et al., 2020)
- Stress, fear, hypervigilance, withdrawal, anxiety and depressive symptoms, and aggression (Douglas et al., 2019; Fiolet et al., 2021; Harris & Woodlock, 2022; Timmons Fritz et al., 2018; Woodlock et al., 2020)

What outcomes are associated with TFCC victimisation?



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Increased:

- Dependency on the perpetrator (Douglas et al., 2019)
- Self-harm behaviours (Harris & Woodlock, 2022)
- Relationship strain with children who are being used by the perpetrator to enact TFCC (Dragiewicz et al., 2022)

Insights for practitioners supporting clients (1/3)



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- Be mindful of the client's confidentiality and privacy.
- Discuss support options and action plans with the client; the client is the expert in what is going to keep them safe.
- Encouraging clients to completely disengage from digital communication is unlikely to improve their safety.
 - support the client to work through the eSafety Commissioner's online safety checklist for anyone in a domestic violence situation.
 - consider your own level of digital literacy and that of the client.
 - the perpetrator is accountable for their own behaviours, not the victim-survivor.

Insights for practitioners supporting clients (2/3)



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- Be mindful of any online processes or services your organisation might require clients to engage in and if this creates additional risk.
 - Have organisation-level discussions about policies and processes that might be problematic.
- Continue learning about the ways technology can be used to facilitate coercive control.
- When engaging clients, be mindful that perpetrators of coercive control often try to make victim-survivors feel a sense of shame and/or guilt. Consider how you can engage the client in a way that does not inadvertently reinforce their personal sense of shame and/or guilt.

Insights for practitioners supporting clients (3/3)



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- Share learnings and practice experiences with other practitioners to increase awareness of what TFCC is and that it is associated with other forms of violence.
- Refer clients to specialist services. For instance, you might provide information about the National Domestic and Family Violence Counselling Service.
 - Consider if you can provide a safe space for the client to contact specialist services.
 - Familiarise yourself with relevant websites and explain how to use the quick exit option that is generally provided on such websites.



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Violence against family animals in the context of intimate partner violence



Kylie Butler & Dr. Jasmine B. MacDonald

Child and Adolescent Mental Health Conference, 26 March 2025

Overview



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- Nature of the evidence
- What the research says about...
 - Definitions
 - People-pet relationships
 - Impacts (on women, children, animals)
 - Barriers/challenges to accessing support
 - Ways to strengthen support



Policy and practice paper on pets and IPV (2024)



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- **Aim:** raise awareness and understanding
- **What:** summaries of research evidence, practical considerations for supporting victim-survivors, link to further resources
- **Who:** frontline practitioners supporting children and families



What the research evidence looked like



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Research evidence:

- Papers 2014 – 2023
- Locations: Aust, Canada, NZ, UK, USA
- Qualitative research
 - Women who had accessed support services
 - DFSV support workers

Limitations:

- Little/no information about victim-survivors who have not accessed support services
- Focus on: heterosexual relationships; urban areas; common family pets

Violence against family animals as a form of coercive control – what does this mean?



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When perpetrators threaten, harm or kill family animals:

- To manipulate or force their partner/ex-partner to follow their demands
- As a demonstration of what might happen to their partner/ex-partner if they don't do what the perpetrator wants them to do
- To cause emotional distress and fear



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Examples from the literature



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“Just last week he [partner] was upset because I went to the store without him. He said he was going to burn the bird’s wings because I had disobeyed him”

(Collins, 2018)

“[The] dog has been hurt when he is thrown down the stairs. My dad doesn’t hurt him as much as he threatens to”

(McDonald et al. 2020)

“The abusers use the love a victim has for their pets as a weapon against them... ‘Do this, or I will do that to your pet’”

(Giesbrecht et al., 2022)

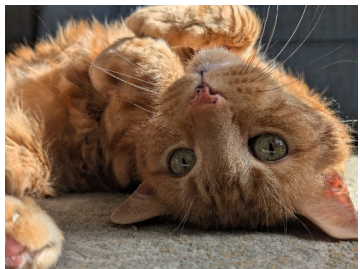
“The first time I left my partner, he was the one caring for my dog. If I didn’t tell him where I was, he threatened to snap her neck or shoot her”

(Collins, 2018)

Why do perpetrators target family animals?



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- Many people consider pets to be valued family members
- People form close, emotional connections with family animals
 - Companionship
 - Reciprocal support
- Perpetrators exploit the emotional connections people have with their family animals
- In multi-animal households, perpetrators commonly target the animal(s) for which the victim-survivor has the most affection

Prevalence rates



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A systematic review of Australian and international research on animal abuse in the context of IPV found prevalence ranged between 12% and 89% (Cleary et al., 2021)



Emerging evidence that violence against family animals is a red flag for frequent and severe IPV patterns

Impacts of adult women victim-survivors



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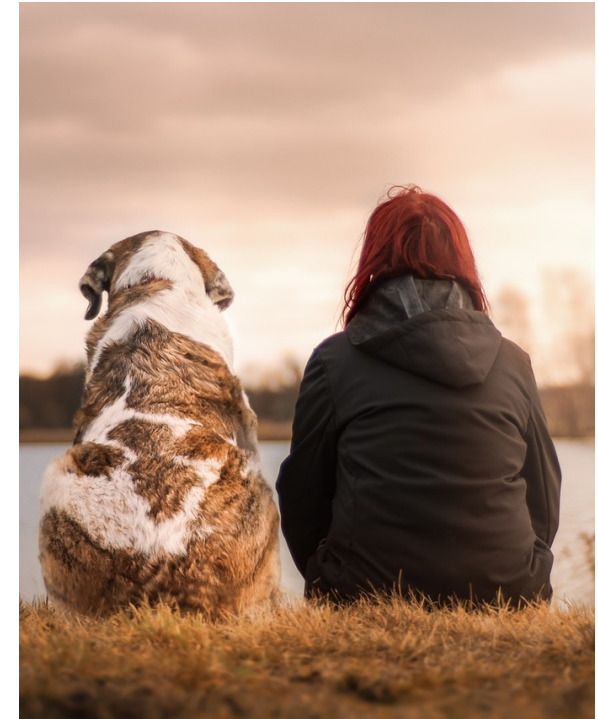


Physical

- ↑ risk of physical violence when trying to protect family animals

Psychological

- Anger, anxiety, fear, grief, sadness, stress
- Conflict/confusion, guilt, shame
- Loneliness, isolation



Many women delay leaving, stay with, or return to perpetrators because of valid concerns for the safety of family animals.

Impacts on children



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Children also form strong, emotional connections with family animals and feel comforted spending time together.

Physical:

- ↑ risk of violence being redirected while trying to protect family animals

Psychological:

- Anxiety, fear, guilt, distress
- Having to play role of protector
- Impacts on relationship with parents

Impacts on family animals



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Behavioural impacts and health needs caused by experiences of violence can make it more difficult to find safe accommodation for animals.



Barriers to accessing support



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- Victim-survivors may not disclose violence against family animals
 - Shame/embarrassment
 - Fear of not being taken seriously
- Lack of animal-inclusive support
 - Animal care
 - Accommodation

Strengthening support: Screening



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- Include questions about family animals during intake/assessment
- Provide opportunities for people to talk about violence towards family animals
- Treat disclosures of violence against family animals as seriously and sensitively as other reports of violence



Example questions to ask during screening



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- Has your partner/ex-partner ever harmed/threatened your pet?
- Has they ever used your pet to intimidate or control you?
- Have they ever prevented you from taking your pet to the vet or care for your pet?
- Do you feel unable to leave the relationship because of your pet?
- Are you able to take your pet with you if you leave? Is there somewhere else your pet can stay?



Questions provided by Rishika Pai



Strengthening support: Animal-inclusive safety planning



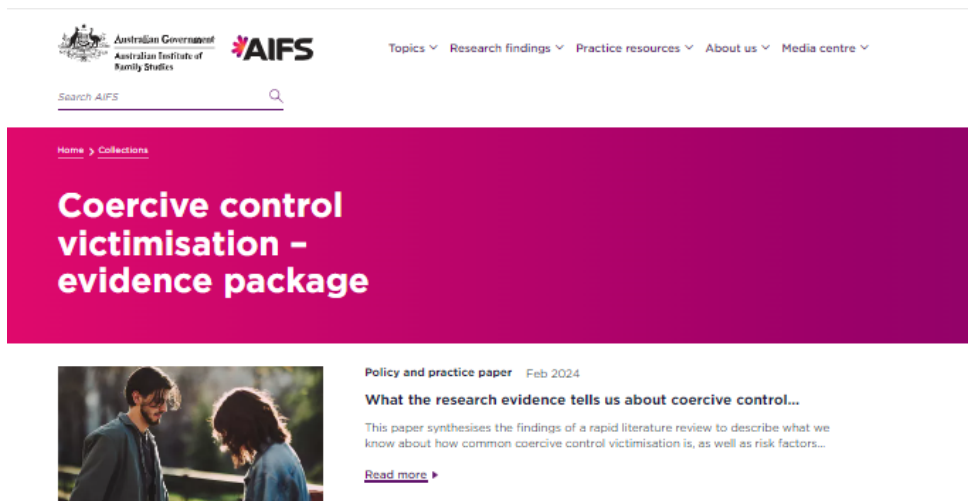
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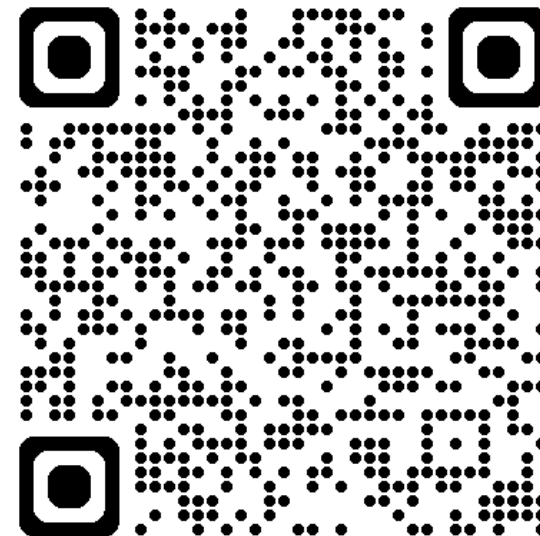
- Create a check-list of essential items for the animal(s)
- Record details of violence/threats of violence towards family animals
- Discuss accommodation options and information/referrals for pet-friendly support services
- Provide support information.



Where to find our resources



The screenshot shows the AIFS website interface. At the top, there is a navigation menu with links for 'Topics', 'Research findings', 'Practice resources', 'About us', and 'Media centre'. Below the menu is a search bar with the text 'Search AIFS' and a magnifying glass icon. The main content area features a large purple banner with the text 'Coercive control victimisation - evidence package'. Below the banner, there is a small image of a man and a woman talking. To the right of the image, there is a section titled 'Policy and practice paper Feb 2024' with the sub-heading 'What the research evidence tells us about coercive control...'. The text below this sub-heading reads: 'This paper synthesises the findings of a rapid literature review to describe what we know about how common coercive control victimisation is, as well as risk factors...'. A 'Read more' link with a right-pointing arrow is located at the bottom of this section.



Questions and discussion



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