

Submission to the Royal Commission into Domestic, Family and Sexual Violence (DFSV)

Background

Open Door Initiative, a key initiative within Flinders University's Institute for Mental Health and Wellbeing, is committed to enhancing the mental health, wellbeing and resilience of veterans and military families as they face the challenges of service and post-service life. By focusing on the unique experiences of veteran and military families, Open Door undertakes multidisciplinary research that integrates lived experience with innovative, evidence-based solutions. Its goal is to inform policy reform, improve support systems, and promote long-term wellbeing.

Open Door Initiative welcomes the commencement of the Royal Commission into Domestic, Family, and Sexual Violence (DFSV) in South Australia and is grateful for the opportunity to comment on the issues under consideration. As an initiative dedicated to advancing the health and wellbeing of military families, we recognise the critical need to address the unique and often hidden impacts of domestic and family violence (DFV) within this community. We currently have a PhD student undertaking research in the area of military family violence and we look forward to sharing the knowledge gained from this project. We are committed to contributing our research and insights to support the Commission's work in shaping policy reforms, improving support services, and enhancing the safety and wellbeing of those affected by DFSV.

Introduction

Violence against women "remains devastatingly pervasive" and "is endemic in every country and culture, causing harm to millions of women and their families" (WHO, 2021, para. 1;3). In Australia, violence against women and children has been identified as a "problem of epidemic proportions" (Department of Social Services, 2022 p. 14).

Military families (defined here as families in which at least one member is currently serving or has previously served in a nation's defence force, including as a permanent/full time member or reservist) appear to be at an even greater risk of experiencing domestic and family violence, with international evidence demonstrating that DFV is both more prevalent (Cowlshaw et al., 2022; Jones, 2012; Klostermann et al., 2011; Kwan et al., 2020) and severe (Rentz et al., 2006) in military families when compared to civilian families. Evidence suggests that perpetration of DFV among military populations may be between one to three times higher than civilian populations. Kwan et al. (2020) found past-year perpetration of physical DFV among military populations ranged from 5% to 32%, compared with 4% to 15% in the

general US population, similarly Marshall et al. (2005) found perpetration rates within the military and veteran population ranged from 13.5% to 58%. International literature also establishes women civilian partners of service personnel as the most likely victims of DFV in military communities (Jones, 2012; Siebler & Karpetsis, 2019; Stamm, 2009; Williamson, 2012).

DFV within Australia's military families remains largely unexplored. Relevant findings from the limited research in this area includes Australian-first evidence regarding the likely extent of intimate partner violence (IPV) experienced by military partners. Cowlshaw et al. (2023) in their analysis of quantitative, cross sectional survey data found that almost one in two (45.5%) partners of former serving Australian Defence Force (ADF) members, and almost one in four (24.1%) partners of current serving ADF members reported IPV exposure in their current relationship. In addition, the final report of the Royal Commission into Defence and Veteran Suicide states:

“we have received numerous submissions from persons who have been the victims of FDV. In a majority of instances, the alleged perpetrator was the male serving member against their female civilian spouse/partner. That is not universal, and it is critical to recognise that FDV occurs in all types of relationships, irrespective of age, ethnicity, sexuality and gender. However, in line with national trends, the information we received paints a clear picture of the gendered nature of the perpetrator/victim dynamic” (Royal Commission into Defence and Veteran Suicide: Final Report, 2024 vol. 6 pg. 45).

This evidence paints a concerning picture regarding the increased risks faced by women and children in Australian military families, establishing military family violence as an issue which needs to be thoroughly examined, understood and responded to as a matter of urgency (Cowlshaw et al., 2023).

The military community in South Australia

Data collected in the 2021 Census estimates that there are 47,852 people in South Australia who have served in the Australian Defence Force (ADF)- this includes nearly 6000 people who are currently serving, either in permanent/full time or part time/reservist roles (see- https://veteranssa.sa.gov.au/wpcontent/uploads/2024/02/VSA_CensusDashboard_2023_ART_WEB.pdf). The ADF maintains a significant presence in South Australia, with thousands of personnel currently serving across the Army, Navy, and Air Force. Key military bases, such as RAAF Base Edinburgh and Keswick Barracks, support a range of defence operations in the state. In addition to those who have worn the ADF uniform, the veteran community also includes their partners, children, parents, siblings, friends and carers.

As a result of the anticipated growth in the defence industry in South Australia over the coming years, it is likely that the military community will continue to increase in size- as many former serving personnel are attracted to the state by job opportunities within key defence initiatives. Given what we know regarding the increased risk of DFV in military families, this is a significant and important cohort for the government and DFV service sector to monitor and understand. This submission draws attention to some of the issues experienced by DFV victim-survivors in this community.

Impact of military service on families

Military service has significant and far-reaching impacts, not only on military personnel, but also on their partners, children, extended families and communities (Sheppard et al., 2010). Partners of military members – most commonly non-serving women, often with dependent children – experience unique challenges related to their connection to the military institution (Department of Defence, 2020; Smart et al., 2018). Many of these challenges are associated with the traditional patriarchal structures on which militaries heavily rely, where “the conforming wife is tasked with holding the family together thus enabling the husband to be free to pursue his career” (Ziff & Garland-Jackson, 2020 p. 378) and the military ‘lifestyle’ (Harrison, 2000; Harrison & Laliberte, 2000; 2008). The military ‘lifestyle’ is characterised by frequent geographical relocations due to posting cycles, extended absences/separations and reunions, isolation from family and extended support networks, and the subordination of individual/family needs to operational requirements (Hall, 2011; Savitsky, 2009; Harrison & Laliberte, 2000).

One of the most significant challenges faced by military families is frequent geographical relocations due to military posting cycles (Smart et al., 2018). Many of the negative impacts of frequent relocations on military families were captured in the literature more than 40 years ago and remain largely unchanged today (Hall, 2011; Hamilton, 1986). In the Australian context, Sue Hamilton’s seminal 1986 report, ‘Supporting Service Families: A report on the main problems facing spouses of Australian Defence Force personnel and some recommended solutions’, identified many of the issues families experienced as a result of frequent military relocations, including lack of family support, isolation, poor spousal employment outcomes, educational impacts for children and lack of health care continuity. More recent research has found that 41% of ADF families have had 5 or more service-related relocations, with numerous negative impacts, “including disruptions to civilian partners’ employment/careers and to children’s schooling; the loss of social networks for parents and children; and separation from close family members” (Smart et al., 2018 pg. 8).

The unique nature of military DFV

The experience of DFV in military families is unique and complex. It can impact victim-survivors in a number of ways, not always experienced in the civilian context. Many of these impacts are associated with the unique nature of military service, its impacts on families (as discussed above) and the exposure of members to several risk factors known to be correlated with, contribute to, or exacerbate DFV perpetration- exposure to trauma, cultures of alcohol use/misuse and the use of alcohol for self-medication when trauma is not adequately addressed (Alves-Costa et al., 2021).

Many of the complexities surrounding military DFV for victim-survivors have been briefly summarised in the ‘FDSV agencies supporting military families’ fact sheet (see- https://officeforwomen.sa.gov.au/data/assets/pdf_file/0019/136513/Fact-Sheet_military-FDSV-support-for-agency.pdf) and include concerns regarding:

- **Confidentiality/disclosure**- military families may be reluctant to identify their military connection due to concerns regarding confidentiality (within a small and potentially ‘tightknit’ community) and the stigma associated with disclosing

experiences of violence, particularly in the context of military members being seen as 'heroes' within society.

- **Mobility, employment and isolation**- military families are highly mobile experiencing relocations (which are often interstate, or sometimes overseas) approximately every 2–3 years. This can result in military partners experiencing increased social isolation (as a result of a highly transient lifestyle and living away from natural support networks) and increased financial dependency (with higher rates of unemployment and underemployment compared to their civilian counterparts) (McCue, 2017). Whilst many military partners may experience these impacts, they may have more significant implications for partners experiencing DFV. As in an environment of reduced social and economic capital, partners be further restricted in their capacity to take action to ensure safety (Harrison, 2000; Pollard, 2023).
- **Housing**- current serving military families often reside in housing that is either paid for or subsidised by the ADF. The housing entitlement is a condition of the military member's employment and therefore civilian partners/families hold no entitlement to ADF supported housing outside of their relationship with the military member. This is highly problematic in instances in which access to the family home is linked to the employment of, and sustained relationship with the person who is perpetrating FDSV. Access to housing may be utilised as a means of coercive control within relationships and/or may be a barrier to victim-survivors leaving/ending violent relationships.
- **Military training**- those with military training often possess a unique set of knowledge and skills. These may include specialist IT/cyber expertise, threat neutralisation, combat training and weapons handling. Specialist military skills/training held by someone perpetrating DFV may be used as a means of threatening and/or controlling a victim-survivor and may be a barrier to victim-survivors disclosing, seeking help and leaving/ending violent relationships.
- **Service provision**- military families experiencing DFV face difficult decisions about where to access the assistance they need. They are often forced to choose between accessing specialist DFV services, who may have limited understanding of the unique nature of military DFV, or accessing Defence/Veteran support services, who may have limited DFV expertise. This creates barriers to military families being able to access services who understand the unique and complex nature of military DFV and who can integrate this into their specialist DFV engagement, assessment and intervention. Military families may also be hesitant to engage with services associated with the Department of Defence and/or the Department of Veterans' Affairs (for a number of reasons related to privacy, confidentiality and trust). Some may prefer to access mainstream/community services, and it is therefore important that these services provide military culturally competent and informed support.

Recommendations

Based on the information provided within this submission, the following recommendations are made:

- Increase the military cultural competence of mainstream/community DFV services to better understand the unique experiences/risk profiles of military perpetrated DFV for victim-survivors and inform culturally appropriate responses.
- Build/strengthen/formalise effective partnerships between mainstream DFV and Defence/Veteran specific support services (e.g. Open Arms/Defence Member and Family Support (DMFS)) so that they can bridge the military-civilian service provision divide, share specialist DFV/military specific advice with each other- to guide risk assessment/safety planning/service provision, and ensure victim-survivors receive accurate advice and appropriate support.
- Invest in future research to build the evidence base regarding military DFV in Australia's military communities and to effectively inform local responses. Future multidisciplinary studies underpinned and informed by diverse theoretical and methodological perspectives would make a valuable contribution to building a nuanced and wholistic understanding of the issue. Exploratory victim-survivor focused studies are also necessary to ensure the voices and experiences of those most impacted by military DFV are visible and represented within the research.

Conclusion

The issue of DFV in military families is a significant, but largely unexplored issue in the Australian context. Military families are a sizeable cohort in South Australia and the unique nature of their experiences and needs must be understood. Despite the limited Australian evidence, there are several actions that the South Australian government can take to respond to this issue. These include building military cultural capacity within the existing mainstream/community DFV service sector, establishing partnerships between mainstream/community DFV services and Defence/Veteran specific support services and investing in further research. These actions can contribute to ensuring that military DFV victim-survivors receive accurate advice and appropriate support when they need it. Open Door Initiative remains committed to contributing our research and insights to support the government in this vital area of work. Open Door Initiative would like to thank the government for the opportunity to make this submission and would be pleased to provide additional information to further assist, should it be appropriate.

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