

Childhood Exposure to Domestic and Family Violence

The purpose of this document is to collate published research, the findings of government reports and inquiries and academic commentary in relation to childhood exposure to domestic and family violence, and the effects this may have on a person's behaviour; development; physical, mental and social well-being; and links to contact with the criminal justice system.

Introduction

- 1 Various bodies of research suggest that domestic and family violence is a major health and welfare issue in Australia and around the world. Studies indicate it occurs across all age, socioeconomic and demographic groups, but predominantly affects women and children (irrespective of gender).¹ Women experiencing multiple forms of intersecting disadvantage, such as women with disabilities, Aboriginal and Torres Strait Islander women and women experiencing financial hardship are particularly at risk.²
- 2 Over the past two decades there has been mounting empirical evidence of the effects of exposure to domestic and family violence on children's development, and a growing recognition of the ways these harms can manifest in intergenerational cycles of trauma, violence and disadvantage.³ This is reflected in the recognition of exposure to domestic and family violence as a form of child abuse in state and territory statutory child protection frameworks,⁴ the [Family Law Act 1975 \(Cth\)](#),⁵ the Australian Government's [National Framework for Protecting Australia's Children 2009–2020](#),⁶ Recommendation Nine of The National Council's [Plan for Australia to Reduce Violence against Women and Their Children](#),⁷ and Guiding Principle 5 of the

¹ Council of Australian Governments, [National Plan to End Violence against Women and Their Children](#) (2011) ('[National Plan](#)').

² See, eg, [National Plan](#)1; Australian Institute of Family Studies, [Children's Exposure to Domestic and Family Violence: Key Issues and Responses](#) (Report, 2015) 1 ('[AIFS Report](#)'); Australian Institute of Health and Welfare, [Family, Domestic and Sexual Violence in Australia 2018](#) (Report, 2018) x, 86 ('[AIHW Report](#)'); Australian Institute of Criminology, [Emerging Issues in Domestic/Family Violence Research](#) (Research in Practice Report No 10, April 2010) 6.

³ [AIFS Report](#) (n 2) 2.

⁴ See, eg, [Children and Young People Act 2008 \(ACT\)](#) s 342; [Care and Protection of Children Act 2007 \(NT\)](#) s 15(2)(c); [Children and Young Persons \(Care and Protection\) Act 1998 \(NSW\)](#) s 23(1)(d); [Family Violence Protection Act 2008 \(Vic\)](#) s 5(1)(b).

⁵ [Section 4\(1\)](#) (definition of 'abuse' para (c)).

⁶ Council of Australian Governments, [National Framework for Protecting Australia's Children 2009–2020](#) (April 2009). See also Australian Humans Rights Commission, [Children's Rights Report 2015](#) 103 [4.2].

⁷ [National Plan](#) (n 1) 27 cited in [AIFS Report](#) (n 2) 2.

New South Wales Government's [Domestic and Family Violence Framework for Reform](#).⁸

Terminology

- 3 Varying terminology is used to describe violence experienced in a domestic setting, and some debate exists over the most appropriate terms to use when identifying violence between spouses, partners and family members.⁹
- 4 This document uses the term '**domestic and family violence**', following the approach taken by various State and Commonwealth bodies,¹⁰ in order to reflect the various types of violence children are directly and indirectly exposed to within the home.

Exposure

- 5 Children and young people can be 'exposed' to domestic and family violence by experiencing violence directly or by witnessing it in the home.¹¹ As noted by the Victorian [Royal Commission into Family Violence](#):

Children can be affected by family violence directly by being the target of the violence or indirectly through exposure to family violence or its effects in the home. Both circumstances can have a profound impact on the wellbeing of children and young people.

[...]

There is increasing recognition that children exposed to family violence are not passive 'witnesses' and that they suffer lasting effects even if they are not the direct object of the violence or do not directly witness it.¹²

- 6 Witnessing violence may include seeing and overhearing violence, as well as witnessing its visible consequences.¹³ Children may also be involved in domestic and

⁸ NSW Government, [It Stops Here: Standing Together to End Domestic and Family Violence in NSW – The NSW Government's Domestic and Family Violence Framework for Reform](#) (February 2014) 6.

⁹ Law Council of Australia, [The Justice Project Final Report: People Who Experience Family Violence](#) (Report, August 2018) 7.

'**Domestic violence**' is frequently used to describe violence perpetrated by a current or previous partner. It can include physical, sexual, emotional and psychological abuse: [AIHW Report](#) 3. Although the term is gender-neutral and applies to both same-sex and opposite-sex relationships, the dominant understanding of domestic violence is that it is a gendered phenomenon, most commonly perpetrated against women by men: see [National Plan](#) 1. See also National Council to Reduce Violence against Women and their Children, [Background Paper to Time for Action: The National Council's Plan for Australia to Reduce Violence against Women and their Children 2009–2021](#) (Background Paper, Department of Families, Housing, Community Services and Indigenous Affairs, March 2009) 26.

'**Family violence**' is a broader term which encapsulates violence between family members as well as intimate partners. 'Family violence' is the preferred term in Indigenous populations, as it better captures a broad range of relationships within extended families and kinship networks in Aboriginal and Torres Strait Islander communities: Kyllie Cripps and Megan Davis, '[Communities Working to Reduce Indigenous Family Violence](#)' (Research Brief No 12, Indigenous Justice Clearinghouse, June 2012) 2.

¹⁰ [AIFS Report](#) (n 2) 4.

¹¹ *Ibid* 1.

¹² Royal Commission into Family Violence, [Final Report](#) (2018) vol 1, 35–6.

family violence by being forced to watch or participate in assaults, or where they intervene to stop violence from taking place, or shield other siblings or children from exposure.¹⁴

- 7 In 2011, the [Australian Institute of Criminology](#) outlined research findings which demonstrate that exposure to domestic and family violence can involve a child:
- being used as a physical weapon;
 - being forced to spy on a parent;
 - being informed that they are to blame for the violence because of their behaviour;
 - being used as a hostage;
 - having to telephone for emergency assistance;
 - having to assist in ‘patching up’ a parent;
 - dealing with a parent who alternates between violence and a caring role;
 - seeing parents being arrested; and
 - having to leave home with a parent or dislocation from family, friends and school.¹⁵

Prevalence

- 8 Recent statistics suggest that significant numbers of Australian children are exposed to domestic and family violence in the home.¹⁶ Studies conducted by the Australian Institute of Family Studies have found that children are at particular risk of experiencing domestic and family violence during and after parental separation.¹⁷

Aboriginal and Torres Strait Islander communities

- 9 The prevalence of childhood exposure to domestic and family violence is more frequent in Aboriginal and Torres Strait Islander communities than in the general population,¹⁸ reflecting the fact that Indigenous people, especially women, experience violence (both as victims and offenders) at higher rates than non-Indigenous people.¹⁹ This ‘must be understood as both a cause and an effect of social disadvantage and intergenerational trauma’.²⁰ Numerous reports note that Aboriginal and Torres Strait

¹³ See, eg, [National Plan](#) (n 1); [AIFS Report](#) (n 2) 1; [NSW Government](#) (n 8) 7; Queensland Government, [Domestic and Family Violence Prevention Strategy 2016–2026](#) (2016) 1.

¹⁴ Ibid.

¹⁵ Australian Institute of Criminology, [Children’s Exposure to Domestic Violence in Australia](#) (Trends & Issues in Criminal Justice No 419, June 2011), 1–2.

¹⁶ Australian Bureau of Statistics, [4906.0 Personal Safety, Australia, 2016: Key Findings](#) (8 November 2017). See generally Australian Institute of Health and Welfare, [Family, Domestic and Sexual Violence in Australia: Continuing the National Story 2019](#) (Report, June 2019) ch 6.

¹⁷ See Australian Institute of Family Studies, [Evaluation of the 2006 Family Law Reforms](#) (Report, December 2009); Australian Institute of Family Studies, [Survey of Recently Separated Parents 2012](#) (Report commissioned by the Commonwealth Attorney-General’s Department, 2013).

¹⁸ [AIFS Report](#) (n 2) 5; [Australian Institute of Criminology](#) (n 2) 6.

¹⁹ See, eg, Australian Institute of Criminology, [Non-Disclosure of Violence in Australian Indigenous Communities](#) (Trends & Issues in Criminal Justice No 405, January 2011) 1.

²⁰ [AIHW Report](#) xi citing Australian Bureau of Statistics, [National Aboriginal and Torres Strait Islander Social Survey 2014–15](#) (2016); [AIHW Report](#) 83; Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse,

Islander peoples have increased risk factors for family violence relating to substance use, social stressors (such as poor housing and overcrowding), removal from family, unemployment and financial difficulties.²¹

Culturally and linguistically diverse communities

- 10 The Australian Institute of Family Studies has reported that ‘women and children from culturally and linguistically diverse (CALD) communities ... are also at higher risk of experiencing domestic and family violence’.²² Factors such as immigration status and cultural values are likely to enhance the complexities of domestic and family violence by women from CALD backgrounds,²³ and they are generally less likely to report domestic and family violence than women from other social groups.²⁴ Factors influencing under-reporting may include inability to access appropriate interpreting services, limited support networks, lack of awareness about the law, and cultural or religious shame.²⁵
- 11 Refugee and asylum seeker groups are especially vulnerable, as family violence is known to increase in countries where war or other conflict has recently taken place.²⁶ Continuing violence at home, after relocation to Australia, can compound pre-migration trauma and acculturative stress.²⁷

Effects of Exposure to Domestic and Family Violence

- 12 Research on childhood exposure to domestic and family violence suggests a range of impacts which can affect children’s behaviour, schooling, cognitive development and physical and mental well-being.²⁸
- 13 The *Final Report* of the Victorian [Royal Commission into Family Violence](#) found:
- Family violence can have profound short and long-term effects on children and young people that may or may not be immediately apparent: ‘[i]mpacts on children who live with family violence may be acute and chronic, immediate and accumulative, direct and indirect, seen and unseen’.²⁹
- 14 The Royal Commission went on to summarise the effects as follows:

Parliament of the Northern Territory, [Ampe Akelyernemane Meke Mekarle: ‘Little Children Are Sacred’](#) (Final Report, 2007) 138–40.

²¹ See, eg, [Australian Institute of Criminology](#) (n 2) 6; [AIHW Report](#) 88.

²² [AIFS Report](#) (n 2) 5.

²³ *Ibid*; [Australian Institute of Criminology](#) (n 2) 5.

²⁴ [Australian Institute of Criminology](#) (n 2) 5.

²⁵ *Ibid*.

²⁶ Royal Australian and New Zealand College of Psychiatrists, [Submission No 37](#) to Australian Human Rights Commission, [Examination of Children Affected by Family Violence](#) (June 2015) 7.

²⁷ *Ibid*.

²⁸ [AIFS Report](#) (n 2) 2.

²⁹ Royal Commission into Family Violence, [Final Report](#) (2018) vol 1, 22.

Family violence has severe short and long-term effects on children and young people. It can sometimes result in behavioural and mental health problems, disrupted schooling, homelessness, poverty, and intergenerational family violence.³⁰

Psychological, learning and behavioural Impacts

15 The Australian Institute of Family Studies review of recent research assessing children's exposure to domestic and family violence considered a range of longitudinal, meta-analytic and population-based studies which have found that 'exposure to domestic and family violence can affect a child's mental wellbeing and contribute to poorer educational outcomes and a range of behavioural issues'.³¹ These include:

- impaired cognitive functioning;
- behavioural problems;
- poorer academic outcomes;
- externalising (e.g. aggression, lack of emotional control, disobedience) and internalising (e.g. anxiety, social inhibition, sadness, withdrawal) behaviours;
- learning difficulties;
- depression and poor mental well-being;
- low self-esteem;
- low school attendance; and
- bullying (both as victim and perpetrator).

16 In examining available completed studies, the Australian Institute of Family Studies stated:

[a] meta-analysis of 118 empirical studies published between 1978 and 2000 (Kitzmann, Gaylord, Holt, & Kenny, 2003) found that 67% of children exposed to domestic and family violence were at risk of a range of developmental and adjustment problems and fared worse than other children, in terms of academic success, cognitive ability, mental health and wellbeing. Similarly, Wolfe, Crooks, Lee, McIntyre-Smith, and Jaffe's (2003) meta-analysis of 41 empirical studies concluded that children's exposure to domestic and family violence was associated with a range of cognitive and behavioural problems and poorer academic outcomes.³²

17 Similarly, the [Royal Commission into Family Violence](#) listed the following physical, emotional, mental and behavioural effects on children:

- feeling scared of those they love when they should feel safe;
- feeling anxious about their safety and that of other family members and pets;
- having to be responsible for the care and safety of the abused parent and/or siblings;
- feeling they are responsible for the violence;
- becoming homeless, losing treasured possessions, and losing a sense of security and familiar toys, surroundings and people;

³⁰ Ibid vol 2, 105.

³¹ [AIFS Report](#) (n 2) 6.

³² Ibid.

- through disrupted schooling as a result of prolonged absences from school or multiple new schools in a short space of time; and
- being unable to bring friends home or being socially marginalised because of the perpetrator's controlling behaviour.³³

18 The 2012 Australian Institute of Family Studies Survey of Recently Separated Parents found that:

there were higher levels of reported behavioural problems in children aged between 1 and 3 years who had witnessed physical violence compared to children who had never witnessed violence;

there were higher levels of reported behavioural problems in children who had been exposed to emotional violence; and

children aged 5 to 17 years who had experienced violence over an extended period (before/during and since separation) were faring worse in terms of schoolwork, peer relationships and overall wellbeing than children who had never witnessed violence.³⁴

Relevance of age at time of exposure

19 The [Australian Humans Rights Commission](#) has noted that the effects of exposure to domestic and family violence on children during their formative years 'may manifest differently depending on the developmental stages of the child',³⁵ while the [Australian Institute of Family Studies](#) found a strong indication in the research that exposure to family violence in childhood may have a greater impact when experienced at an earlier age:

Howell's (2011) review of the literature had a particular focus on children of pre-school age. She suggested that exposure to domestic and family violence for children in this age group raises some particular concerns because of their developmental stage and the fact that they may spend a greater proportion of time with their parents compared to school-age children and are thus not able to benefit from the potential buffering effects of exposure to a school environment. Her analysis showed that trauma symptoms are evident in pre-school-age children exposed to domestic and family violence and can result in both physical and psychological symptoms. Howell argued that where infants and children cannot rely on parents or caregivers to protect them from or buffer traumatic events, children may instead rely on self-protective behaviours such as withdrawal, anger and aggression, and may have difficulty with developmental tasks due to poor emotion regulation or have difficulty recognising emotions in others ...

Howell (2011) found that age was a significant factor in children's resilience. Older children fared better than younger children, probably because they were able to engage in activities outside the home and develop supportive relationships with peers or other relatives.³⁶

³³ Royal Commission into Family Violence, [Final Report](#) (2018) vol 2, 106.

³⁴ [AIFS Report](#) (n 2) 6.

³⁵ Australian Humans Rights Commission, [Children's Rights Report 2015](#) (2016) 103, 125 [4.5.3].

³⁶ [AIFS Report](#) (n 2) 9 citing Kathryn H Howell, 'Resilience and Psychopathology in Children Exposed to Family Violence' (2011) 16 *Aggression and Violent Behavior* 562, 563-4.

- 20 The [Royal Australian and New Zealand College of Psychiatrists' submission](#) to the Australian Human Rights Commission's 2015 [Examination of Children Affected by Domestic and Family Violence](#) highlighted the impact that exposure to violence can have even in infancy:

It is now understood that infants have an extensive array of biopsychosocial competencies and are able to react to the meaning of others' intentions and emotions. Early childhood is in fact the period of greatest vulnerability to stress-related changes to the brain. The majority of neurological development associated with language, values and complex cognitive and emotional functioning are determined in these early years of life. Infants who experience extremes of abuse or neglect are at risk of failure to thrive, reduced brain size, impaired development and ongoing mental health issues.

Children's development is embedded in family dynamics and the social environment, and is deeply affected by parental mental health and stress. An infant's sense of self and wellbeing is enveloped within that of their mother's. Young children are very much attuned to maternal depression, and can experience threat to the life of their mother as akin to a threat to their own life. When the family is a dangerous rather than protective environment the child does not have a buffer from their fear. The family becomes a potent traumatic insult, with ongoing ramifications for the health development of the infant.

Infants who are exposed to family violence will be exposed to dysfunctional relationships, inconsistent attachment dynamics and interactions characterised by negative affect and inconsistent meaning-making. These factors can have significant implications for the way infants make sense of the world around them and develop the core sense of themselves. Infants as young as four months old who have been exposed to these environments have been found to engage in more negative patterns of interaction with other sensitive adults and explore the inanimate environment less avidly.³⁷

- 21 Irrespective of the age of the child, it is ongoing exposure to violence which has been associated with the highest likelihood of behavioural difficulties.³⁸

- 22 In respect of mental health impacts during childhood and adolescence, the [Royal Australian and New Zealand College of Psychiatrists' submission](#) goes on to state:

Epidemiological data shows that half of all mental disorders begin by age 14. Adverse childhood experiences (ACE), including family violence, are known to be highly co-occurring and strongly associated with the onset of psychiatric disorders (Haliburn, 2014). Insecure attachment during infancy, as described above, can manifest as conduct disorder, aggression, anxiety and mood disorders, hyperactivity, antisocial behaviour, vulnerability to stress, difficulty regulating negative emotions, learning problems and displays of hostility or oppositional behaviour as the infant moves through childhood (RANZCP, 2014). These can lead to self-harm, substance use, homelessness and depression in adolescence, with ongoing implications (Kowalenko, 2013).

Children exposed to trauma can develop behavioural difficulties associated with the unpredictability of their world leading to a lack of verbal and conceptual understanding of their inner world and their surroundings and how these interact. These children may experience other people as sources of terror or gratification, but rarely as fellow human beings and potential allies, and tend to have problems in social settings.³⁹

³⁷ [Royal Australian and New Zealand College of Psychiatrists](#) (n 25) 9 (citations omitted).

³⁸ [AIFS Report](#) (n 2) 7.

³⁹ [Royal Australian and New Zealand College of Psychiatrists](#) (n 25) 9 (citations omitted).

Trauma and post-traumatic stress disorders

- 23 The [Australian Institute of Family Studies](#) found that trauma is associated with sustained or cumulative exposure to abusive interpersonal relationships in childhood, and that

[a] range of psychological and behavioral symptoms may be evident in those suffering trauma, including an inability to manage internal states/emotions, alterations in attention or consciousness and alterations in self-perception (Bateman, Henderson, & Kezelman, 2013; Margolin & Vickerman, 2011; Wall & Quadara, 2014).⁴⁰

- 24 Prolonged exposure to violence may cause children to experience trauma symptoms, including PTSD, resulting in psychosocial and sometimes physical responses that can have lasting effects on children's development, behaviour and wellbeing.⁴¹ These include:

- depression;
- low self-esteem;
- anxiety;
- poor coping mechanisms;
- suicidal thoughts;
- eating disorders;
- self-harm;
- substance abuse; and
- physical symptoms such as chronic pain.

- 25 The trauma caused by sustained and chronic exposure to domestic and family violence may distort survivors' sense of identity and concept of others, leading to mistrust, social isolation and inability to relate to others.⁴² Considering an earlier review of the available research, the Australian Institute of Family Studies reported:

PTSD has particular qualities when it occurs in relation to childhood experiences of domestic and family violence, and that the cumulative effects of long-term exposure might result in complex disturbances, such as an inability to regulate emotion, and cognitive and behavioural developmental delays.⁴³

Links to Contact with the Criminal Justice System

Intergenerational transmission of violence

- 26 The [Royal Commission into Family Violence](#) noted that:

⁴⁰ [AIFS Report](#) (n 2) 7.

⁴¹ Ibid citing Peter G Jaffe, David Allen Wolfe and Marcie Campbell, *Growing Up with Domestic Violence: Assessment, Intervention, and Prevention Strategies for Children and Adolescents* (2012, Hogrefe Publishing).

⁴² [AIFS Report](#) (n 2) 8.

⁴³ Ibid.

There is some evidence that exposure to family violence as a child can lead to intergenerational transmission of violence: children exposed to family violence are more likely to hold attitudes that justify their own use of violence.⁴⁴

- 27 In its [submission to the Australian Human Rights Commission](#), the Royal Australian and New Zealand College of Psychiatrists explained that children who witness domestic violence may be at risk of developing similar behaviours in adulthood:

The neurological impacts of early childhood trauma and insecure attachment can also provide some clues as to how family violence can become intergenerational ... children whose formative years are affected by heightened and sustained stress and fear are vulnerable to developing long term mental health issues, which is in itself a risk factor for both experiencing and perpetrating family violence. Further, experience of developmentally appropriate attachment and boundaries in childhood is an important part of learning how to develop healthy relationships later in life. For some children who may otherwise love and respect their father, seeing him perpetrating violence can be confusing and they may come to consider violence as a legitimate response. These children can be at risk of developing psychologically controlling, physically violent or sexually abusive behaviours in adulthood and potentially, as a father and partner, repeat the family violence they witnessed as a child.⁴⁵

- 28 The [Australian Institute of Family Studies](#) found that longitudinal, meta-analytic and population-based studies ‘have consistently linked childhood exposure to domestic and family violence with future perpetration’, but notes that there is ‘some debate on the question of whether exposure to domestic and family violence *alone* is a factor in future perpetration of violence’ and refers to recent multi-country studies which ‘suggest that gender roles, stereotypes and violence-supportive attitudes are important for understanding the correlation’.⁴⁶

Links to alcohol and substance abuse

- 29 The 2014 Parliamentary research paper ‘[Domestic, Family and Sexual Violence in Australia: An Overview of the Issues](#)’ reported that children exposed to family violence, including witnessing family violence, are more likely to experience the negative impacts on mental health and wellbeing referred to above, and have an ‘increased likelihood of substance abuse’.⁴⁷ The research cited ‘found that living in a violent home could be a significant contributing factor to a range of serious health conditions, including alcohol and drug abuse and depression, and even early death’.⁴⁸
- 30 In examining the effects of family violence on young people, the [Royal Commission into Family Violence](#) referred to submissions specifically addressing an increased risk of drug and alcohol abuse, finding that children and young people ‘who have

⁴⁴ Royal Commission into Family Violence, [Final Report](#) (2018) vol 1, 37.

⁴⁵ [Royal Australian and New Zealand College of Psychiatrists](#) (n 25) 11.

⁴⁶ [AIFS Report](#) (n 2) 18.

⁴⁷ Janet Phillips and Penny Vandenbroek, ‘[Domestic, Family and Sexual Violence in Australia: An Overview of the Issues](#)’ (Research Paper, Parliamentary Library, Parliament of Australia, 14 October 2014) 18.

⁴⁸ *Ibid.*

experienced family violence are also at greater risk of drug and alcohol abuse and post-traumatic stress disorder as young people and adults.⁴⁹

Treatment and Healing*

- 31 Numerous individual studies and submissions to government inquiries suggest that counselling and trauma-focussed cognitive behavioural therapy (CBT), including individual and group work, may be beneficial for treating young people who have been exposed to family and domestic violence.⁵⁰
- 32 Research suggests that some children who are exposed to domestic and family violence display signs of resilience such that they experience no negative outcomes when compared with non-exposed children.⁵¹ Although resilience in children is not well understood,⁵² age at the time of exposure has been identified as a significant factor (as noted in Part 4, above) with older children possibly faring better because of their capacity to develop a wider range of supportive relationships outside the home.⁵³ Identified protective factors include positive social connections with caring adults and ready access to supportive extended family.⁵⁴
- 33 The trauma resulting from Aboriginal and Torres Strait Islander children's exposure to family violence is distinct because of its compounded intergenerational effect, calling for services which are both trauma-informed and trauma-specific.⁵⁵

⁴⁹ Royal Commission into Family Violence, *Final Report* (2018) vol 2, 111.

* *Note:* The research cited in relation to treatment and healing does not attempt to prescribe or recommend what is required for any individual. This will of course be determined by factors such as the individual's personal experience or condition, the advice of any relevant experts, health providers or other support persons and the availability of treatment and opportunities to recover and heal.

⁵⁰ See, eg, [Royal Australian and New Zealand College of Psychiatrists](#) (n 25) 13–14; Royal Commission into Family Violence, *Final Report* (2018) vol 2, 145; Law Council of Australia, [Submission No 285](#) to Australian Law Reform Commission, *Review of the Family Law System* (May 2018) 94.

⁵¹ [AIFS Report](#) 12–13, citing Katherine M Kitzmann et al, 'Child Witnesses to Domestic Violence: A Meta-Analytic Review' (2003) 71 *Journal of Consulting and Clinical Psychology* 339. Kitzmann et al conducted a meta-analysis of 118 studies published between 1978 and 2000 and found that about 37% of affected children 'showed outcomes that were similar to, or better than, those of nonwitnesses [to family violence]': at 345.

⁵² See, eg, Australian Institute of Family Studies, [Children Affected by Domestic and Family Violence: A Review of Domestic and Family Violence Prevention, Early Intervention and Response Services](#) (Report, September 2014). 'Resilience' in the context of child maltreatment is widely understood as referring to 'children displaying competent functioning despite exposure to high levels of risk or adversity': see, eg, Australian Institute of Family Studies, [Resilience Still a Useful Concept When Working with Children and Young People?](#) (CFCA Paper No 2, April 2012). 'Protective factors' are 'attributes or conditions that can occur at individual, family, community or wider societal level' which moderate adversity and promote healthy development and wellbeing: see Australian Institute of Family Studies, [Risk and Protective Factors for Child Abuse and Neglect](#) (CFCA Resource Sheet, May 2017).

⁵³ [AIFS Report](#) (n 2) 13.

⁵⁴ See, eg, [AIFS Report](#) (n 2) 13 citing Jennifer Dawson, *What About the Children? The Voices of Culturally and Linguistically Diverse Children Affected by Family Violence* (Immigrant Women's Domestic Violence Service, 2008); Katrina D Hopkins, Catherine L Taylor and Stephen R Zubrick, '[Psychosocial Resilience and Vulnerability in Western Australian Aboriginal Youth](#)' (2018) 78 *Child Abuse & Neglect* 85, 89. Hopkins, Taylor and Zubrick also found that living in low socioeconomic status neighbourhoods was a protective factor for high-risk youth, which 'may reflect the ready access to supportive extended family in the Australian context where the majority of the Aboriginal population live in lower socioeconomically ranked neighborhoods': at 89.

⁵⁵ Judy Atkinson, '[Trauma-Informed Services and Trauma-Specific Care for Indigenous Australian Children](#)' (AIHW Closing the Gap Clearinghouse Resource Sheet No 21, July 2013).