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## **FAMILY AND DOMESTIC VIOLENCE**

Approved by Diocesan Council

13 December 2018

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### **1. Policy Statement**

- 1.1 Family and domestic violence (or domestic abuse) in all its forms is contrary to Christian beliefs and is a violation of basic human rights.
- 1.2 People are entitled to live in dignity, free from fear and harm in their own home or domestic environment.
- 1.3 All forms of domestic abuse are deplorable and there is no acceptable cultural justification for violence.
- 1.4 We recognise that the Church is one institution in a network of many that must play its part in recognising and referring on cases of domestic abuse to WA Police or other statutory authority.
- 1.5 There is growing awareness in society of the extent of domestic abuse and recognition that domestic abuse is a crime and no longer a private matter to be kept in the family or community.
- 1.6 The Diocese of Perth is committed to raising awareness about domestic abuse and its impact on individuals, children, the worshipping and wider community. The Diocese will work to ensure that:
  - a. There is a primary duty of care to the person who has been abused and to focus on their immediate safety and wellbeing needs.
  - b. That those who have suffered domestic abuse are supported, empowered and encouraged to seek professional care from the relevant authorities in WA.
  - c. People have a right to privacy and confidentiality within the limits of the law and where safety is not compromised.
  - d. Those who choose to remain in or return to a violent environment are provided with pastoral care and support and their decision respected.
  - e. We respond to alleged or known abusers of domestic abuse primarily as a safeguarding issue and in the wider context of good pastoral care.
  - f. The abuser takes responsibility for their behaviour and no blame or responsibility of the violence is attributed to the person who has been abused. They are to be encouraged to recognise their personal needs and seek appropriate intervention to assist them to take responsibility for and address their abusive attitudes and behaviour.
  - g. Any Clergy and Church workers who perpetrate domestic abuse, and it is determined that misconduct has occurred will be subject to the appropriate disciplinary process as outlined in the Professional Standards Statute (2021).

### **2. Aim**

- 2.1 This policy sets out a practical guide on how the Diocese will respond to disclosures of domestic abuse.
- 2.2 It supports the National Church's commitment to address and respond effectively to domestic abuse both within the Diocese and wider society.

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- 2.3 It is intended to raise awareness and to highlight some of the areas that need to be considered in making our churches safer places.
- 2.4 To encourage churches to become places of safety where domestic abuse is taken seriously, those who have suffered domestic abuse are believed and respected and alleged or known abusers are challenged.
- 2.5 It aims to inform, direct and equip Church workers and volunteers and those who may be entrusted by those who have suffered domestic abuse or alleged or known abusers to hear their story and who want to offer the most appropriate care.

### **3. Scope**

- 3.1 This policy applies to all Church workers, Parishioners and Volunteers.
- 3.2 The Safe Ministry Services Manager (SMSM) is the point of contact in Diocesan Office for all matters pertaining to domestic abuse.

### **4. Self-Care**

- 4.1 Responding to domestic abuse can be stressful and overwhelming. It is recommended that Church Workers should speak with their Professional Supervisor or seek out other therapeutic options.

### **Appendix:**

- 1. Responding to Those Who Have Suffered Domestic Abuse
- 2. Indicators of Domestic Abuse
- 3. Useful Contact Information



**Appendix 1 - RESPONDING TO THOSE WHO HAVE SUFFERED DOMESTIC ABUSE**

**1. Disclosure of Domestic Abuse**

- 1.1 Disclosing domestic abuse is a big step and carries an element of risk for the person. They cannot be sure of how the disclosure will be received or what the consequences will be. Conveying a genuine attitude that is pastoral, gentle, caring, non-judgemental, non-blaming, respectful and reassuring will help the abused person develop a sense of trust in the Church worker.
- a. Meet with the abused person in an environment where they feel safe.
  - b. Confirm that the information shared is private and confidential unless there are concerns for their safety and that of their children.
  - c. Be aware of any cultural sensitivities.
  - d. Be sensitive to the emotional distress or fear the abused person might be experiencing
  - e. Listen to what the abused person is saying and acknowledge what they have told you.
  - f. Affirm that the abused person has made an important step by talking about the abuse they have experienced.
  - g. Reassure the abused person that their reaction to the abuse is normal (e.g., physical, emotional, behavioural reactions)
  - h. Reinforce to the abused person that the violence is not their fault, that there is no excuse for violence and that the responsibility lies with the alleged abuser.
  - i. Let them know that violence is a crime.
  - j. Inform the abused person they have a right to feel safe and live free from abuse or violence.
  - k. Enquire what assistance they require.
  - l. If the alleged abuser is a member of Clergy or paid Church Worker, the SMSM is to be informed.
- 1.2 When responding to a disclosure of domestic abuse Church Workers must not:
- a. Take photographs of the abused or their children;
  - b. Interview any children involved;
  - c. Encourage the abused to forgive and return to the family home; or
  - d. Facilitate mediation between the parties.

**2. Responding to Alleged or Known Abusers**

- 2.1 The Church has an important role in challenging inappropriate behaviour. This can, however, lead to increased risks for both the abused person and the person who challenges the alleged or known abuser. This needs to be done in an extremely careful way, i.e., one that does not place an abused person at increased risk and the following should be considered.
- 2.2 Church Workers should not:
- a. Meet with the alleged abuser alone;
  - b. Undertake any investigation into the allegations of domestic abuse (any investigation undertaken is by WA Police or the appropriate authority);
  - c. Provide a character witness in any proceedings and be involved in any processes which may seem as if the Church supports their position;
  - d. Allow the alleged abuser to use religious or cultural excuses for their behaviour;
  - e. Pursue counselling or mediation with the couple if there is awareness that there is violence in the relationship; or
  - f. Encourage the abused to forgive the alleged abuser and / or take them back.

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- 2.3. Church workers should:
  - a. Have a heightened awareness of the danger that the alleged abuser may pose and the need to ensure the safety of all who may meet with them;
  - b. Be aware that the alleged abuser may be polite, seductive, intimidating, in denial or turn threatening and violent;
  - c. Provide the appropriate level of pastoral care;
  - d. Encourage the alleged abuser to accept accountability for what has occurred and seek help to address their behaviour; and
  - e. Advise the SMSM.
- 2.4 Any alleged or known perpetrator of domestic abuse may be subject to a Worshipping Agreement to ensure the safety of those who attend the Parish.



## **Appendix 2 - INDICATORS OF DOMESTIC ABUSE**

1. The level of violence in domestic abuse generally increases and becomes more damaging and severe over time and occurs more frequently. Early detection and intervention can therefore lessen the risk of more severe harm or even homicide of the abused and / or children. There are many indicators of Domestic Abuse. One indicator in isolation may not necessarily indicate abuse therefore each indicator needs to be considered in the context of the personal circumstances and presenting issues of the abused person.

### **2. High Risk Indicators**

- 2.1 There is no absolute indicator to determine the risk of homicide, however, the greater the number of high-risk indicators, the greater the risk that a homicide may occur.
- 2.2 A referral to the WA Police Service with or without the abused persons consent should only be made when there are concerns for the person's immediate safety or the safety of others. The Person who has been abused:
  - a. has received life threatening injuries,
  - b. injuries have increased in frequency and severity over time,
  - c. is pregnant or has recently given birth, or
  - d. has recently separated from or is considering separating from an abusive partner.

**Note:** Separation is a time of extreme danger. Separation includes the abused person leaving the abuser or the abuser being removed from the home against their will as a result of a violence restraining order or police charges.

- 2.3 The Alleged or Known Abuser
  - a. Has access to weapons, particularly firearms and other lethal weapons
  - b. Has used a weapon in most recent event
  - c. Has previously tried to harm / kill the abused person
  - d. Has previously threatened to harm / kill the abused person
  - e. Has previously harmed or threatened to harm / kill children or other family members
  - f. Has harmed / killed pets or other animals or has threatened to harm / kill pets
  - g. Has previously threatened or attempted suicide
  - h. Has sexually assaulted the abused person
  - i. Misuses drugs and / or alcohol
  - j. Has or is stalking the abused person
  - k. Uses obsessive / jealous / controlling behaviour towards abused person
  - l. Is unemployed
  - m. Has previously had violence restraining orders (VRO) taken out against them
  - n. Has previously or is in current breach of a violence restraining order (VRO)
  - o. Has financial difficulties
  - p. Has depression or other mental health illness

**Note:** The presence of a mental health illness needs to be carefully considered in relation to the co-occurrence of other risk factors. The abused person is at high risk if, for instance, the abuser has paranoia whereby they identify the abused person as hostile.



### **3. Physical Signs and Symptoms**

- 3.1 Physical signs and symptoms are not in themselves evidence of Domestic Abuse; however, the indicators may raise suspicion that it is present. The abused person presents with:
- a. Injuries to the head, face, neck, chest, breast, abdomen or genitals
  - b. Unexplained physical injuries or musculoskeletal complaints
  - c. Multiple and bilateral soft tissue injuries especially contusions and abrasions
  - d. Lacerations, bruises, stab wounds, burns, human bites, fractures (particularly of the nose and eye orbits) and spiral wrist fractures
  - e. Bruises of various ages and multiple injuries such as bruises, burns and scars in different stages of healing
  - f. Signs of hair being pulled out
  - g. Sexual Assault
  - h. Lethargy, Malaise, Fatigue
  - i. Ruptured eardrums
  - j. A history of gynaecological problems, miscarriages, chronic pelvic pain
  - k. Headaches, migraines, dizziness
  - l. Insomnia
  - m. Chest pain, palpitations, hyperventilation
  - n. Gastrointestinal disorders
  - o. Eating disorders.

### **4. Pregnancy**

- 4.1 Women are at increased risk of Domestic Abuse commencing or increasing during pregnancy. Women abused during pregnancy are at even greater risk of violence in the postpartum period. Factors to consider include:
- a. Minimal or late attendance for antenatal care
  - b. Unintended or unwanted pregnancy
  - c. Injuries or vaginal bleeding during pregnancy
  - d. Miscarriage or other pregnancy complications
  - e. Low birth weight of infant
  - f. Seeking a termination of the pregnancy.

### **5. Psychological and Emotional Indicators**

- 5.1 Recurring domestic abuse can lead to other illness and emotional problems that on the surface may not appear related to Domestic Abuse and Indicators include post-traumatic stress disorder involving:
- a. Increased psychological arousal
  - b. Intrusive thoughts and flashbacks
  - c. Sleeping difficulties and nightmares
  - d. Difficulty with concentrating
  - e. Hyper-arousal and hyper-vigilance
  - f. Disassociation
  - g. Repeated visits to a health service or general practitioner for stress-related symptoms.
  - h. Emotional distress such as anxiety, indecisiveness, confusion, hostility, panic attacks
  - i. Depression
  - j. Self-harming behaviours
  - k. Suicidal thoughts and/or attempts
  - l. Drug and or alcohol abuse including dependence on tranquillisers and alcohol.



**6. Presentation and history**

- a. The abused is hesitant or evasive when describing injuries
- b. Minimises injuries/pain
- c. Distress is disproportionate to injuries, e.g. The abused shows extreme distress over minor
- a. Injury - explanation is inconsistent with injury, e.g. "I walked into a door".
- d. Uncomfortable or anxious in the presence of their partner
- e. Makes excuses for the abuser's violent behaviour
- f. Withdraws from touch and affection
- g. Substantial delay before seeking medical treatment
- h. Multiple presentations at health services for vague symptoms
- i. Partner or family member presents with the abused, insists on remaining with the abused and speaks on the abused persons behalf
- j. Record of or suspicion of previous abuse
- k. Misuses drugs and / or alcohol including prescribed drugs
- l. Insecure housing
- m. Financial problems.

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### **Appendix 3 - USEFUL CONTACT INFORMATION**

WA Police – emergency 000 ( for anyone in immediate danger of harm)

WA Police Operations Centre 131 444

Crisis Care 9223 1111

1800Respect or 1800 737 732 (national counselling helpline, information and support 24/7)

Women's Domestic Violence Helpline 1800 007 339

Men's Domestic Violence Helpline 1800 000 599

Legal Aid Information Line 1300 650 579

Domestic Violence Advocacy and Support Centre 9328 1200

Domestic Violence Children's Counselling Service 9328 1888

Kids Helpline 1800 551 800

Multicultural Women's Advocacy Service 9328 1200

Women's Information Service 1800 199 174

Yorgum Aboriginal Counselling Service 9218 9477

Derbarl Yirrigan Health Service 9421 3888

Djinda Services 9489 6391

Comprehensive information can be found by copying the following into your browser:

<https://www.dcp.wa.gov.au/CrisisAndEmergency/FDV/Documents/FDV%20Referral%20Guide%20April%202013.pdf>