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EQUIPPING DOCTORS TO PROVIDE VITAL AND SENSITIVE SUPPORT TO VICTIMS OF FAMILY AND DOMESTIC VIOLENCE

AMA Position Statement on Family and Domestic Violence 2016

AMA President, Dr Michael Gannon, said today that doctors have a unique and trusted role to play in the early detection, intervention, and treatment of patients who have experienced family and domestic violence.

Releasing the AMA's revised and updated *Position Statement on Family and Domestic Violence 2016*, Dr Gannon said the AMA is committed to providing important information and guidance to empower doctors, especially GPs, to provide better support for victims.

Ahead of the COAG *National Summit on Reducing Violence against Women and their Children*, which commences in Brisbane today, the AMA is calling on all Australian governments to properly fund and resource, on an ongoing basis, specialised family and domestic violence support services, including housing and crisis accommodation.

Dr Gannon said it is disturbing and unacceptable that, in a modern and sophisticated nation like Australia, a large number of women experience some form of physical or sexual violence in their lifetimes.

"Two women are killed nearly every week in Australia due to family and domestic violence," Dr Gannon said.

"The health effects of family and domestic violence in both the immediate victims and their families are devastating, and it is not only women who are the victims.

"Family violence affects people of all genders, sexualities, ages, socio-economic backgrounds, and cultures.

"And we are now also seeing increasing instances of elder abuse, with grandmothers and grandfathers, many frail and vulnerable, being subjected to violence from family members.

"Men can be victims. Women can be perpetrators. But it is clear that the overwhelming majority of people who experience such violence are women.

"The most prevalent effect is on mental health, including post-traumatic stress disorder, depression, anxiety, suicidal ideation, and substance abuse.

"There are also serious physical health effects including injury, somatic disorders, chronic disorders and chronic pain, gastro-intestinal disorders, gynaecological problems, and increased risk of sexually transmitted infections.

"As a community, we must stamp out violence against Australian women, and bring an end to all forms of family and domestic violence, whoever the victim.

"This will involve commitment and coordination from governments; support services; the related professions, especially medical, health, and legal; neighbourhoods; and families – backed by adequate funding."

Dr Gannon said that health care providers may see more results of violence in their patient contacts than law enforcement agencies.

"Women experiencing domestic violence will share their experiences with GPs more often than with any other professional group," Dr Gannon said.

"The health impacts of family and domestic violence persist long after the violence ceases."

"Women who have experienced this violence report higher levels of mental disorders, increased rates of physical disorders, impaired quality of life, and higher rates of suicide attempts.

"Children who grow up witnessing and experiencing domestic violence can also be profoundly affected."

Dr Gannon said that education, awareness, interventions, and models of care that help both victims and perpetrators are desperately needed.

"All doctors need access to training that exposes the extent of different forms of family and domestic violence, and the medical and psychiatric consequences for the victims – be they men, women, children, young, or old.

"Special care is also needed for the perpetrators.

"Responding effectively to family violence requires knowledge of the physical and emotional consequences of the violence, an understanding of appropriate and inappropriate responses, and having good networks with local family and domestic violence services.

"Family and domestic violence is a national crisis that needs a national solution, with a local focus and local responses," Dr Gannon said.

Background

- In 2014, there were 95 victims of family and domestic violence-related homicide offences recorded by police.
- 40 per cent of women who have experienced violence reported that they received injuries as a result of family and domestic violence.
- Intimate partner violence is the leading contributor to the preventable death, disability, and illness burden in women aged 15-45.
- One in six Australian women have experienced physical or sexual violence from a current or former partner; while one in three women have experienced physical and/or sexual violence perpetrated by someone known to them.
- The Australian Bureau of Statistics' Personal Safety Survey estimated that 5.3 per cent of men and 16.9 per cent of women have experienced physical or sexual violence perpetrated by a current or previous partner since the age of 15.
- The ABS survey estimated that 14 per cent of men and 25 per cent of women have experienced emotional abuse by a partner since the age of 15.
- A woman is most likely to be killed by her male partner in her home.
- An estimated 62 per cent of women and 8 per cent of men experienced their most recent incident of physical assault in their home.
- It is most common for women to experience violence from a male ex-partner.

- Perpetrators of family violence against adult males tend to be both male and female, whereas perpetrators of family violence against adult females are mostly male.
- 61 per cent of women who experienced domestic violence had children in their care when the violence occurred.
- Aboriginal women are 34 times more likely to be hospitalised because of family violence than other women.
- More than one million children in Australia are affected by family and domestic violence.

The AMA Position Statement on Family and Domestic Violence 2016 is at https://ama.com.au/position-statement/family-and-domestic-violence-2016

The AMA kit - Supporting Patients Experiencing Family Violence: A Resource for Medical Practitioners - is at https://ama.com.au/article/ama-family-violence-resource

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