



Partner violence in the Longitudinal Study of Indigenous Children (LSIC)

Laura Bennetts Kneebone

Key statistics

- Mothers who had arguments that included physical violence were much more likely to be in a partner violence situation in future waves, but were also much more likely to be single in future waves.
- Demographic characteristics related to employment, education and financial hardship were related to partner violence. Remoteness was the single biggest predictor of partner violence in LSIC.
- Children were more likely to have social and emotional problems if they had been upset by family arguments and/or if their parents have had violent arguments.
- Mothers experiencing partner violence were more likely to rate family violence as a big problem in their community.

Domestic violence in the LSIC context

The Longitudinal Study of Indigenous Children (LSIC) has interviewed the families of between 1,200 and 1,700 Aboriginal and Torres Strait Islander children every year since 2008. In the first year of interviewing most children were either 1 or 4 years of age. They live in urban, regional and remote areas of Australia (see Figures 1 and 2). While all of the children in the study are Indigenous, not all the primary carers or their partners are Indigenous.

Figure 1: LSIC 2008 sample by ASGC Remoteness area

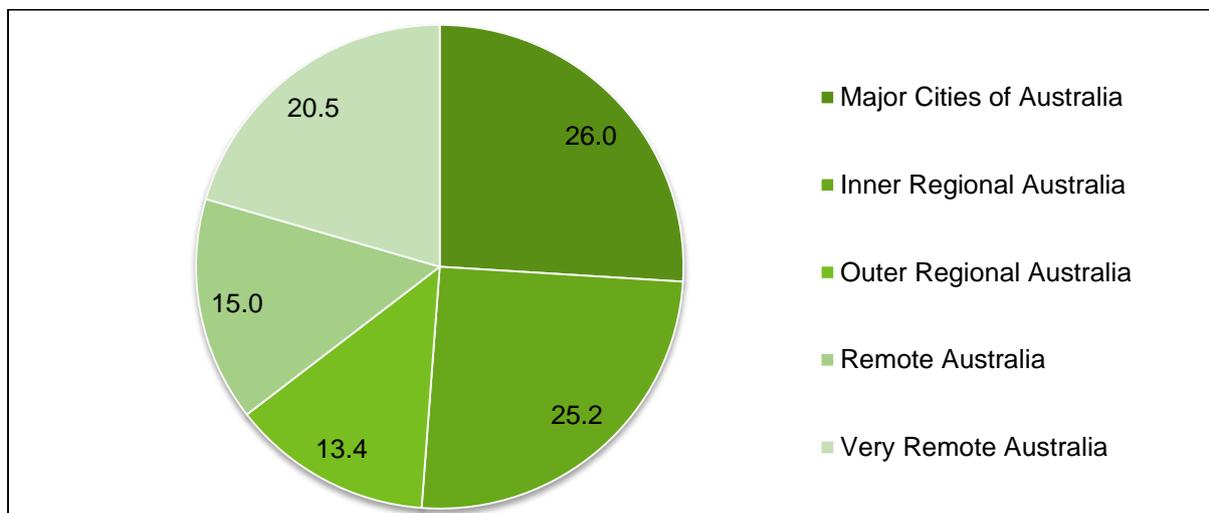
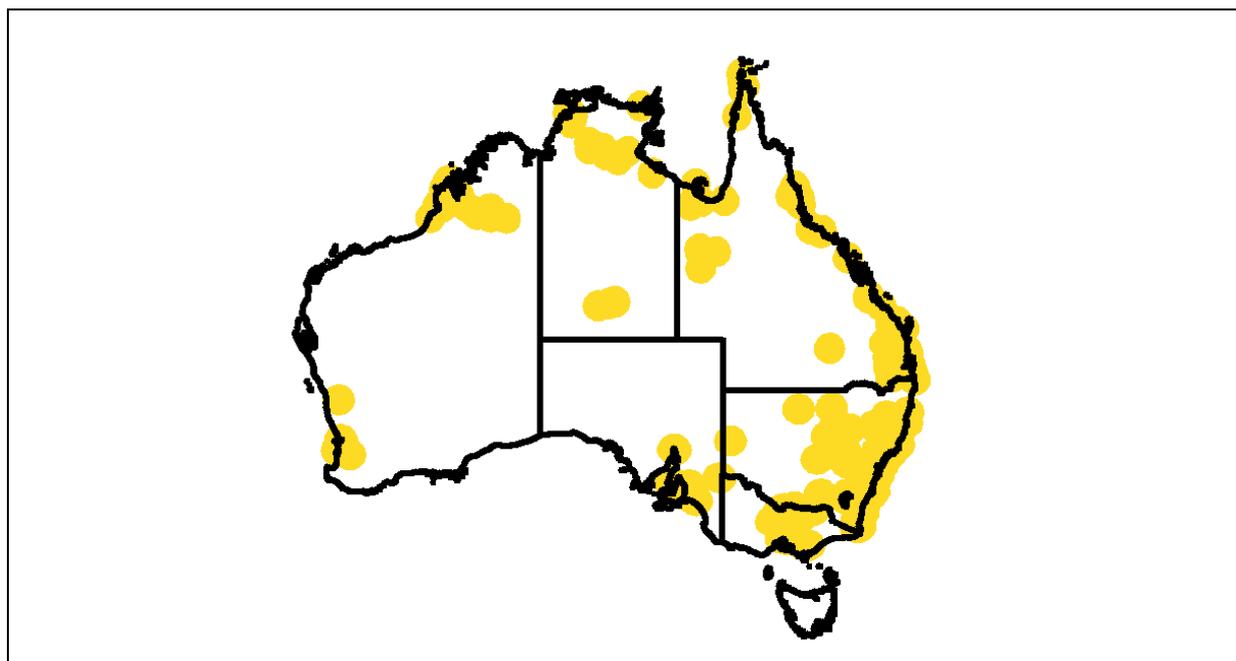
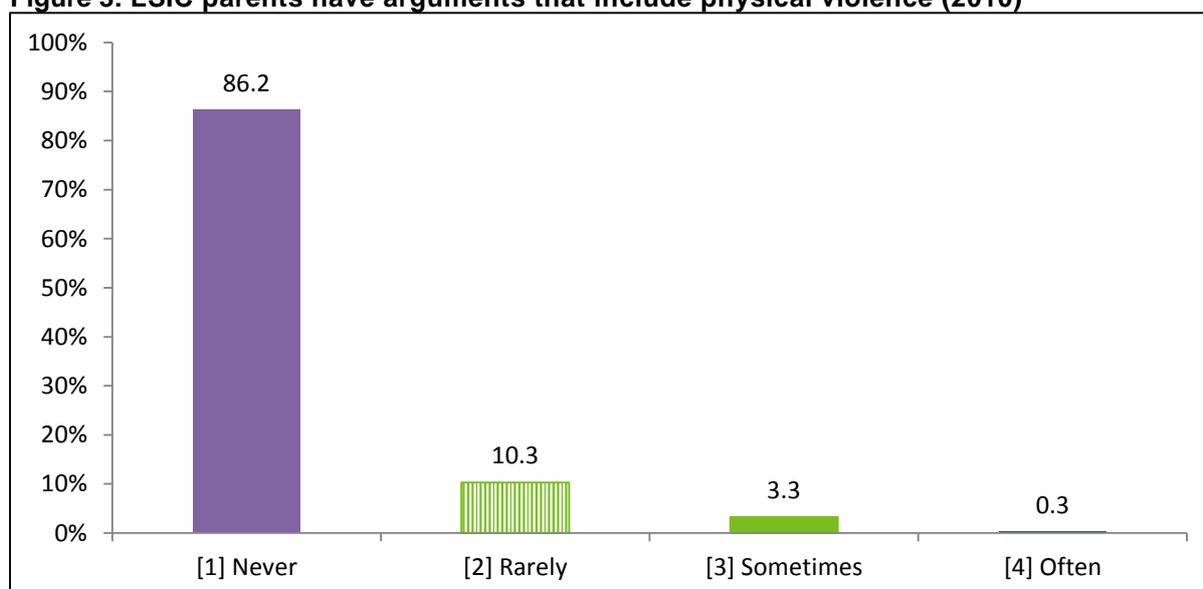


Figure 2: LSIC survey sample distribution (2013)



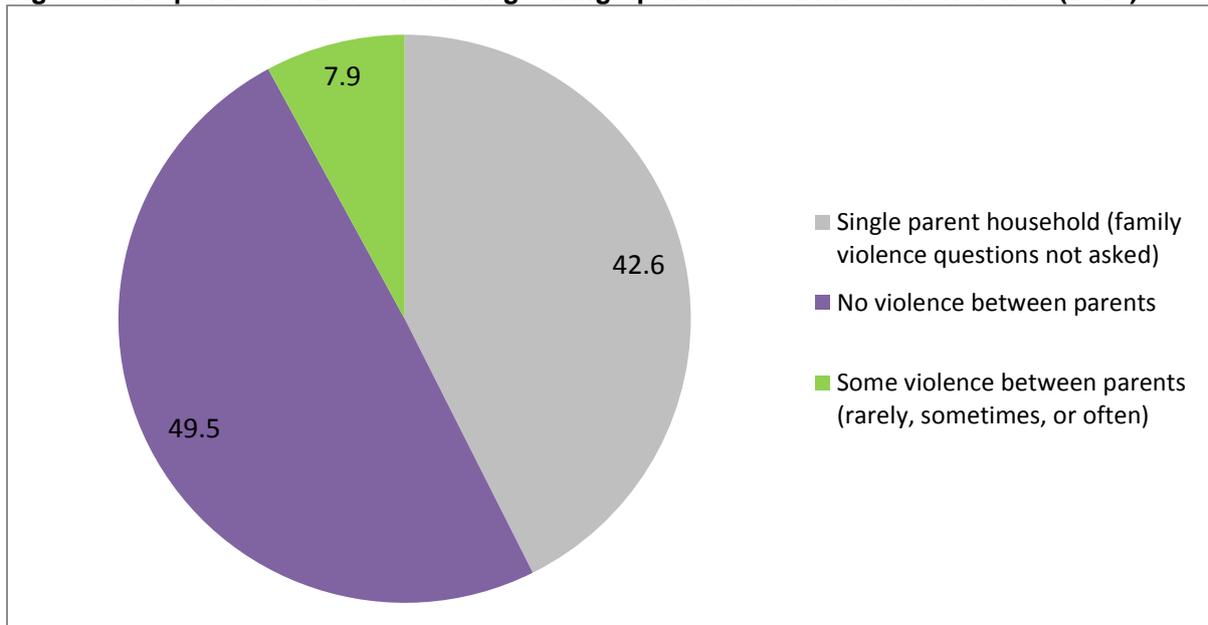
In the third year of interviewing (Wave 3), the primary carers, 97.4 per cent of whom were female (predominantly mothers), were asked about their relationship with their partners. At this point in time, 57.5 per cent of the participants had a partner living in the household (only slightly higher than at Wave 1). Parents living with a partner were asked whether they have arguments with their partner that end up with people pushing, hitting, kicking and shoving. Of those asked (n=833), 7.2 per cent refused to answer any relationship questions and a further 0.4 per cent refused the question about partner physical violence. Of those who answered (n=769), 86 per cent reported no partner physical violence (see Figure 3).

Figure 3: LSIC parents have arguments that include physical violence (2010)



After taking into account children living in a single parent household (42.6 per cent), around 8 per cent of Indigenous children in the sample live in households where parents' arguments occasionally end up with people pushing, hitting, kicking or shoving (combining responses "rarely", "sometimes" and "often") (see Figure 4).

Figure 4: Proportion of LSIC children growing up in homes with some violence (2010)

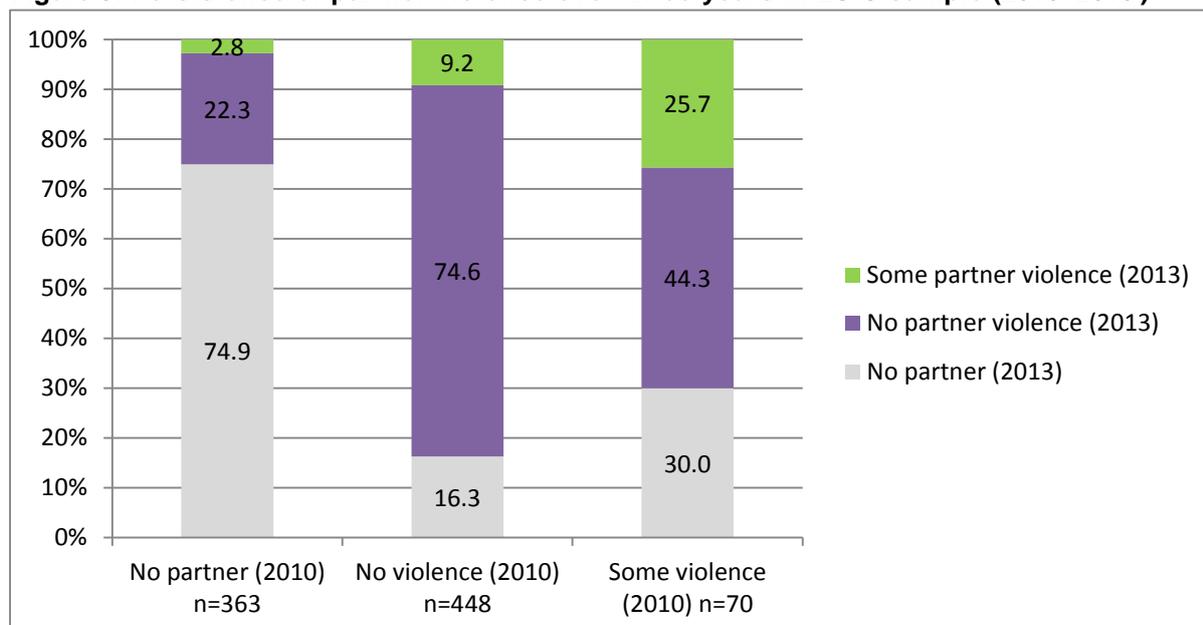


Persistence of partner violence

The question about parental arguments ending in violence was asked in Wave 3 (2010) and again in Wave 6 (2013). This enables investigation of whether differences in characteristics between families experiencing physical violence and those who are not are stable over time. A number of characteristics do not show any relationship to partner violence. These include age of the study child, presence (or absence) of other males or females in the household and number of children in the household.

Experiencing partner violence in Wave 6 (2013) was related to experience of partner violence in Wave 3, three years earlier (see Figure 5). Of those experiencing some violence in Wave 3, 26 per cent were still experiencing violence in Wave 6 and 30 per cent were single by Wave 6. Of those who were in a non-violent relationship in Wave 3, 9 per cent were experiencing partner violence three years later and 16 per cent were single. Of those who were single in Wave 3, 75 per cent were still single, 22 per cent were in a non-violent relationship and 3 per cent were in a violent relationship at Wave 6.

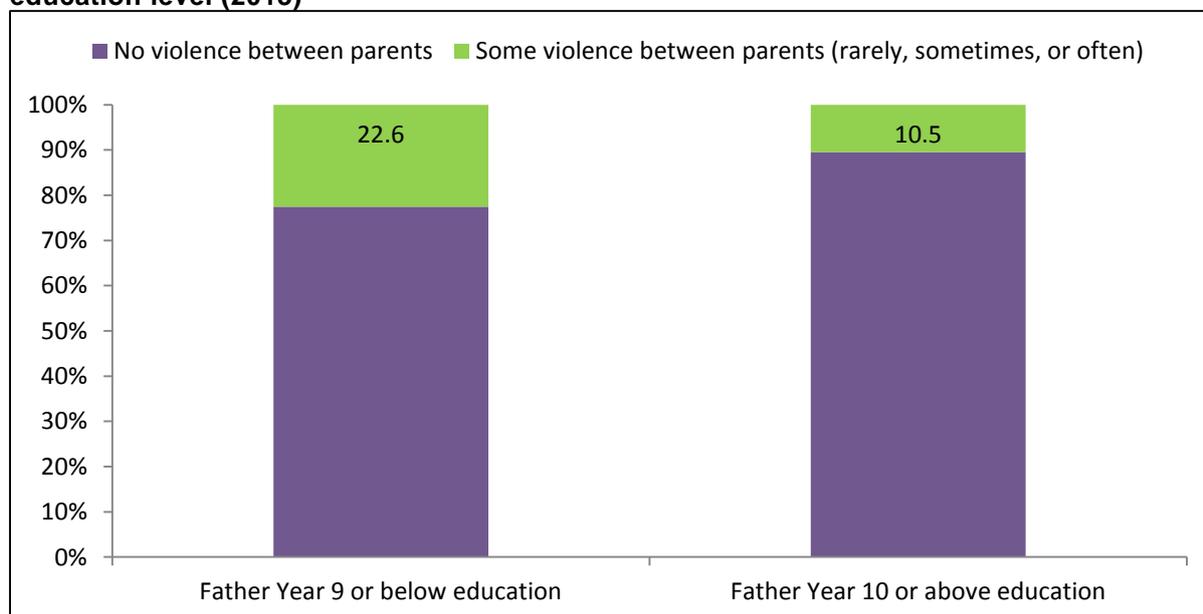
Figure 5: Persistence of partner violence over three years in LSIC sample (2010–2013)ⁱ



Education

Although there was no relationship between mother’s education level and experience of partner violence, there was a significant relationshipⁱⁱ between father’s education level and partner violence.ⁱⁱⁱ If fathers had an education level of year 10 or above (Wave 6), 11 per cent of mothers reported partner violence, but if fathers had a year 9 or below education, that percentage increased to 23 per cent (see Figure 6).

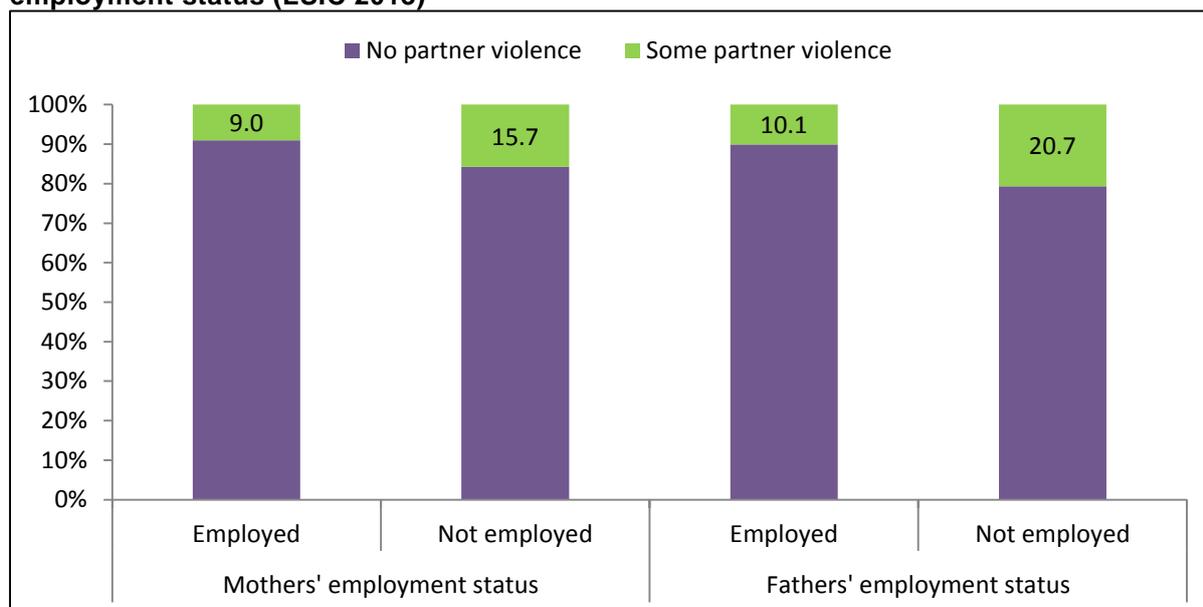
Figure 6: Experience of partner violence of LSIC parents in relationships by father's education level (2013)



Employment and financial hardship

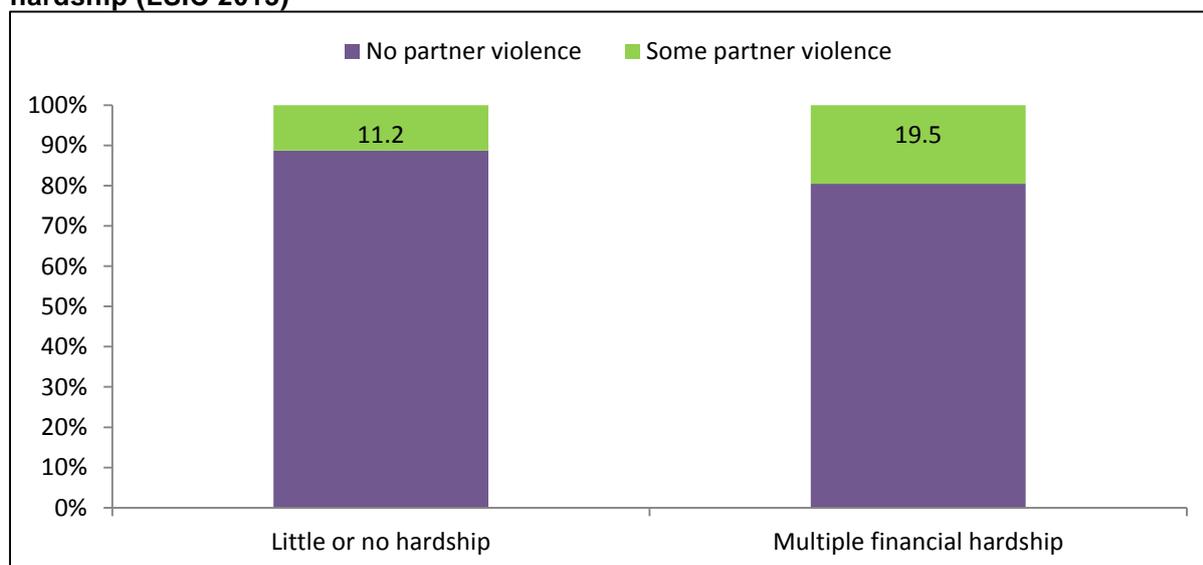
Partner violence was also significantly^{iv} related to employment for both fathers and mothers. In 2013, mothers who were not employed were more likely to be victims of partner violence than mothers who were employed. Mothers whose partner was not employed were twice as likely to experience domestic violence as mothers whose partner was employed (see Figure 7). This pattern was the same in 2010.

Figure 7: Proportions of families experiencing partner violence by mothers' and fathers' employment status (LSIC 2013)



Financial hardship in the household had a strong and significant relationship^y to occurrence of partner violence. Primary carers reported a range of types of financial hardship from a list of six types including items such as difficulty paying bills on time, going without meals and needing to pawn or sell goods in the past year. Families were grouped into two categories, those with little or no experience of financial hardship and those with two or more types—‘multiple financial hardship’. In 2010, 25 per cent of families experienced multiple financial hardship and in 2013, 20.7 per cent of families did. The relationship between hardship and partner violence was very significant in both of those years. In 2013, 19.5 per cent of families experiencing multiple financial hardship also experienced partner violence compared to 11.2 per cent of families experiencing little or no financial hardship (Figure 8). Similarly, in 2010, 19.9 per cent of families experiencing multiple financial hardship also experienced partner violence compared to 11.8 per cent of families experiencing little or no financial hardship.

Figure 8: Proportions of families experiencing partner violence by experience of financial hardship (LSIC 2013)



In 2010 and 2013, mothers were asked whether anyone in the family had a problem with drugs or alcohol. While there was a significant relationship between having a partner with a drug and

alcohol problem and partner violence in 2013, the relationship was not significant in 2010.^{vi} However, drugs and alcohol issues were only related to a small proportion of family violence reports. While a total of 12.7 per cent of respondents who were living with their partner reported the occurrence of partner violence in 2013, only 2.1 per cent of those living with their partner reported that their partner had an alcohol or drug problem.

Wave 3 included a special module asking about homelessness. Of the 122 respondents who identified as having been homeless in the past 5 years (8.7 per cent of the sample), the most common cause was domestic violence, affecting nearly 22.1 per cent of those who had been homeless.

Impact on children

The impact of family conflict and violence on children is an important topic for further research, and potentially affects many Indigenous children. In each wave of interviewing, parents are asked a range of questions about major life events. Approximately 20 per cent of families reported that their children had been upset by family arguments in the last year, and this proportion is consistent over time. Social and emotional difficulties were measured by the Strengths and Difficulties Questionnaire. In bivariate regression, children’s difficulties scores were 1.8 points higher if their parents reported them being upset by family arguments (a higher score indicates more difficulties). The results were highly significant (Table 1).

Compared to children with two parents whose mothers don’t report violent arguments, children whose parents do have violent arguments had social and emotional difficulties scores between 1 and 2 points higher (significant in Wave 3 but not in Wave 6) (Table 1).

Table 1: Relationship between children’s Strengths and Difficulties scores and their experience of conflict and violence in the home- bivariate regression analysis

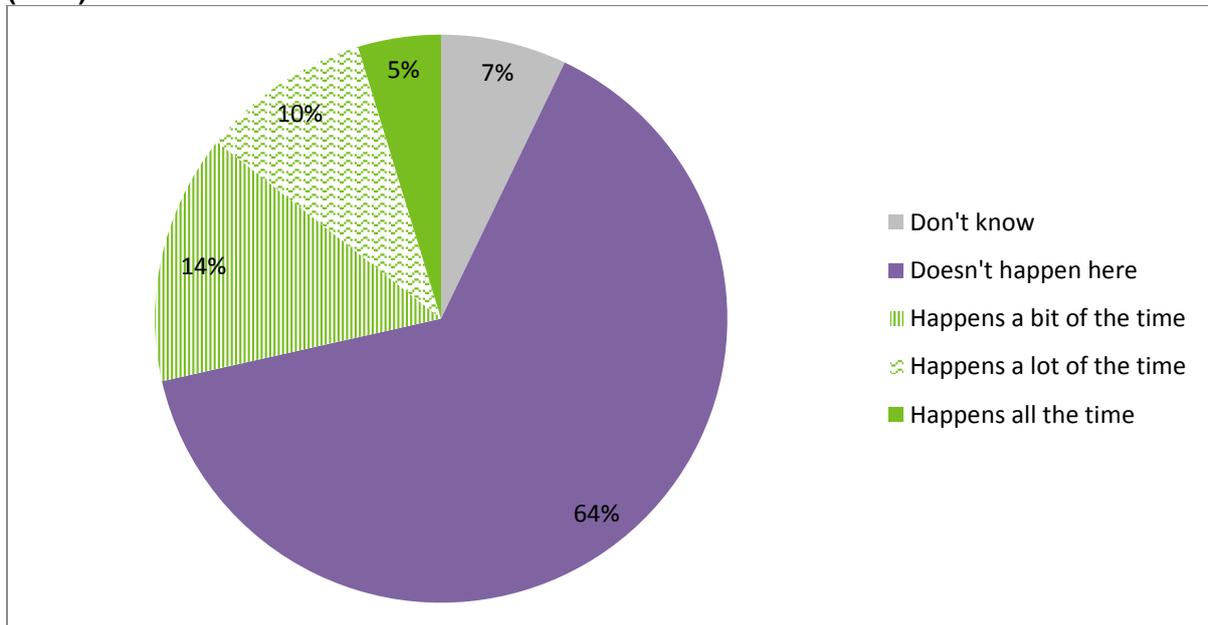
Outcomes	Wave 3	Wave 6
Child upset by family arguments	1.8 points higher***	1.8 points higher***
Parents have had violent arguments	2.1 points higher***	1.1 points higher

*** indicates significance at <0.001.

Perceptions of violence in the community

In 2013, parents were asked about the safety of their communities. One question focused on the question of whether family violence was a problem in their community (see Figure 9).

Figure 9: LSIC parents' perceptions of frequency of family violence in their community (2013)



Families who had reported having arguments that ended up with people pushing, hitting, kicking or shoving, were significantly^{vii} more likely to rate family violence as a big problem in their community (see Figure 10).

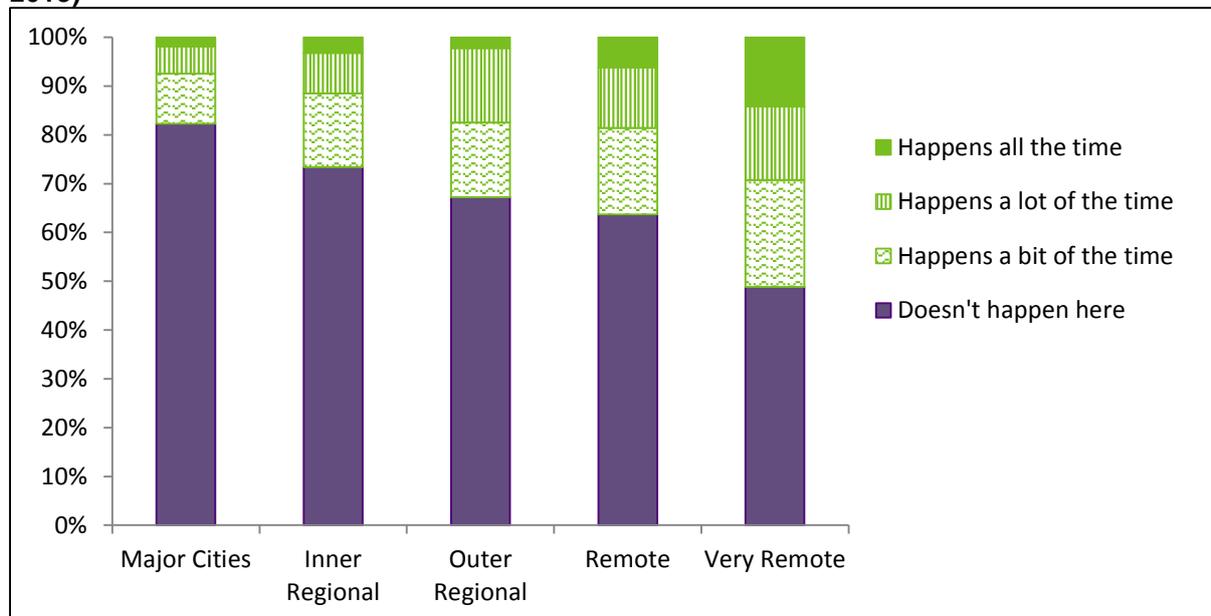
Figure 10: LSIC parents' perceptions of family violence in their community by personal situation (2013)



Geographic remoteness and community disadvantage

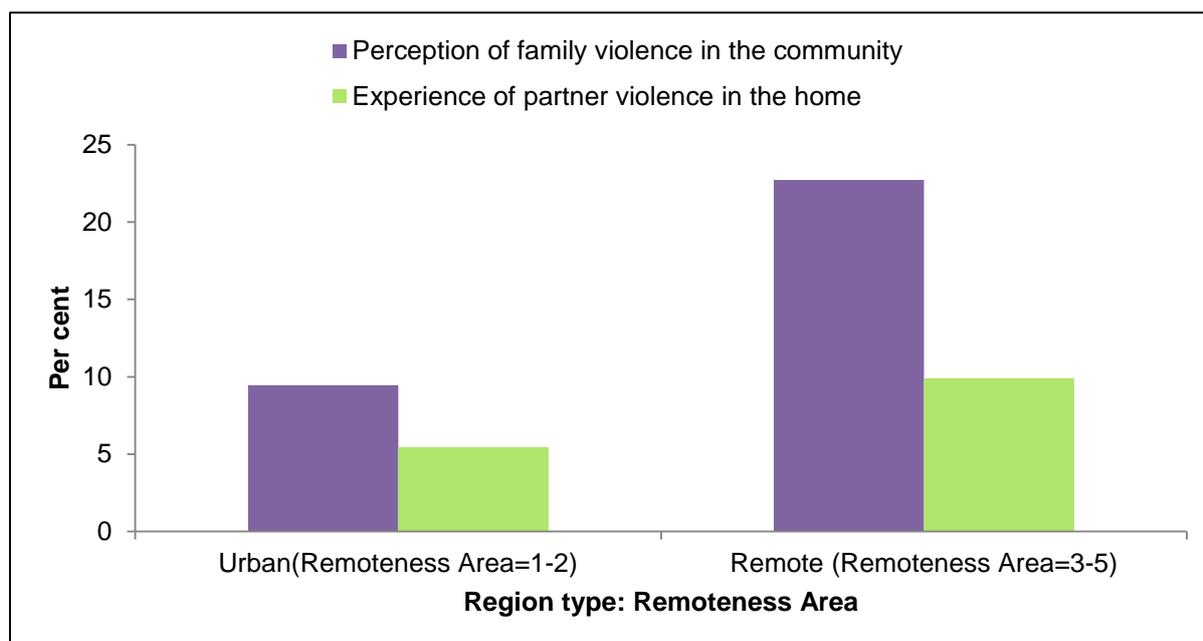
Families living in remote areas were significantly^{viii} more likely to rate family violence in the community as a big problem. For example, in very remote areas, 29.2 per cent of respondents said family violence was a big problem (happens all or a lot of the time); however, 17.5 per cent said it was a big problem in outer regional areas, and 7.5 per cent said it was a big problem in major cities (Figure 11).

Figure 11: Perception of family violence in the community by AGSC remoteness area (LSIC 2013)



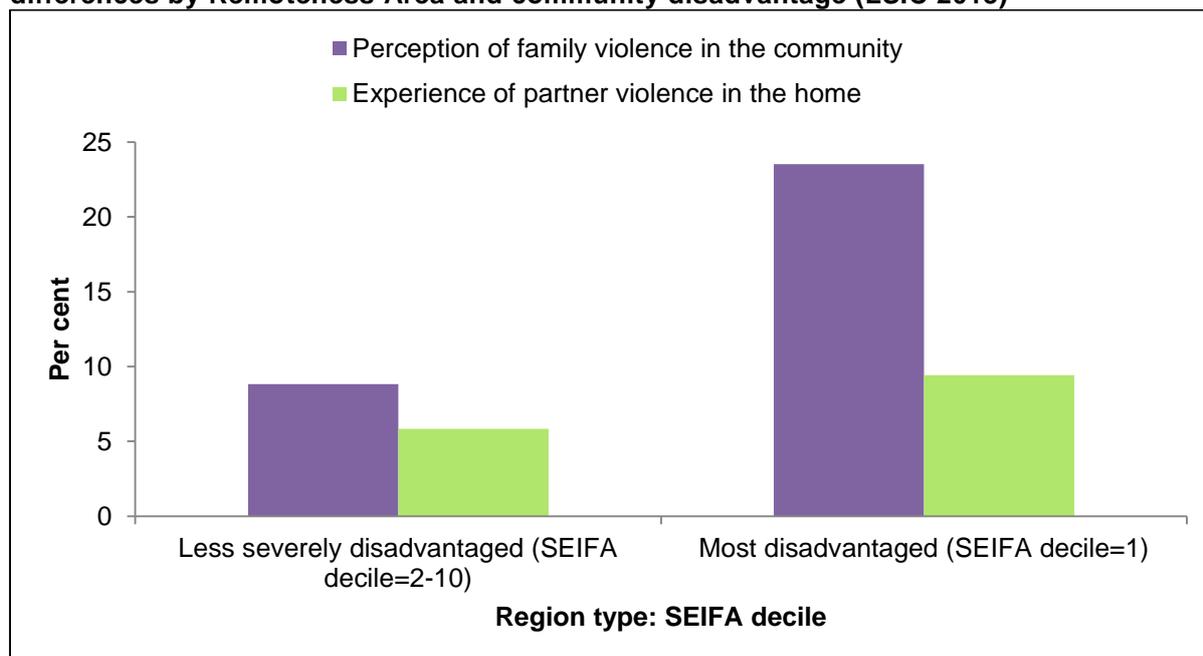
The relationship of remoteness area to personal experience of partner violence is complex, and partner violence doesn't increase incrementally with each level of remoteness in the same way as the perceptions of community violence increase. Instead, Major Cities share the same pattern with Inner Regional Areas, while Outer Regional, Remote and Very Remote areas share a pattern (see Figure 12).

Figure 12: Perception of family violence in the community and experience in the home— differences by Remoteness Area and community disadvantage (LSIC 2013)



Perceptions of family violence in the community were also significantly^x related to the Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (see Figure 13). Among families living in the lowest SEIFA decile (where 43.4 per cent of LSIC families live), 23.5 per cent identified family violence as a big problem in their community, while only 8.8 per cent of families living in higher deciles (2–10) said the same. In no other decile did the proportion of people who thought it a big problem exceed 12.3 per cent. Personal experience of partner violence in the home was also significantly related to the Index of Relative Socio-Economic Disadvantage. As shown in Figure 12, both the perception and the reality of occurrence of family violence were higher in the most disadvantaged communities, as they were in remote communities.

Figure 13: Perception of family violence in the community and experience in the home— differences by Remoteness Area and community disadvantage (LSIC 2013)



There is overlap between the remotest communities and the most disadvantaged communities (57 per cent of the sample living in the more remote communities are in the lowest SEIFA decile compared to 33 per cent of those living in the more urban communities). After controlling for other variables, the strongest single predictor of partner violence was remoteness, closely followed by SEIFA. Father's education also remained a significant predictor^x (Table 2).

Table 2: Association between geographic and personal characteristics and partner violence, logistic regression analysis, LSIC 2013.

Factor	Association with partner violence
Lowest SEIFA decile (0=deciles 2–10)	Nearly twice as likely*
Remote (0=urban/inner regional)	More than twice as likely**
Multiple financial hardship (0=zero or one type of hardship)	Nearly twice as likely^
Primary carer has no job	No relationship
Partner has no job	Nearly twice as likely^
Father less than year 10 education	More than twice as likely*

** significant at <0.01; * significant at <0.05; ^ significant at <0.1.

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Domestic violence in the Longitudinal Study of Australian Children (LSAC)

Helene Shin and Helen Rogers

Key statistics

- Approximately 6 per cent of mothers reported they had been afraid of their current partners. Those mothers were more likely to report higher levels of hostility and physical violence between them and their partners compared to mothers who had not been afraid of their partners.
- Compared to mothers in relationships not characterised by domestic violence (DV), mothers who reported they had been afraid of their partners reported lower levels of family cohesion. A similar pattern was found in the child's report on family cohesion.
- Compared to mothers not experiencing DV, mothers experiencing DV were much more likely to be in a DV situation in future years, but were also much more likely to be single in future years.
- Most of the demographic characteristics investigated were not related to the occurrence of DV. However, partners of mothers experiencing DV were more likely to have a long-term (that is, 6 months or more) medical condition(s) compared to their counterparts.
- Compared to mothers and their partners not experiencing domestic violence, those experiencing DV were more likely to suffer psychological distress.
- Mothers experiencing DV were also more likely to rate their neighbourhood as unsafe, to report less social support and to face higher numbers of stressful life events and more financial hardship.
- Mothers experiencing DV were more likely to report lower levels of parenting efficacy and their children were more likely to have social and emotional problems compared to their counterparts.

Domestic violence in the LSAC context

The impact of domestic violence is an important focus for investigation. This research summary reports the results of research looking at domestic violence in young families using data from *Growing Up in Australia: the Longitudinal Study of Australian Children* (LSAC).

LSAC has not collected direct measures of domestic violence but has included a couple of indicators^{xi} since Wave 1:^{xii}

1. How often is there anger or hostility between you and your partner? (collected since Wave 1)
2. How often do you have arguments with your partner that end up with people pushing, hitting, kicking or shoving? (collected since Wave 1)
3. Have you ever been afraid of your current partner? (collected since Wave 4)

As the last indicator, 'been afraid of partner', has previously been validated and recognised as a good DV indicator (e.g., Sohal et al. 2007^{xiii}), the following analyses employed this as a DV indicator and used data collected in Wave 5 in 2012 when children were 8–9 years (B cohort) and 12–13 years (K cohort). Table 1 indicates the numbers and percentages of mothers in each cohort by whether they had been afraid of their partner.

Table 1: Outline of DV grouping: frequency of reporting DV by child age^{xiv}

	Been afraid of partner?	Frequency	%
Mothers of children aged 8–9 (B Cohort)	Yes (DV group)	206	6.1
	No (Non-DV group)	3,170	93.9
	Total	3,376	100.0
Mothers of children aged 12–13 (K Cohort)	Yes (DV group)	199	6.4
	No (Non-DV group)	2,917	93.6
	Total	3,116	100.0

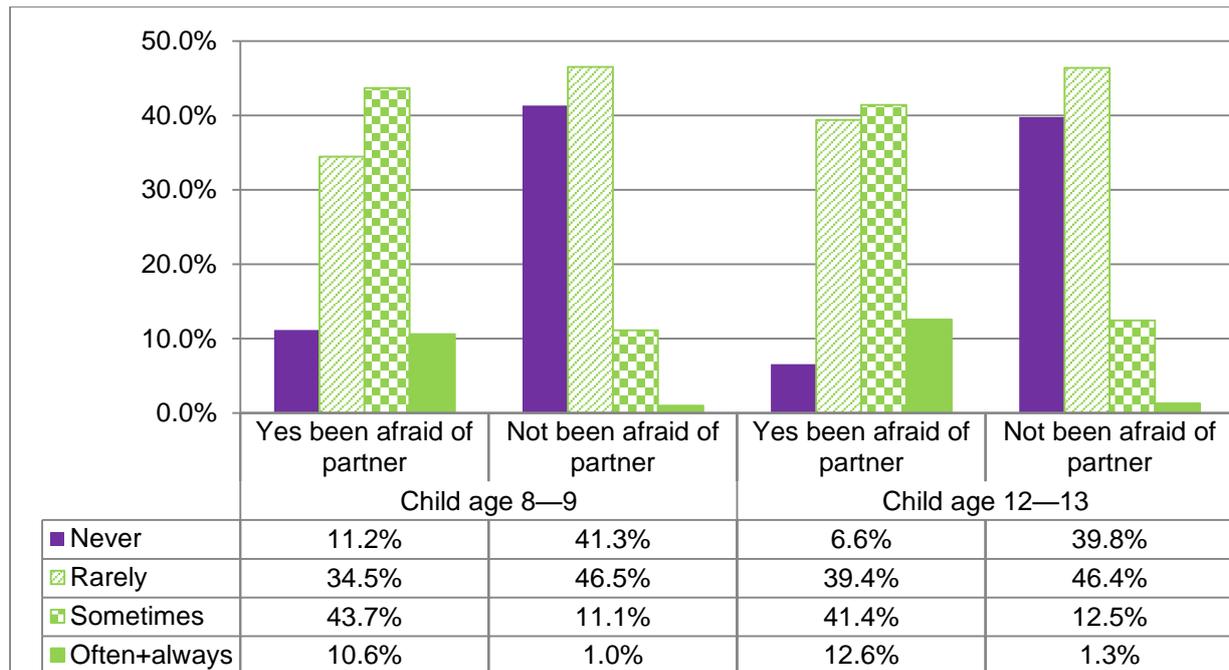
Summary of research findings

Prevalence

Figures 1 and 2 compare the DV group with the non-DV group in terms of partner hostility and physical violence.

Mothers in the non-DV group were less likely to report anger or hostility with their partners compared to those in the DV group in both cohorts. Mothers in the DV group were approximately ten times more likely to report that there was often or always anger or hostility between themselves and their partners (Figure 1).

Figure 1: How often is there anger or hostility between you and your partner? (mother report)



Even though the prevalence of arguments that ended in physical violence (Figure 2) is a lot lower than partner hostility, a similar pattern was identified: mothers in the non-DV group were less likely to report arguments that ended in physical violence between themselves and their partners than mothers in the DV group.

Figure 2: How often do you have arguments with your partner that end up with people pushing, hitting, kicking or shoving? (mother report)

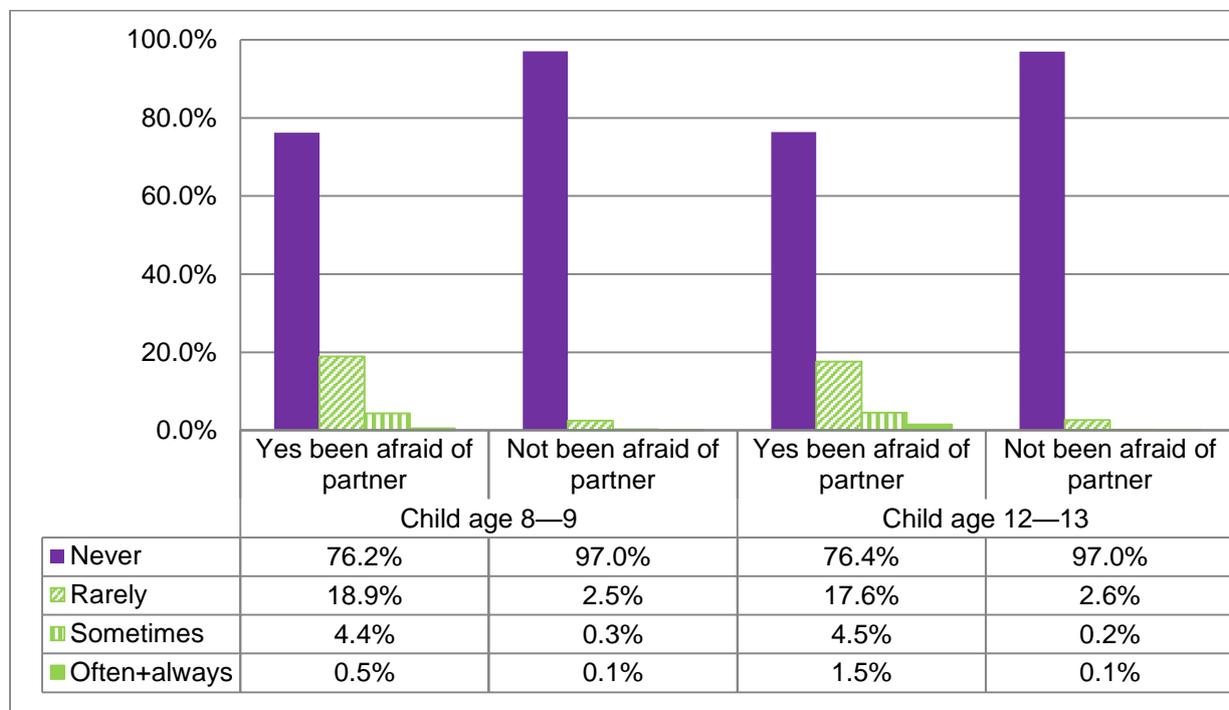
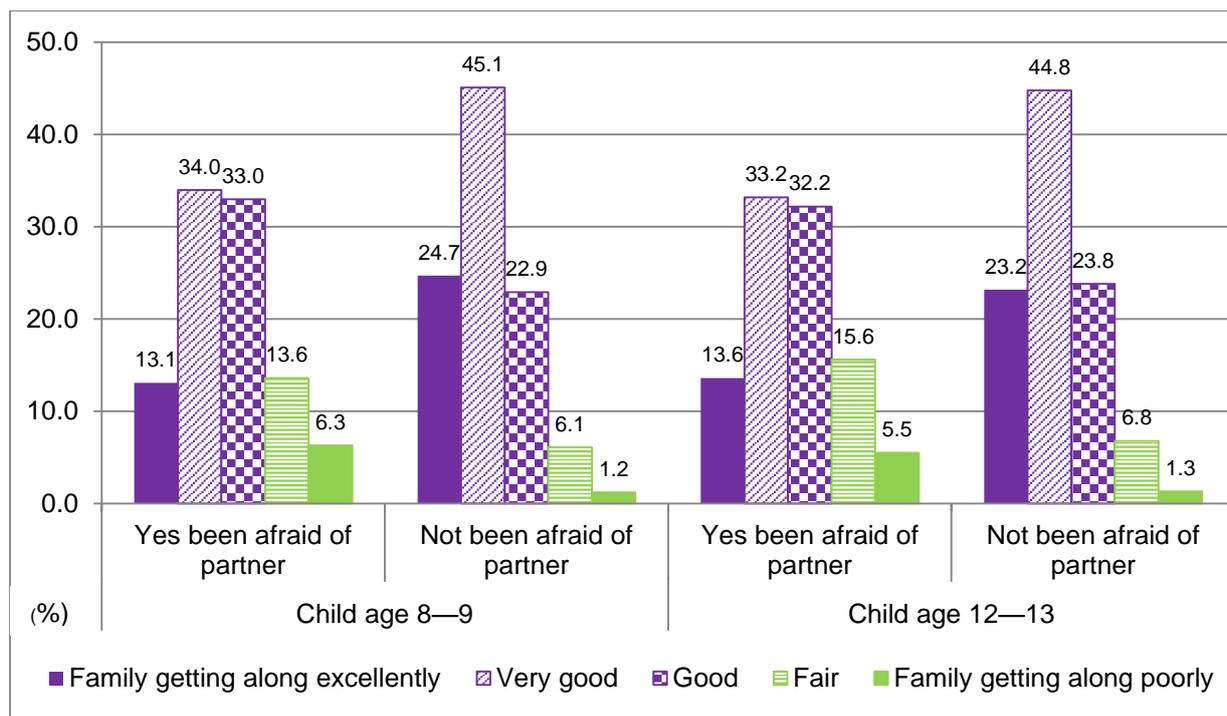


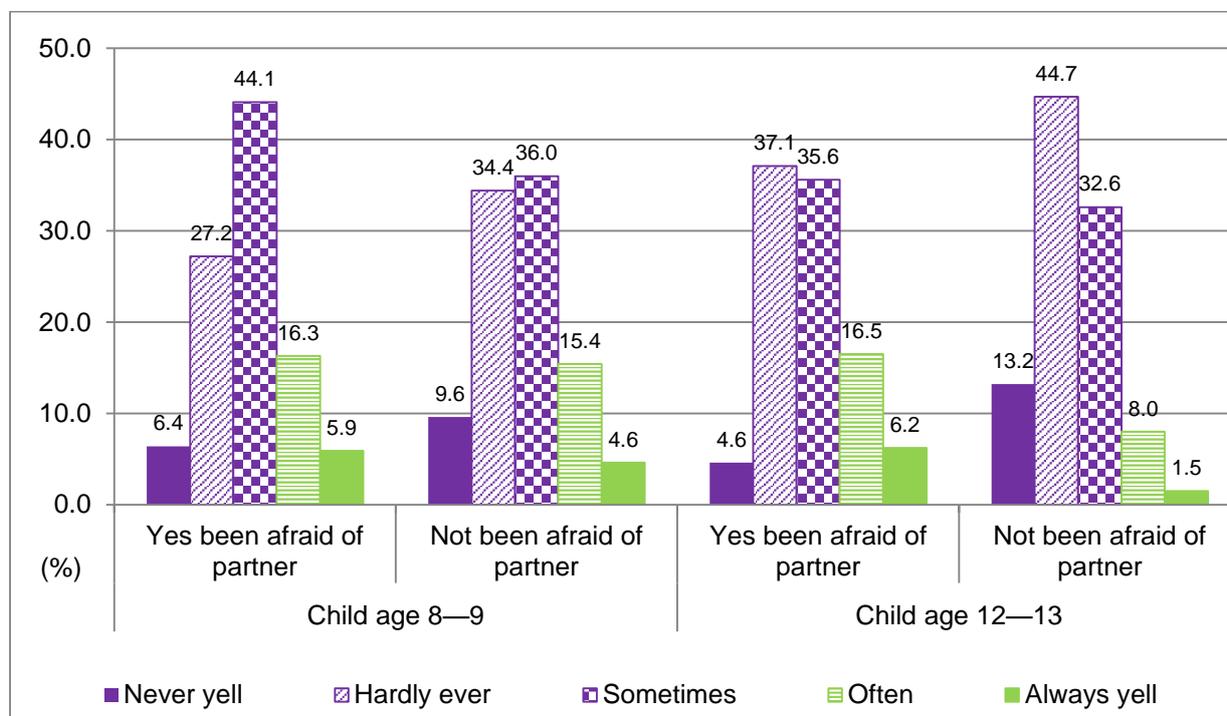
Figure 3 shows mothers' perceptions of their families' ability to get along with one another. Although the data did not identify the family members in conflict, it is likely to reflect the overall picture of family cohesion to some extent. Mothers in the DV group reported lower levels of family cohesion compared to their counterparts.

Figure 3: Family ability to get along with each other (mother report)



Violence or conflict between parents is likely to affect the child's views on their family cohesion. As shown in Figure 4, children (especially those aged 12–13 years) whose mothers were in the DV group were more likely to report that people in their families yelled at each other often or always compared to those whose mothers were in the non-DV group.

Figure 4: Family yell at each other (child report)

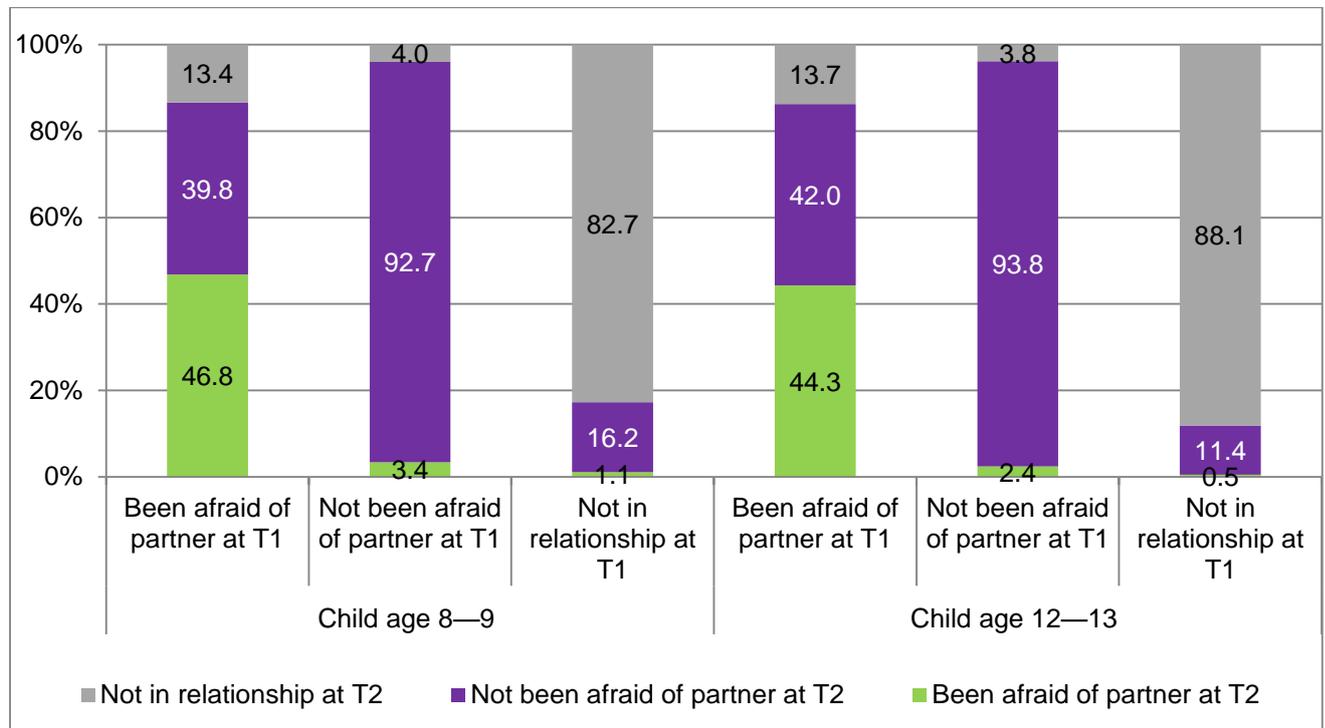


Relationship transition

Mothers who reported they had been afraid of their partners in Wave 4 (T1) were more likely to be single parents in Wave 5 (T2) (13%) compared to mothers who reported they had not been afraid of their partners in Wave 4 (4%), while the majority of mothers who had been afraid of their partners were still living with a partner in Wave 5 (Figure 5).^{xv} Among mothers with a study child aged 8–9 years, 47 per cent who reported they had been afraid of their

partners in Wave 4 also reported they had been afraid of their partners in Wave 5; on the other hand, 40 per cent of mothers reported they were not afraid of their partner at Wave 5. A similar pattern was found among mothers of children aged 12–13 years. However, it should be noted that some of these mothers may have had different partners in the two waves.

Figure 5: Relationship transitions from Wave 4 (T1) to Wave 5 (T2)



Demographic characteristics by DV groups

Demographic variables were investigated to see whether there were differences between the DV and non-DV groups. The groups were differentiated by some demographic and parental characteristics variables in bivariate analysis (Table 2). However, only mother’s and/or father’s medical conditions maintained its statistically significant effects on the prediction of a mother being in the DV group in multivariate regression analysis.

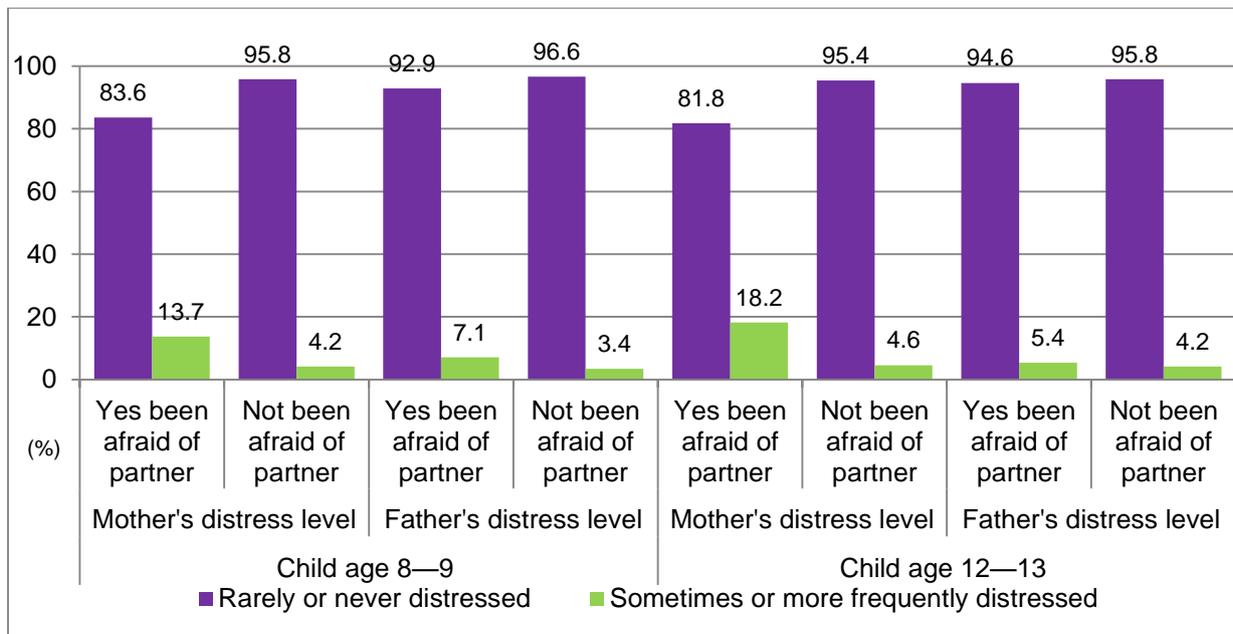
Table 2: Bivariate analysis of demographic characteristics by differentiation of DV and non-DV groups

Demographic and household characteristics	Child age 8–9 years (B cohort)	Child age 12–13 years (K cohort)
State of residence	No difference	No difference
Remoteness	No difference	No difference
Socio-economic status indicator ^{xvi}	Lower SES (marginal)	No difference
Number of siblings	No difference	No difference
Mother's age	No difference	No difference
Father's age	No difference	No difference
Mother's country of birth	No difference	No difference
Father's country of birth	No difference	No difference
Mother's year of arrival in Australia	No difference	No difference
Mother's year of arrival in Australia	No difference	No difference
Mother's language spoken at home	No difference	No difference
Father's language spoken at home	No difference	No difference
Child's language spoken at home	No difference	No difference
Mother's Indigenous status	No difference	No difference
Father's Indigenous status	More likely to be Indigenous	No difference
Mother's education level	Fewer years in schooling	No difference
Father's education level	Fewer years in schooling (marginal)	No difference
Mother's employment	No difference	No difference
Father's employment	More likely to be not employed	More likely to be not employed
Mother's medical condition ^{xvii}	More likely to have medical condition(s) (marginal)	More likely to have medical condition(s)
Father's medical condition ^{xviii}	More likely to have medical condition(s)	More likely to have medical condition(s)

Mental health and wellbeing^{xix}

Kessler 6, a standardised and validated measure of non-specific psychological distress, was used to investigate whether there were differences in mothers' and fathers' mental health in the DV and non-DV groups. The level of psychological distress of mothers and fathers was different between the two groups (Figure 6). Mothers in the DV group were three times more likely to report high levels of psychological distress compared to those in the non-DV group for both age groups. Partners of mothers in the DV group were twice as likely to report high levels of psychological distress when children were aged 8–9 years but only a small difference was found for fathers of children aged 12–13 years.

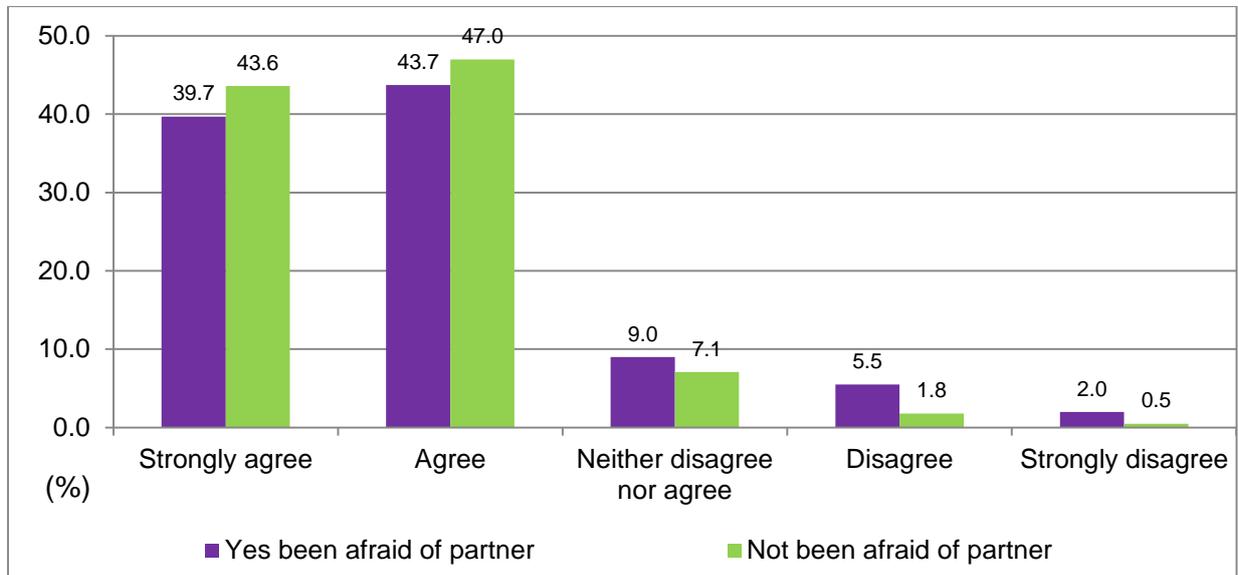
Figure 6: Mother's and father's mental distress level (mother & father report)



Neighbourhood safety

Figure 7 shows that mothers of children aged 12–13 years in the non-DV group were more likely to agree with the statement, “This is a safe neighbourhood” than those in DV group. Data is only available for mothers of children aged 12–13 years (K cohort).

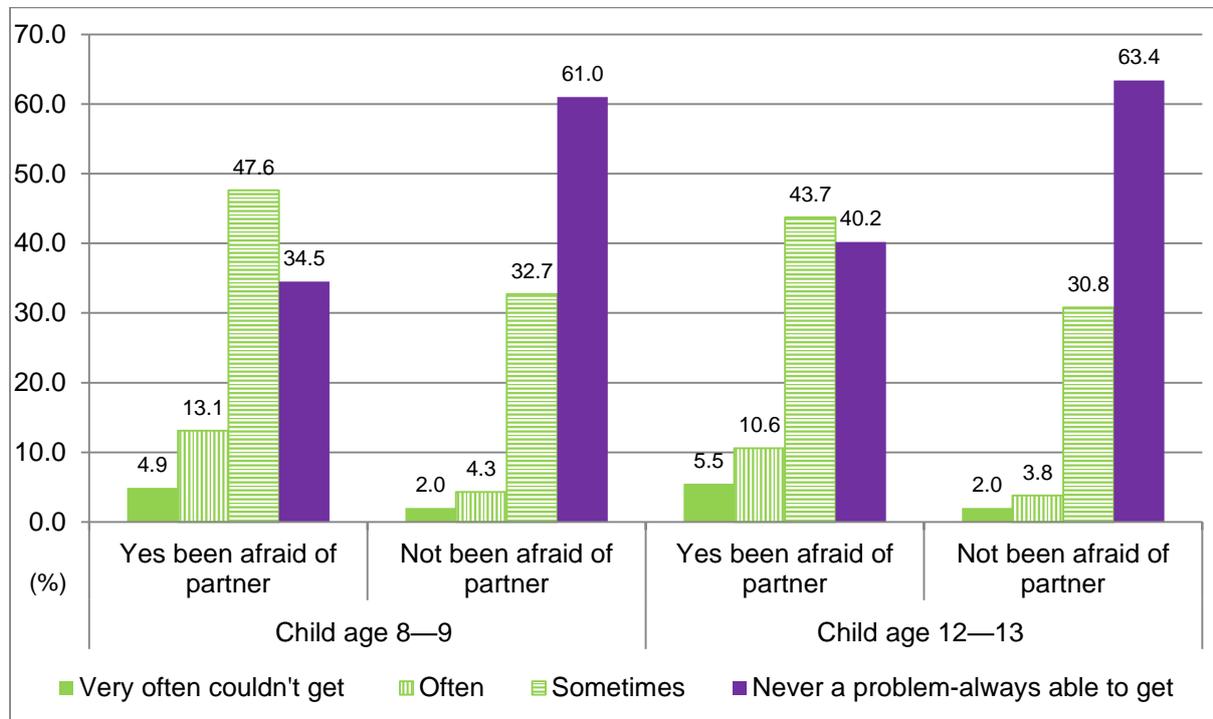
Figure 7: Neighbourhood safety perception (mother report, Child age 12—13, K cohort)



Social support

Differences were also found regarding social support. Mothers in the DV group were more likely than those in the non-DV group to report that they could not get support when they needed it (Figure 8).

Figure 8: Need support but could not get it (mother report)



Stressful life events and financial hardship

Mothers in the DV group were also more likely to experience multiple stressful life events (e.g., lost job, relationship break-down, moving house etc. (Figure 9) and financial hardship (e.g., was not able to pay bills, went without meals etc.) (Figure 10) than those in the non-DV group.

Figure 9: Major life events last 12 months (mother report)

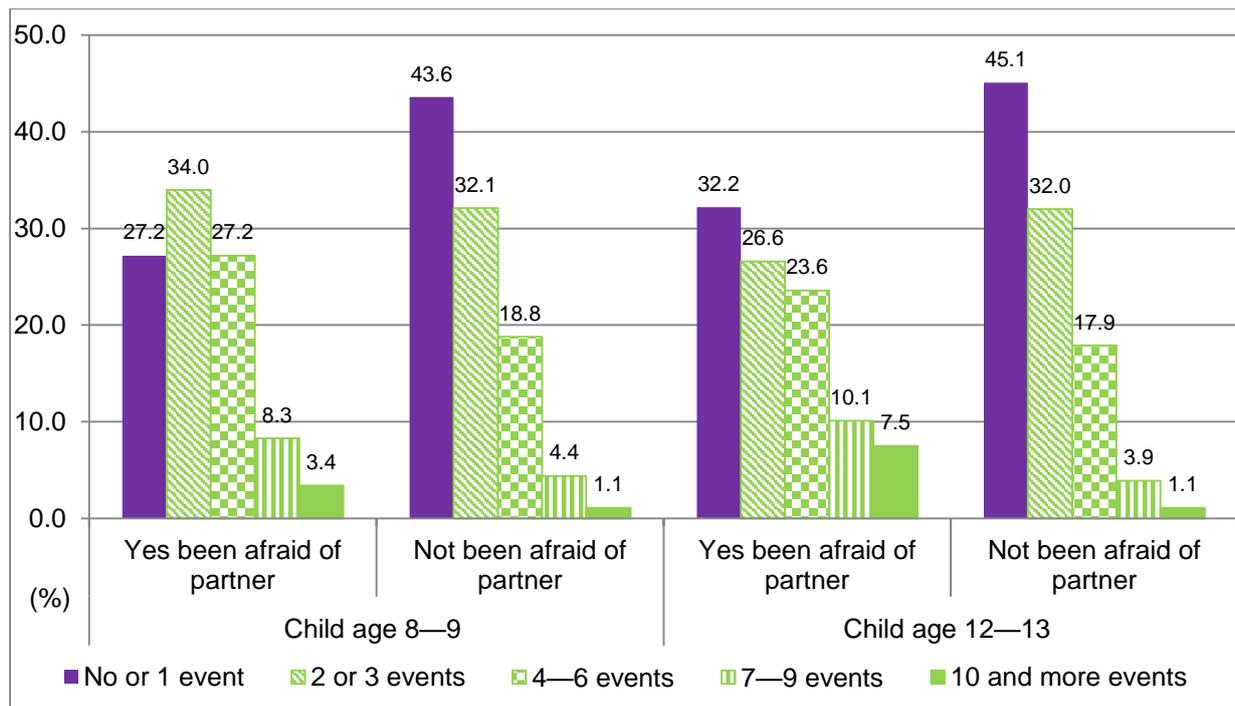
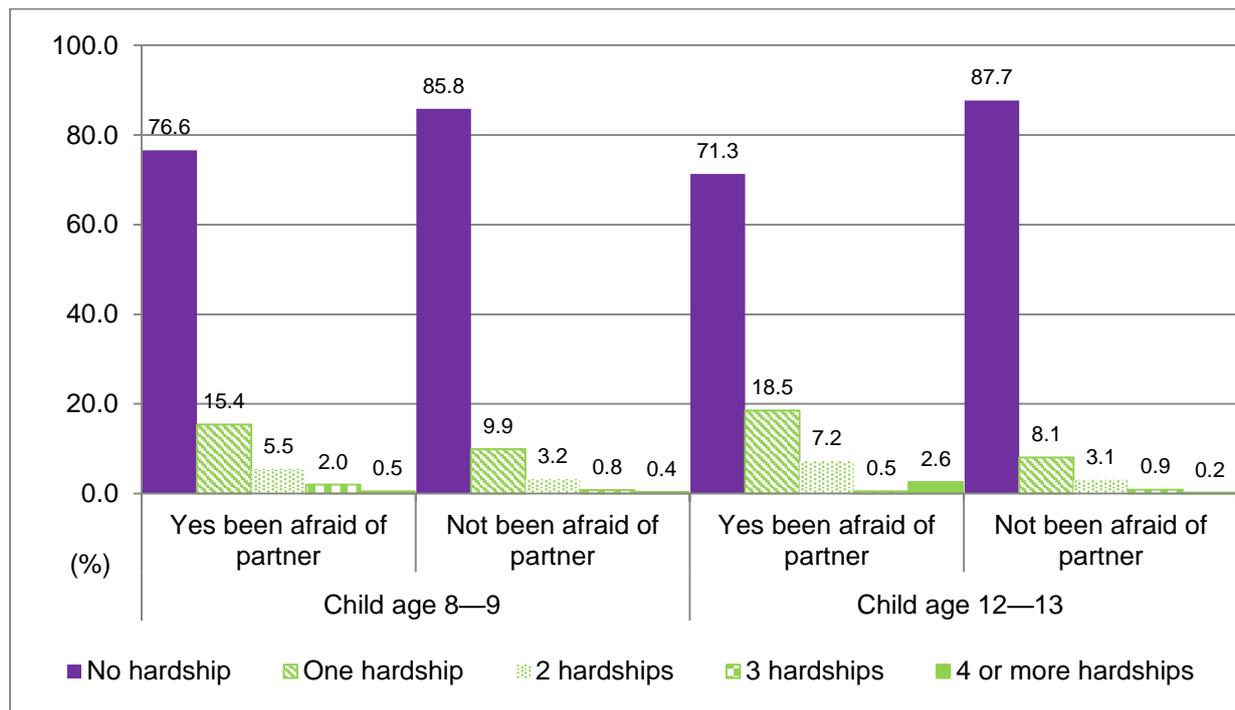


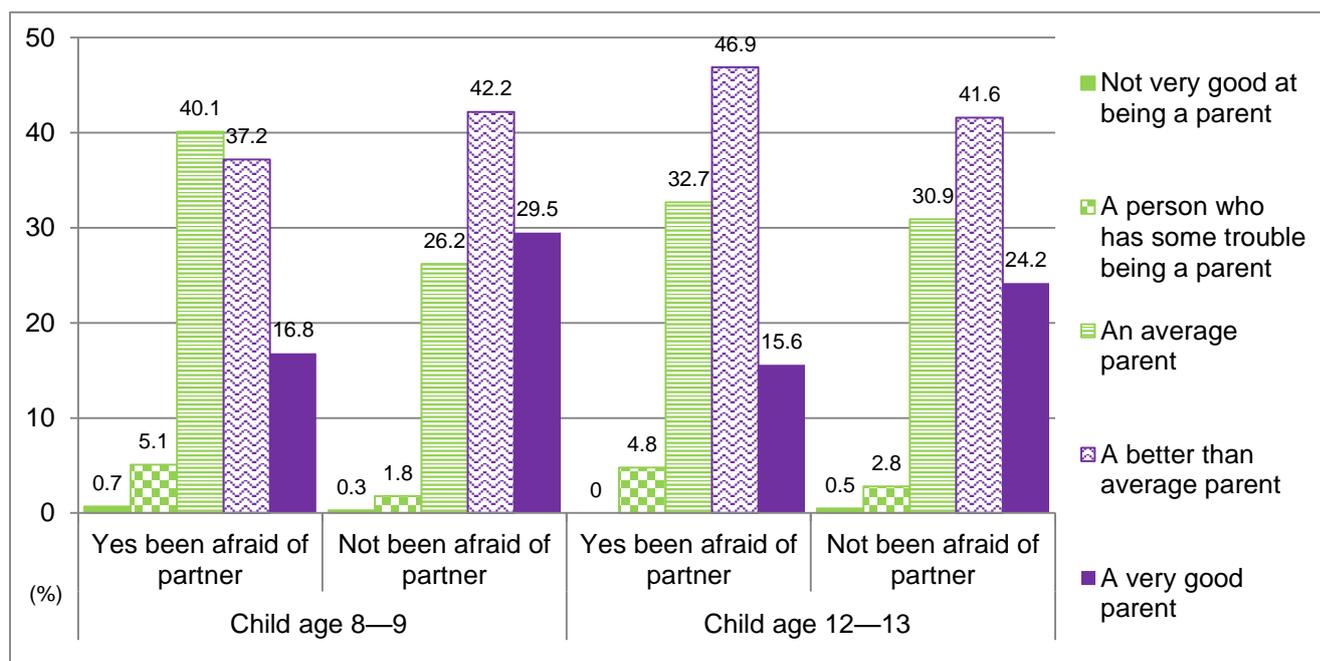
Figure 10: Financial hardship last 12 months (mother report)



Parenting efficacy and child's outcome

Mothers in the DV group were more likely to perceive themselves negatively as parents compared to mothers not experiencing DV (Figure 11).

Figure 11: Parenting self-efficacy (mother report)



Children’s social and emotional difficulties (measured using the Strength and Difficulties Questionnaire, SDQ, Goodman 2004)^{xx} were compared for the DV and non-DV groups. While no difference was found in the children’s pro-social scores, statistically significant differences were found in the total behavioural problems score between the two groups (Table 3). Children in the DV group were more likely to have higher problem scores at both 8-9 and 12-13 years.

Table 3: Comparing means of child’s total behavioural problem scores for children of mothers DV and non-DV groups using independent samples t-tests (mother report)

	Been afraid of partner?	Total problem score mean	SD	t	Sig.
Child age 8–9 years	Yes (DV group)	8.89	5.552	3.521	p<0.001
	No (non-DV group)	7.56	5.236		
Child age 12–13 years	Yes (DV group)	9.07	6.566	4.563	p<0.001
	No (non-DV group)	6.90	5.226		

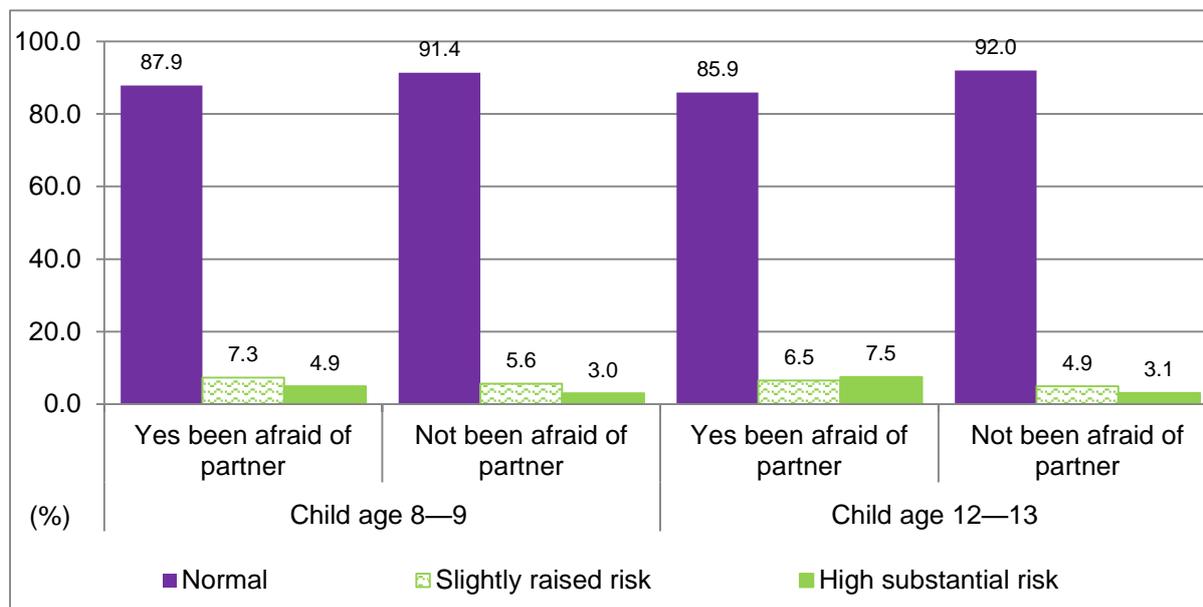
Note: SD=standard deviation; Sig.=significance.

In Figure 12, the child’s total behavioural problem score was divided into three categories:

1. normal
2. slightly raised risk (may reflect clinically significant problems)
3. high substantial risk (likely to indicate clinically significant problems).

The negative effect of mothers being in the DV group was more pronounced for children aged 12–13 years. Children of mothers in the DV group were twice as likely to be in the high substantial risk group when they reached pre-teen years.

Figure 12: Child's total problem scores by risk groups (mother report)



Conclusion

The results show that the majority of LSAC mothers were free from hostile arguments and physical violence in the home. Aligned with the existing literature, the current research supports the fact that domestic violence has complex associations with individuals, children's outcomes, communities and society. When mothers were in domestic violence situations, they were more likely to experience poorer health outcomes as well as multiple stressful life events and financial hardship, and to have more negative views on community safety and social support than their counterparts. There were no differences in most demographic characteristics analysed for mothers experiencing domestic violence and those who were not. However, of the few differences observed, mothers with partners who had medical conditions and were unemployed were more at risk of experiencing domestic violence. Children of mothers experiencing domestic violence also have higher rates of social and emotional problems than those with mothers did not experience domestic violence.

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ⁱ Total sample here (881) are participants who responded to relationship question in both 2010 and 2013. Those with missing data were excluded from this analysis as were cases where the primary carer changed.

ⁱⁱ Chi² test, significance level set at 0.05.

ⁱⁱⁱ The terms 'mothers' and 'fathers' are used in this article to refer to the female parent and her male partner respectively as approximately 95 per cent of the female primary carers are the mother of the study child. The small number of same sex couples and couples with a male as the primary carer are excluded from analysis relating to 'mothers' and 'fathers' characteristics, but included in all other analyses in this paper relating to LSIC.

^{iv} Chi² test, significance level set at 0.05.

^v Chi² test, significance level set at 0.05.

^{vi} Chi² test, significance level set at 0.05.

^{vii} Chi² test, significance level set at 0.05.

^{viii} Chi² test, significance level set at 0.05.

^{ix} Chi² test, significance level set at 0.05.

^x Method used was logistic regression restricted to LSIC couples in 2013 (n=580), in which occurrence of partner violence is the outcome variable, and with SEIFA Index of Relative Socio-

Economic Disadvantage, remoteness, financial hardship, parent and partner employment status and partner education as the predictors.

^{xi} In this analysis, mothers' reports were used because fathers' overall response rate was lower than mothers (around 70%) and their responses on DV indicators were not high enough to pursue further analyses.

^{xii} Data on domestic violence indicators were only collected from parents who had live-in partners. The proportion of LSAC parents who did not have live-in partners at the time of the interview varied across waves between 9 and 17 per cent.

^{xiii} Sohal et al (2007), 'The sensitivity and specificity of four questions (HARK) to identify intimate partner violence: a diagnostic accuracy study in general practice', *BMC Family Practice*, vol. 8, p. 49.

^{xiv} All tables, figures and output texts from analyses of the LSAC data in this paper were statistically significant at least at the .05 level of alpha, otherwise noted. Also, unweighted data was used for the following analyses except demographic characteristics, which are analysed later in the paper. Weighting changes the results by 1 or 2 per cent only for representative samples.

^{xv} Among mothers in a relationship across 2 waves (T1 and T2), a minority of mothers were with new partners in T2 (1.5% and 2.6% of mothers who were in a relationship in both waves, B and K cohorts respectively).

^{xvi} Wave 4 SEP (socioeconomic position) was used as a SES (socioeconomic status) indicator

^{xvii} Mothers in the DV group were more likely to report having restrictions in their everyday activities and chronic pain, other unspecified physical conditions, nervous conditions or other long-term conditions, etc.

^{xviii} Partners of mothers in the DV group were more likely to report having restrictions in their everyday activities, mental illness, limited use of arms and fingers, nervous conditions, head injuries or other unspecified physical conditions, etc.

^{xix} Other household and parental characteristics were also investigated. No difference was found in mother's/father's drinking behaviours and homelessness experiences between DV and non-DV groups.

^{xx} Goodman R (1997) The Strengths and Difficulties Questionnaire: A Research Note. *Journal of Child Psychology and Psychiatry*, 38, 581-586.

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