



Domestic and family violence

Domestic and family violence is a series of behaviours between either family members, or current or former intimate partners which can:

- include but not be limited to physical violence, sexual assault, verbal or emotional abuse, controlling behaviour, stalking, technology facilitated abuse, financial abuse and elder abuse;
- instill fear in the victim;
- is an attempt by one party to gain and retain power over another; and
- include limiting access to finances, exclusion from contacting family and friends, demeaning and humiliating behaviour, and any threats of injury or death directed at the victim or their children, family, friends or pets (including companion or therapy animals).¹

It is the position of the Australian Nursing and Midwifery Federation that:

1. Domestic and family violence is criminal conduct. It damages the physical and psychological health, wellbeing and future life opportunities of victims.
2. Violent behaviour is the responsibility of the perpetrator. Trigger factors such as alcohol and other drug abuse, stress, emotional trauma or provocation by the victim do not justify violent behaviour. While research into violence, and provision of perpetrator programs is supported, funding and resources should be in addition to that provided for adult and child survivors of domestic and family violence.
3. Victims of domestic and family violence include adults or children directly involved, or children witnessing or caught up in violence perpetrated against an adult in their presence. In many jurisdictions nurses and midwives have a responsibility for identification and reporting potential for harm, in such cases.²
4. Domestic and family violence is acknowledged as workplace hazard where the act or the impact it has on an individual/family extends beyond the home, and into the workplaces of nurses, midwives and assistants in nursing.³ Education regarding domestic and family violence should be provided for nurses and midwives during their undergraduate education programs and continuing education made available for all nurses, midwives and assistants in nursing* in the workforce.
5. Nurses and midwives have an important role in identifying people who are victims of domestic and family violence and facilitating their access to assistance and support, while respecting their privacy. Screening should occur in conjunction with an effective system of support following disclosure of domestic and family violence.^{4, 5}

*The term assistant in nursing also refers to care workers (however titled)



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6. An empowerment model of intervention is supported. The primary orientation of this response is the prevention of domestic and family violence and the safety and ongoing protection of the victim. Interventions should include medical, legal, social and cultural issues.
7. Nurses and midwives should be involved in developing and implementing organisational policies and protocols to support an effective strategy for people experiencing domestic and family violence and for all staff supporting victims.
8. Facilities should have policies and procedures to ensure that risks associated with patient/visitors exposure to domestic and family violence are appropriately managed within the health facility.
9. Facilities must recognise and act upon the risks to the physical and psychological health and safety of nurses and midwives when domestic and family violence perpetrators commit violence within the health facility.
10. When domestic and family violence has been identified, appropriate measures must be made to ensure the health and safety of community nurses and midwives providing care.
11. In relation to nurses, midwives and assistants in nursing themselves being the victim of domestic and family violence:
 - a) It is important that workplaces develop supportive and non-judgemental environments in which employees feel safe to discuss any domestic and family violence issues they may be facing.
 - b) Nurses and midwives may recognise their colleagues experiencing domestic and family violence, and, with the support of the workplace, be able to provide appropriate support and assistance. Their colleagues attendance or performance at work may suffer as a result of experiencing domestic and family violence.⁶
 - c) Health and aged care facilities, and other organisations which employ nurses, midwives and assistants in nursing, should develop guidelines and protocols which detail the appropriate action to be taken in the event that a nurse, midwife or assistant in nursing employee reports domestic and family violence.
 - d) Health and aged care facilities, and other organisations which employ nurses, midwives and assistants in nursing, should educate, train and instruct staff on the guidelines and protocols which detail the appropriate action to be taken in the event that a nurse, midwife or assistant in nursing employee reports domestic and family violence.
 - e) The employer and responsible line management must maintain confidentiality at all times in relation to any report of domestic and family violence by a nurse, midwife or assistant in nursing. Confidentiality is the key to those experiencing domestic and family violence having the confidence to seek support in the workplace.
 - f) Comprehensive training should be provided to all managers and human resource advisers on how to implement the protocols/guidelines and maintain confidentiality at all times.



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- g) A nurse, midwife or assistant in nursing should be provided with 20 days of paid family and domestic violence leave per year in addition to all other leave.
- h) A nurse, midwife or assistant in nursing who supports a person experiencing domestic and family violence should be entitled to access paid domestic and family violence leave in order to accompany the person to legal appointments, to court, to receive health care, to assist with relocation or other safety arrangements, or to assist with childcare.
- i) In order to provide support to a nurse, midwife or assistant in nursing employee experiencing domestic and family violence, and to provide a safe work environment to all employees, health and aged care facilities should approve any reasonable request from an employee experiencing domestic and family violence for:
 - i. changes to their span of hours and/or shift patterns;
 - ii. job redesign or changes to duties;
 - iii. relocation to suitable employment within the workplace;
 - iv. a change to their telephone number or email address to avoid harassing contact;
 - v. any other appropriate measure including those available under existing provisions for family friendly and flexible work arrangements;
 - vi. provision of appropriate security measures to prevent harassment or intrusion into the workplace;
 - vii. privacy and confidentiality (in relation to contact details).⁷
- j) A nurse, midwife or assistant in nursing employee experiencing domestic and family violence should be referred to appropriate domestic violence services and support.

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References

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