Fact sheet 5: ACT Key Risk Factors

Descriptions of the risk factors are drawn from MARAM, the ANROWS National Risk Assessment Principles for family and domestic violence, and the Northern Territory Domestic and Family Violence Risk Assessment and Management Framework.

Risk factor	Description
Recent, pending or planned separation	Women are most at risk of being killed or seriously harmed during and/or immediately after separation.
	The NSW Domestic Violence Death Review Team recorded that 65% of female victims killed by a former partner between 2000 and 2014 had ended their relationship within three months prior to the homicide.
Assaulted while pregnant or with a new baby	Violence often begins when women are pregnant and where it was previously occurring, it often escalates in frequency and severity.
	Family violence during pregnancy is regarded as a significant indicator of future harm to the woman and child victim. This factor is associated with control and escalation of violence already occurring.
Escalation in severity and/or frequency	The escalation in frequency and severity of violence over time is linked to lethality and often occurs when there are shifts in other dynamic risk factors, such as the attempts by the victim to leave the relationship.
	Dwyer and Miller (2014) found that police investigations and family, criminal or civil court proceedings can trigger an escalation in the aggressive and violent behaviour of the perpetrator and heighten risk to the partner and children. Transition points such as this should be treated with great caution.
Strangulation and/or choking	Strangulation is one of the most lethal forms of intimate partner violence.
	The seriousness of strangulation as an indicator of future lethality is often misidentified, or not responded to proportionately, as a consequence of the often minimal visibility of physical injury. However, many victims suffer internal injuries which may result in subsequent serious or fatal harm.
	Most perpetrators do not strangle to kill but to show that they can kill. Non-lethal strangulation is a powerful method of exerting control over victims. Through credible threat of death, perpetrators coerce compliance.

Risk factor	Description
Coercive control	Elliott (2017) found through a synthesis of key empirical research, that coercive control is a gendered pattern of abuse, and is the primary strategy used to coerce and exercise control over female survivors by a current or former male partner. Understanding violence as coercive control, highlights that it is ongoing, cumulative, chronic and routine. Coercive and controlling patterns of behaviours are particularly dangerous and can heighten the risk of lethality, in contexts where other high-risk factors are
	present, such as attempts by the victim to leave the relationship. A perpetrator's obsessive and/or excessive behaviour when experiencing jealousy is often related to controlling behaviours founded in rigid beliefs about gender roles and ownership of victims and has been linked to violent attacks.
	Coercive control can include isolating the victim from family and friends.
Perpetrator has threatened to harm or kill the victim and/or the children	Perpetrators who threaten to harm or kill their partner or former partner, themselves or others including their children, are particularly dangerous. Campbell et al. (2003) found that women whose partners threatened them with murder were 15 times more likely than other women experiencing abuse to be killed.
History of domestic and family violence	The most consistently identified risk factor for intimate partner lethality and risk of re-assault is the previous history of violence by the perpetrator against the victim.
Sexual violence	Intimate partner sexual violence (IPSV) is a uniquely dangerous form of exerting power and control due to its invasive attack on victims' bodies and the severity of mental health, physical injury and gynaecological consequences. Campbell et al. (2003) found that IPSV was the strongest indicator of escalating
	frequency and severity of violence.
	Heenan (2004) found that Australian domestic violence workers believe that 90–100% of their female clients have experienced IPSV.
	More than other factors, IPSV is under-reported by victims. Shame and stigma caused by commonly held assumptions that discussing sex or sexual assault within relationships is 'taboo', are significant barriers to seeking help for IPSV.

Description
Stalking behaviours (repeated, persistent and unwanted) including technology-facilitated surveillance, GPS tracking, interferences with property, persistent phoning/texting and contact against court order conditions, increases risk of male-perpetrated homicide.
The vast majority of perpetrators of stalking, and the most dangerous, are intimate partners of the victim, and not strangers.
Stalking when coupled with physical assault, is strongly connected to murder or attempted murder. Stalking behaviour and obsessive thinking are highly related behaviours. Technology-facilitated abuse, including on social media, surveillance technologies and apps is a type of stalking.
A weapon is defined as any tool or object used by a perpetrator to threaten or intimidate, harm or kill a victim or victims, or to destroy property. Perpetrators with access to weapons, particularly guns and knives, are much more likely to seriously injure or kill a victim or victims than perpetrators without access to weapons.
Breaching a court order, conditions of parole or any other protection order, indicates a disregard for the law and authority. Such behaviour is a serious indicator of increased risk of future violence.
Breaching an intervention order, or any other order with family violence protection conditions, indicates the accused is not willing to abide by the orders of a court. It also indicates a disregard for the law and authority. Such behaviour is a serious indicator of increased risk of future violence.
Cruelty and harm directed to pets and other animals can indicate risk of future or more severe violence and are often used as a control tactic by perpetrators.
Perpetrators with a serious problem with illicit drugs, alcohol, prescription drugs or inhalants can lead to impairment in social functioning and creates an increased risk of family violence. This includes temporary drug-induced psychosis.
Threats or attempts to self-harm or commit suicide are a risk factor for murder–suicide. This factor is an extreme extension of controlling behaviours.
Victims know their perpetrator best and can often accurately predict their own level of safety and risk, including the risk of re-assault. Practitioners need to be aware that sometimes victims may minimise their risk as a result of the perpetrators abuse tactics which can create fear, confusion or denial.