



Inquiry into the relationship between domestic, family and sexual violence and suicide

Submission to the Standing Committee on Social
Policy and Legal Affairs

February 2026

Acknowledgements

We acknowledge the Traditional Owners of Country, recognise their continuing connection to land, water, and community, and pay respect to Elders past and present. Sovereignty was never ceded.

We acknowledge the victim-survivors of domestic, family, and sexual violence who we work with and their voices and experiences which inform our advocacy for justice, equality, and safety for women.

About Women's Legal Services Australia

Women's Legal Services Australia (**WLSA**) is the national peak body for 13 specialist Women's Legal Services in each state and territory across Australia, including two First Nations Women's Legal Services. We provide a national voice for Women's Legal Services to influence policy and law reform, and advocate to increase access to gender-specialist, integrated legal services for women.

About Women's Legal Services

Women's Legal Services provide high quality free legal services for women and non-binary people, including legal advice and representation, support services and financial counselling, community legal education, training for professionals, and engage in advocacy for policy and law reform. Some Women's Legal Services have operated for more than 40 years. WLSA members include:

- Wirringa Baiya Aboriginal Women's Legal Centre NSW
- First Nations Women's Legal Service Queensland
- Top End Women's Legal Service
- Central Australian Women's Legal Service
- Katherine Women's Information and Legal Service
- North Queensland Women's Legal Service
- Women's Legal Service Victoria
- Women's Legal Service Tasmania
- Women's Legal Service NSW
- Women's Legal Service WA
- Women's Legal Service SA
- Women's Legal Service Queensland
- Women's Legal Centre ACT

We note that Wirringa Baiya Aboriginal Women's Legal Centre has also provided a submission to this inquiry, which makes a range of important recommendations focused on Aboriginal and Torres Strait Islander women.

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Executive Summary

Domestic, family and sexual violence is a clear and significant driver of suicide risk in Australia.

System failures across legal, policing and service responses compound the harm of domestic, family and sexual violence, leaving victim-survivors without the safety, support and accountability they need. Addressing these system failures and gaps requires accurate data, integrated systems and coordinated action across jurisdictions.

Although recent commissions and inquiries have led to some improvements in legal system responses to gendered violence, they have not fully captured the scope or severity of domestic, family and sexual violence-related suicide risk, and implementation has been patchy across states and territories. Some health-focused inquiries have examined this connection, but others have not, resulting in an inconsistent national picture of how violence, trauma and suicide intersect.

This Parliamentary Inquiry is uniquely placed to address these gaps. It can establish a comprehensive, evidence-informed approach that recognises the experience of victim-survivors of violence and embeds suicide prevention within future policy and law reform. This is essential to building systems that support and protect, rather than endanger, those most at risk.

Recommendations

1. **Develop a national data and linkage framework** that integrates domestic, family and sexual violence, mental health and coronial data to enable accurate monitoring of suicide risk, trend analysis and intersectional insights across jurisdictions.
2. **Embed perpetrator suicide threats as a coercive control indicator into domestic, family and sexual violence risk assessment frameworks** and promote action to hold male perpetrators accountable for their controlling patterns of behaviour at the earliest opportunity.
3. **Implement outstanding legal system reforms from recent inquiries**, including the Australian Law Reform Commission's report on justice responses to sexual violence, noting that culturally, psychologically and physically safe, timely and trauma-informed legal responses are suicide prevention measures. Monitor the impacts of reforms to ensure they reduce suicidality.
4. **Fund and mandate specialised training** across the family violence, sexual violence, legal and health sectors on suicide prevention, responding to disclosures, and risk management aligned with professional and ethical obligations and the diverse backgrounds and needs of clients.
5. **Adequately resource trauma-informed, holistic and culturally safe support and therapeutic services** for victim-survivors of domestic, family and sexual violence, particularly for First Nations women, migrant and refugee women, LGBTIQ+ people, women with disability and women at risk of or experiencing homelessness.
6. **Strengthen criminal law protections for confidential disclosures made by victim-survivors** during help seeking, therapeutic engagement and support services. In jurisdictions where protections are inadequate, reform and enforcement should be prioritised to prevent inappropriate disclosure or subpoena of sensitive records and to ensure legal standing and independent legal representation to respond to attempts to access those records.

Responses to the Terms of Reference

WLSA welcomes the opportunity to provide a submission to the Parliamentary inquiry into the relationship between domestic, family and sexual violence (DFSV) and suicide. This inquiry is a timely opportunity to examine the relationship between DFSV and suicide risk and to enhance the evidence base that informs system responses. It also allows for alignment between suicide prevention strategies and legal system reforms, ensuring that these domains are not treated separately when victim-survivors experience them in interconnected ways.

WLSA's submission draws on the collective casework evidence of the specialist legal practices of our members, who support thousands of victim-survivors of DFSV across the country each year. It also draws on the evidence from recent inquiries, research and commissions.

Terms of Reference 1

The relationship between DFSV victimisation, and suicide, and the extent to which DFSV victimisation contributes to suicide risk and incidence in Australia, including prevalence, patterns, and any identifiable at-risk groups, in order to improve understanding of the role of DFSV in suicides nationally

DFSV contributes directly to increased risk of psychological distress, trauma and suicidality. We note that the National Suicide Prevention Outcomes Framework recognises DFSV reduction, and the need for people to feel safe and secure, as a key components of suicide prevention.

Major inquiries have documented the relationship between DFSV and mental health harm and have identified consistent barriers that prevent victim-survivors from seeking support that need to be addressed.

For example, the Royal Commission into Victoria's Mental Health System identified the strong connection between DFSV, psychological distress and suicide risk, particularly where victim-survivors face intersecting and compounding discrimination. Notably, Domestic Violence Victoria highlighted in its submission that in addition to fear of the perpetrator, victim-survivors of family violence frequently cite fear of the following as barriers to disclosing violence and a source of ongoing stress negatively impacting on their wellbeing: authorities taking away children; immigration authorities cancelling visas; being institutionalised; shame, embarrassment and self-blame; not being believed; being cut off from family and support networks; lack of financial independence; fear of losing their home; and being forced into poverty.¹

Both the Royal Commission into Defence and Veteran Suicide and Royal Commission into Institutional Responses to Child Sexual Abuse identified clear links between sexual violence victimisation, self-harm and suicidality. Both Commissions outlined the need for better supports and therapeutic services for victim survivors and institutional accountability. The Australian Child Maltreatment Study also demonstrated increased self-harm and suicide attempts in adulthood among people who experienced childhood exposure to DFSV, particularly for women and gender diverse people.

In the experience of Women's Legal Services, victim-survivors often express fear of not being believed, fear of retaliation, fear of misidentification as the predominant aggressor, and concerns that information

- "...it's really scary to make a complaint. The majority of women would be alone or maybe with a friend when they first report to police. Victim-survivors really need support..." – Social Worker at Women's Legal Service Victoria

¹ Domestic Violence Victoria, DV Vic Submission to Mental Health Royal Commission (2019).

they share will be used against them. These barriers to help-seeking are well-founded and highlight the need for specialist, wrap-around support and outreach services, especially for migrant and refugee women, Aboriginal and Torres Strait Islander women, LGBTIQ+ people and women with disability, who also confront systemic discrimination across legal, health, police and other systems.

Terms of Reference 2

Opportunities for improved reporting and investigation methodologies to accurately capture and report on deaths as a result of DFSV, including the adequacy of existing data collection practices related to DFSV and suicide, and the availability, quality, and consistency of data across jurisdictions

We support the Australian Institute of Health and Welfare's (AIHW) call for a nationally consistent DFSV-related suicide dataset. Current data systems do not reliably identify when DFSV is a contributing factor to a death by suicide. Most national datasets rely on death registration information and Australian Bureau of Statistics (ABS) annual reported data on suicides. However, inconsistent definitions and collection methods hinder analysis and policy development.

Current suicide prevention frameworks fail to adequately account for DFSV as a precipitating or compounding risk factor. Policing and legal system reforms may underestimate the life-threatening consequences of delayed, unsafe, or retraumatising responses to DFSV violence (see further below).

The AIHW suicide registry includes psychosocial risk factors such as 'Family and personal hardship' risk factors for deaths by suicide.² While this registry data reveals that 'Problems in relationship with spouse or partner (Z630)' was among the more common risk factors in males and females across most age groups, it is still too broad to meaningfully identify and respond to DFSV trends and patterns.

Inquiries led by the Australian Law Reform Commission (ALRC) and others have repeatedly pointed to broader deficiencies in data collection and evaluation in relation to sexual violence. These include inconsistent national data; limited longitudinal tracking of victim-survivor outcomes; a lack of integrated data across health, justice and service data; and the absence of suicidality indicators.

Coroners Courts have unique potential to collate, understand and share data and learnings about the risk factors, links and prevention opportunities in relation to DFSV and suicide, particularly through dedicated domestic violence death review teams. We note however that differences across jurisdictions prevent meaningful national analysis. For example, in New South Wales, the Domestic Violence Death Review Team reported in 2023 that its focus had been on domestic violence homicides, even though suicides fall with the legislative definition of domestic violence death.³

Terms of reference 3

How legal and justice systems, DFSV specialist services, health, mental health and other services recognise and respond to suicide in the context of DFSV

Recognition of trauma and harm experienced by victim-survivors of sexual violence

Recent major law reform inquiries clearly detail the significant psychological and emotional harm caused to victim-survivors of violence across legal systems and jurisdictions.

In particular, the ALRC's inquiry into justice responses to sexual violence found that few people who experience sexual violence report to police or engage in the legal system, and for those who do, they

² Australian Institute of Health and Welfare, *Family and personal hardship: Psychosocial risk factors and deaths by suicide*, accessible at <https://www.aihw.gov.au/suicide-self-harm-monitoring/risk-factors/family-personal-hardship>

³ Domestic Violence Death Review Team, *Report 2021-2023* (NSW Government), 6.

often encounter myths and misconceptions and experience poor treatment and retraumatisation. The ALRC's report outlines a range of recommendations for improving the legal system so that people subjected to sexual violence can seek justice more often and in a safer, more informed and supported way. Implementation of these recommendations is crucial to reducing the harms that legal systems can cause to people's wellbeing after sexual violence.

Our casework evidence

Women who have experienced DFSV may engage with Women's Legal Services when they are highly distressed, traumatised or at risk of self-harm. Many are impacted by unsafe or poor legal system responses, including decisions to remove children, police not charging perpetrators, or police failing to consider a client's assessment of elevated risk.

Lawyers, social workers, First Nations support workers and financial counsellors across WLSA members work with women who experience suicide ideation. Some are scared to seek help because they fear their children being removed from their safe care and being placed with the person using violence. Others are reluctant to access mental health services out of fear that counselling or hospital records will be subpoenaed or misused in court proceedings.

When health records are subpoenaed, this can be highly distressing for our clients and elevate suicide risk. When lawyers cannot obtain a client's consent to manage suicide risk, they must consider whether the level of risk is so high that they are required to breach confidentiality to seek appropriate support. Lawyers may disclose confidential information if doing so is necessary to prevent imminent serious physical harm to the client.⁴ However, a lawyer taking this action can damage trust with their client and interrupt ongoing legal or holistic support to the client.

WLSA practitioners consistently encounter perpetrators of violence who make suicide threats as part of coercive control. Responding safely is ethically complex for practitioners. Even when practitioners have the consent of their client to alert emergency services about the threats made by the perpetrator, they risk becoming a witness in current or future legal matters, which can in turn preclude them from continuing to act for their client.⁵

WLSA practitioners have identified that existing training is insufficient to address this complex area of client need. Practitioners seek integrated, profession-specific and culturally appropriate capability training and resources, including that focus on suicide prevention, responding safely to disclosures, ethical decision making. At the same time, the risk of vicarious trauma for practitioners who support victim-survivors and who manage perpetrators at risk of suicide is high. This creates psychosocial hazards within the workplace that must be carefully managed, particularly in light of recent changes to model workplace health and safety laws.⁶

⁴ Per Australian Solicitors' Conduct Rules as enacted in each State and Territory, e.g. *Legal Profession Uniform Law Australian Solicitors' Conduct Rules 2015 (NSW) r 9.2.5.*

⁵ *Ibid*, rule 27, which precludes lawyers or a legal practice of which they are a member, from continuing to act for a client if they are a material witness in that client's case (see rule 27 of ASCR).

⁶ See further, *Safe Work Australia, 'Psychosocial hazards'*, accessible at <https://www.safeworkaustralia.gov.au/safety-topic/managing-health-and-safety/mental-health/psychosocial-hazards>.

Terms of reference 4

The use of suicide and threats of suicide as a tactic of coercive control by perpetrators of DFSV

As evidenced by our collective casework and the existing body of research, male perpetrators of violence use threats of self harm and suicide within broader patterns of coercive control, both during relationships and after separation. These threats are recognised as a tactic of coercive control and a key risk factor for domestic and family violence.⁷ A case example is provided below.

The most recent Victorian Crime States Agency data (2024-25) shows that 18 per cent of police-recorded family violence incidents had the risk factor 'perpetrator has threatened or attempted suicide' recorded in the Police Risk Assessment and Management Report.⁸ The annually reported incidence of this risk factor has been relatively steady since 2020 although the number of incidents has risen from 93,435 to 106,427 in 2024-25. We cannot ascertain from this data the proportion of family violence incidents where threats of suicide are part of a pattern of coercive control, however the data confirms the association between domestic and family violence and suicide and suggests that in almost one in five documented family violence incidents, perpetrator threats and attempts of suicide are a risk factor.

Case study: threatening suicide as a tactic of coercive control

Karen was a client of one of WLSA's members. She was in her 60s and had escaped a violent relationship. Throughout the relationship and post separation her former partner, Bill, was violent, including physical, verbal and sexual abuse, stalking, threats to harm and kill Karen and her beloved pets, and repeated threats of suicide.*

Multiple Family Violence Intervention Orders were made for Karen's protection, and her former partner was charged and found guilty of breaching them together with other offences. He was briefly imprisoned for his offending, but he continued to breach the Orders. He repeatedly used threats of suicide as a means of coercive control, threatening to kill himself if Karen refused to reconcile or took any legal action following separation.

When Karen initiated property proceedings in the Federal Circuit and Family Court of Australia, the abuse escalated. Her former partner did not have a lawyer, and he started making threats of suicide to her lawyer.

The Women's Legal Service involved became concerned for the safety of both Karen and the lawyers supporting her. Each time she tried to disengage or exercise her legal rights, Bill responded with renewed abuse and suicide threats as a deliberate form of coercive control.

**Names have been changed to maintain privacy*

⁷ Cherie Toivonen & Corina Backhouse, *National Risk Assessment Principles for domestic and family violence* (ANROWS Insights, 2018), 15.

⁸ Crime Statistics Agency, 'Repeat and higher risk family violence perpetrators', accessible at <https://www.crimestatistics.vic.gov.au/research-and-evaluation/publications/repeat-and-higher-risk-family-violence-perpetrators>.

Terms of reference 5

Opportunities to enhance prevention and early intervention efforts to reduce deaths by suicide in the context of DFSV victimisation and perpetration

Effective suicide prevention in the context of DFSV requires trauma-informed, holistic and culturally safe services. DFSV risk management approaches and therapeutic supports need to be appropriately resourced to reduce suicide risk factors and incidents, particularly for First Nations, migrant, refugee, LGBTIQ+ and victim-survivors with disability.

Insufficient protections in criminal and other laws can deter victim-survivors from engaging with support services. Victim-survivors must be able to seek therapeutic support without fearing that sensitive health and other records will be disclosed or used against them. Jurisdictions with stronger protections, such as absolute privilege for counselling records (unless the complainant consents) in criminal proceedings in Tasmania, can offer models for reform.⁹ In addition, and as noted above, implementation of the ALRC's recommendations on justice responses to sexual violence, including independent legal advice and representation, and legal standing to respond to attempts to access sensitive records, are also crucial to enabling people to seek help, justice and healing.

⁹ *Evidence Act 2001 (Tas) s 127B.*