



WESNET
The Women's Services Network

**SUBMISSION TO THE NATIONAL INQUIRY
INTO THE RELATIONSHIP BETWEEN
DOMESTIC, FAMILY AND SEXUAL
VIOLENCE AND SUICIDE**

January 2026

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Acknowledgements

Acknowledgement of Country

Wesnet would like to acknowledge and pay respects to all First Nations people, as the Traditional and only Custodians of this country we call Australia. In particular, we would like to acknowledge the people of the lands of the Dja Dja Wurrung where our main office stands. Throughout the year we have had staff working in other nations including Eora, and Naarm, and we would like to acknowledge those Traditional Owners as well. We recognise First Nations peoples' culture, wisdom, and connection to this land and pay our respects to Elders, past, present and future. We recognise the loss of land and culture, acknowledging the consequences of dispossession and colonisation on First Nations peoples. We acknowledge that sovereignty over this land was never ceded. This land always was and always will be Aboriginal land. First Nations women have multiple roles and identities relating to their culture, community, age, ability, sexual orientation and gender identity. Wesnet works tirelessly for an inclusive future free from violence. We acknowledge the strength and resilience of First Nations women, particularly those who have experienced domestic and family violence, and those who support and advocate for victim survivors of domestic and family violence. We pay our deepest respects to those who have lost loved ones as a result of domestic and family violence. Wesnet will actively work to be informed by the experiences and advocacy of First Nations women, and to support First Nations women in their quest for safety and equality.

Acknowledgement of Victim-Survivors

Wesnet also takes this opportunity to acknowledge all victim-survivors of gender-based violence. We pay respect to those who did not survive and to their family members and friends.

About Wesnet

We are the Peak body for Specialist Women's Domestic and Family Violence Services in Australia.

Our vision is a future where all women and children live free of domestic and family violence and its consequences.

With almost 350 eligible members across Australia, Wesnet represents a range of organisations and individuals including women's refuges, shelters, safe houses and information/ referral services.

Harnessing its large national network of members and associate members, Wesnet plays an important role in identifying unmet needs, canvassing new and emerging issues, facilitating policy and sector debate and providing expert advice to government to provide improved responses to the problem of domestic and family violence. We do this within our communities, and in partnership with non-government stakeholders.

Wesnet works within a feminist framework which promotes understanding domestic and family violence as gendered violence, and that women's and children's experiences are also intrinsically shaped by their ethnicity, culture, ability, age, gender identity and class.



The relationship between domestic, family and sexual violence (DFSV) and suicide

Introduction

Wesnet welcomes the opportunity to provide a submission to the Inquiry on the relationship between DFSV and suicide. We commend the Committee for initiating this Inquiry following a recommendation from the *Unlocking the Prevention Potential: accelerating action to end domestic, family and sexual violence* rapid review (Prevention Rapid Review) to do so.¹ As we are an unfunded peak body, we only have capacity to submit brief comments to the Inquiry.

The impact of DFSV, including technology-facilitated abuse (TFA), on victim-survivors

In order to have a nuanced understanding of the relationship between DFSV and suicide, it is essential to distinguish between the factors driving the risk of suicidality for victim-survivors and perpetrators. The specialist family violence response sector has a nuanced and in-depth understanding of such differences in responding to victim-survivors and perpetrators who are primarily women and men, respectively. While victim-survivors with mental health issues can receive system responses that delegitimise their safety concerns, men who use violence with mental health issues tend to have their mental health issues prioritised at the expense of victim-survivor safety.²

DFV victimisation and suicide

For victim-survivors, mental health issues can be an outcome and tactic used by perpetrators to entrap them.³ Family violence can negatively impact victim-survivors' mental health as coercive control erodes their self-esteem, agency and sense of self. Intimate partner violence (IPV) victimisation contributes 19 percent of suicide and self-inflicted injuries burden, 15 percent of depressive

¹ Ms Elena Campbell et al., *Unlocking the Prevention Potential: accelerating action to end domestic, family and sexual violence* (Canberra: Australian Government Department of the Prime Minister and Cabinet, 2024), <https://www.pmc.gov.au/resources/unlocking-the-prevention-potential>.

² Heather Douglas et al., *Deaths by suicide in the context of domestic and family violence: Examining context, prevention and responses. Workshop Final Report*. (Academy of Social Sciences Australia and CEVAW, 2025), doi:10.26188/30156139.

³ Australia's National Research Organisation for Women's Safety (ANROWS), *Violence against women and mental health* (Sydney: ANROWS, 2020), <https://www.anrows.org.au/publication/violence-against-women-and-mental-health/>.

disorders burden, and 11 percent of anxiety disorders burden.⁴ The total burden of disease due to IPV victimisation is highest for women aged between 35-44, with the most burden from depressive disorders, anxiety disorders, and suicide and self-harm.⁵ Further, if/when victim-survivors attempt to seek support, many systems, such as the legal system, are not trauma-informed, and can compound poor mental health. Perpetrators can weaponise these systems and victim-survivors' mental ill health, such as through gaslighting, to diminish their sense of reality and self, and prevent access to children or services.⁶ For victim-survivors from communities that experience inequality and discrimination, perpetrators can exploit systemic barriers to prevent victim-survivor access to systems and services. It is critical then to situate victim-survivors' mental health issues, including suicidality, in the context of family violence.⁷ In this way, services can respond in a trauma and violence-informed way that also addresses victim-survivor safety needs.

Specific impacts of TFA on women victim-survivors

There are specific impacts of TFA on women victim-survivors. Wesnet can attest to this through our national surveys on TFA. In the first two surveys, practitioners were asked about the impact of TFA on victim-survivors they worked with. The responses across the two surveys were similar. However, there was an increased perception in 2020 that women were experiencing high levels of fear and terror, and that they were feeling trapped and hopeless.⁸ Perpetrators' use of TFA and the omnipresence of technology meant that such 'mental torture' had significant impacts on victim-survivors such as despair and hopelessness. Practitioners also noted anxiety, paranoia, PTSD, and wider negative impacts on women's wellbeing, like on sleep and eating. One respondent reported:

The impact is huge. Since technology is such a part of everyday life now, women often feel they have no escape from the perpetrator. This kind of constant, relentless abuse has a massive impact on women's mental health. I have seen women become completely paranoid and jump at every sound due to the abuse.⁹

⁴ Australian Institute of Health and Welfare (AIHW), "Australian Burden of Disease Study 2018: Interactive data on risk factor burden," AIHW, <https://www.aihw.gov.au/reports/burden-of-disease/abds-2018-interactive-data-risk-factors/contents/intimate-partner-violence>.

⁵ AIHW, "Australian Burden of Disease Study 2018: Interactive data on risk factor burden."

⁶ ANROWS, *Violence against women and mental health*, 6.

⁷ ANROWS, *Violence against women and mental health*, 5.

⁸ Delanie Woodlock et al., *Second National Survey of Technology Abuse and Domestic Violence in Australia* (Canberra: Wesnet, 2020), <https://wesnet.org.au/about/research/2ndnatsurvey/>, 4.

⁹ Delanie Woodlock et al., *Second National Survey of Technology Abuse and Domestic Violence in Australia*, 4.

These findings are aligned with research. A United Nations report on technology-facilitated gender-based violence found that survivors commonly experienced severe emotional and psychological distress, anxiety, depression, PTSD and in extreme cases, suicidality.¹⁰

We acknowledge that research on the relationship between DFSV victimisation and suicide in Australia is an emerging field of research. Domestic and Family Violence Death reviews are integral to shaping this understanding, which is why we support Prevention Rapid Review recommendation 21 to *develop a consistent approach to death review processes*.

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

There is evidence that perpetrators' use of self-harm, suicidal threats and/or attempts are likely to be forms of coercive control aimed at limiting victim-survivor choices and independence.¹¹ In extreme cases, perpetrators' acts of suicide are described as extreme forms of violence against victim-survivors.¹²

While family violence risk assessment and management approaches tend to focus on perpetrator risk of suicide or murder/suicide, there is increasing recognition of the importance of also actively assessing the mental health risk and support needs of victim-survivors.¹³ This is why we echo Women's Health New South Wales' recommendation to *strengthen state-based multi-agency common risk assessment frameworks Australia-wide to more effectively capture all forms of DFSV risk, including risk of suicide and self-harm for victim-survivors, including children and young people*.

¹⁰ United Nations Population Fund (UNFPA), *Technology-facilitated gender-based violence: Making all spaces safe* (UNFPA, 2021), <https://www.unfpa.org/publications/technology-facilitated-gender-based-violence-making-all-spaces-safe>, 26.

¹¹ Scott J. Fitzpatrick et al., "Men, suicide, and family and interpersonal violence: A mixed methods exploratory study," *Sociology of health and illness* 44, no.6 (June 2022): 991-1008, <https://doi.org/10.1111/1467-9566.13476>.

¹² Scott Fitzpatrick, "Perpetrators of family violence sometimes use threats of suicide to control their partner," *The Conversation*, May 5, 2022, <https://theconversation.com/perpetrators-of-family-violence-sometimes-use-threats-of-suicide-to-control-their-partner-182416>.

¹³ Queensland Government, *Suicide prevention framework for working with people impacted by domestic and family violence* (Queensland Government, 2021), <https://www.publications.qld.gov.au/dataset/not-now-not-ever/resource/ac6ec5c6-3746-4022-a845-5c192e958255>.

connection.²⁰ As Palawa woman and one of Australia's leading researchers on Indigenous family violence, sexual assault and child abuse, Prof. Kyllie Cripps, rightly asks: 'Why are the pathways to safety so tangled with administrative hurdles, financial insecurity, and inevitably fraught with the loss of kinship and cultural connection?'²¹

It is critical to listen deeply to and be led by Aboriginal and Torres Strait Islander women and Aboriginal Community Controlled Organisations (ACCOs). Wesnet is pleased to note the ongoing development of the *Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Family Safety Plan*. It is imperative that the *Federal Government support the implementation of this plan with sustainable investment in truly community-led and designed service responses to Aboriginal and Torres Strait Islander survivors of domestic and family violence.*

Final remarks

As Wesnet is an unfunded peak body, our capacity to make recommendations is limited. We understand that ShantiWorks and Women's Health New South Wales are making submissions to the Inquiry. We recommend *ShantiWorks' and Women's Health New South Wales' submissions to you.*

²⁰ Delanie Woodlock et al., *Second National Survey of Technology Abuse and Domestic Violence in Australia*, 32.

²¹ Kyllie Cripps, "Professor Kyllie Cripps - 5WCWS Keynote."