



**National Centre for Action  
on Child Sexual Abuse**

# Improving legal, policy and practice responses to the intersection of domestic violence perpetration and child sexual abuse offending

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# Executive summary

Research on the overlap between domestic violence and child sexual abuse is limited. These types of violence have usually been studied separately. This report provides an overview of the key findings from our research into the intersection between domestic violence and child sexual abuse.

The research comprised four stages:

1. a systematic literature review identifying the prevalences of co-occurring domestic violence and child sexual abuse
2. a family law case analysis of published parenting decisions wherein allegations of domestic violence and child sexual abuse were made against the same parent (i.e. were co-occurring)
3. interviews with practitioners across the domestic violence, child sexual abuse, and legal sectors
4. interviews with:
  - a. survivors of child sexual abuse whose parent had experienced domestic violence
  - b. parents who had experienced domestic violence and whose child had experienced child sexual abuse.

Findings relating to Family Court, police and child protection responses are based on a review of 65 published family law cases and qualitative interviews with practitioners and survivors. The report identifies themes, concerns and experiences emerging from this research and should not be interpreted as a comprehensive assessment of the performance of these systems.

## Literature review findings

Domestic violence in the home somewhat increases the risk of co-occurring child sexual abuse; however, child sexual abuse in the home significantly increases the risk of co-occurring domestic violence.

Girls are more likely to experience co-occurring child sexual abuse and domestic violence than boys.

## Family law case analysis

The study considered final proceedings of family law matters that had not been resolved by other means and included a high degree of acrimony, deterioration in relationships, and significant anxiety and distress between the parties.

In the cases analysed for this study:

- 52% involved matters where neither child sexual abuse nor domestic violence had been substantiated by other agencies
- 40% involved substantiated domestic violence but not child sexual abuse
- 8% involved substantiated child sexual abuse but not domestic violence
- 8% of cases involved substantiated domestic violence and child sexual abuse.

In the majority of cases (90.7%), initial allegations of abuse were made by the mother. In half of these instances, the child ultimately came to live primarily with their mother, and in the other half, with their father.

In 40% of cases, one or both parties were self-represented for some or all of the proceedings.

Just over a quarter (27.1%) of matters were case managed by the Magellan List, which is designed expedite matters that involve (or are suspected to involve) allegations of child abuse.

The majority of cases involved an Independent Children's Lawyer (ICL). In our study, the ICL supported the account of:

- the accused parent (usually a father) in 66.7% of cases
- the accusing parent (usually a mother) in 23.8% of cases.

The Court either partially or totally adopted the orders proposed by the ICL in the majority (85.7%) of cases where an ICL was involved.

In almost half of cases (44.1%) where mothers made allegations of co-occurring domestic violence and child sexual abuse, the Court found their parenting capacity was affected by mental illness.

Approximately the same proportion of alleged perpetrators were found to have their parenting impacted, or brought into question, based on mental health concerns.

## Practitioner interview findings

Child sexual abuse is more difficult to substantiate than domestic violence. In cases of co-occurrence, the alleged perpetrator may have a documented history of domestic violence while a sexual abuse allegation is less likely to be substantiated.

This evidentiary picture has multiple cascading implications.

- Women are in a double bind: Even where domestic violence has been documented, women can be penalised if they are seen to have overreacted to the possibility of child sexual abuse, but they can also be punished if they are viewed as not responding swiftly or proportionately enough to child safeguarding risks.
- Children are at risk of harm: Where domestic violence is documented but child sexual abuse is not substantiated, children may be obliged to spend unsupervised time with their father despite having disclosed sexual abuse by him.

Responses to domestic violence and child sexual abuse are siloed and relevant services are not cooperating to provide holistic support for women and children. This might have several explanations, including a lack of long-term and holistic funding, which restricts opportunities for collaboration. Additionally, domestic violence and child sexual abuse support services may have differing focuses or priorities.

Responses to complaints of co-occurring domestic violence and child sexual abuse are shaped by gendered stereotypes that heighten suspicion and judgement for women in ways that are not present for men.

Domestic violence constrains and complicates women's reactions where they suspect, or where their child alleges, sexual abuse by the male partner. Child sex offenders can abuse and groom women in ways that undermine women's social supports, autonomy, mental health and confidence in their own judgement.

There is a need for coordinated, cooperative responses across domestic and sexual violence services, attending to the overlapping but distinct needs of women and children, recognising a diversity of responses and impacts to co-occurrence.

In the absence of appropriate and effective therapeutic and legal intervention, the trauma of co-occurring abuse is likely to be transmitted both vertically down through generations and laterally within generations.

## Survivor interview findings

Child sexual abuse and domestic violence can co-occur in several contexts:

- Family privacy and secrecy: The family as an institution can conceal multiple abuse patterns from outsiders. Even where one form of abuse is detected or reported, others may not be.
- Intergenerational trauma: Unhealed trauma from the previous generation is transmitted to the next, who may then transmit trauma within generations, such as to siblings.
- Silence about domestic and sexual violence in the home: A lack of open and honest discussion with children about gender-based violence empowers familial perpetrators and keeps victimised children silent.

Children experiencing co-occurring abuse:

- can be victimised by siblings as well as parents – other children can commit co-occurring sexual and physical violence against their siblings
- are scared of disclosing to adults – children may not disclose for fear of retaliation or adding to family stress and parental burden, or they may disclose to peers but not adults
- can sometimes be punished by the non-offending parent – in co-occurring abuse, the response of the victimised parent to their child's disclosure can be unpredictable or punitive.

Women experiencing co-occurring abuse:

- face particular challenges when trying to protect young children – some women felt there was a reluctance among police to investigate the sexual abuse of very young children due to evidentiary challenges in substantiating such abuse
- struggle to find help – women were often unable to access support or advice on how to parent while also navigating multiple systems (child protection, criminal justice, family law)
- feel bewildered and revictimised by the Family Court – they felt unsupported, misunderstood and often victimised by the family court system, with the court process exacerbating already high levels of anxiety and distress.

Survivors articulated a strong preference for therapeutic and comprehensive support that helped people to navigate complex systems while providing care for their children and themselves.

# The project team

- Professor Michael Salter is the Director of the Childlight East Asia and Pacific Hub in the School of Social Sciences at the University of New South Wales.
- Dr Delanie Woodlock is the Deputy Director of the Childlight East Asia and Pacific Hub in the School of Social Sciences at the University of New South Wales.
- Professor Molly Dragiewicz is a criminologist in the School of Criminology and Criminal Justice at Griffith University.
- Associate Professor Cate Banks is a trauma-informed lawyer and sociolegal researcher in Monash University's Faculty of Law.
- Abigail Embleton is a Research Officer at the University of New South Wales.
- Angela Lynch is a lawyer and the Executive Officer for Queensland Sexual Assault Network (QSAN) Inc.
- Dr Lenka Olejnikova is a Research Officer at the University of New South Wales.
- Kathleen Maltzahn is the Chief Executive Officer of Sexual Assault Services Victoria.
- Di McLeod is the founder and Director of the Gold Coast Centre Against Sexual Violence.
- Professor Jan Breckenridge is the Head of the School of Social Sciences, Co-Convener of the UNSW Gendered Violence Research Network, and research associate of the Childlight East Asia and Pacific Hub at the University of New South Wales.

# The advisory group

- Karen Barker - Executive Manager of Parkerville Child Advocacy Centre in Western Australia.
- Associate Professor Becky Batagol - Legal academic at Monash University.
- Karen Bentley - CEO of Wesnet: The Women's Services Network.
- Carla Collins - Senior Psychologist at the Gatehouse Centre at the Royal Children's Hospital Melbourne.
- Pip Davis - Principal Solicitor of Women's Legal Service NSW.
- Delia Donovan - CEO of Domestic Violence NSW.
- The Hon Justice Shane Gill – Judge of the Federal Circuit and Family Court of Australia.
- Kulumba Kiyingi - Senior Policy Officer at Queensland Indigenous Family Violence Legal Service.
- Nicci Lambert - Chairperson of the National Association of Services Against Sexual Violence.
- Natalie Walker - Immediate past CEO of PartnerSPEAK.

# Acknowledgements

## Aboriginal & Torres Strait Islander Peoples

We acknowledge the Aboriginal and Torres Strait Islander peoples as the Traditional Owners and custodians of Country across Australia. We recognise that sovereignty was never ceded, and we honour their enduring connection to land, waters, and culture. We pay our deepest respects to Elders past and present.

We recognise that gendered violence – including family and domestic violence and child sexual abuse – affects Aboriginal and Torres Strait Islander communities in ways that are deeply shaped by the continuing impacts of colonisation, systemic discrimination, and harmful government policies. We acknowledge the longstanding leadership of Aboriginal and Torres Strait Islander peoples who have worked tirelessly to both partner with and challenge institutions in addressing the intersections of colonisation, intergenerational trauma, and gendered violence. We affirm the central role of culture in healing, and acknowledge the strength and resilience embedded in cultural practices as a vital pathway to recovery and justice.

## People with lived and learned experience

Behind every quote or statistic provided in this report are real people and real lives impacted by violence and abuse. Research is an important tool for understanding, but the pain and suffering experienced by victims and survivors is not always fully conveyed in a report like this. Thank you to all the survivors who volunteered to participate in this study and share some of their most difficult experiences to help others. Thank you also to the professionals across a range of sectors who volunteered to share your practice wisdom with us, and who helped us to connect with your clients as part of the recruitment process.

# Glossary

**Child sexual abuse:** The involvement of a child in sexual activity by an older child or adult that the child does not understand, to which they cannot consent and/or which violates community norms.

**Child sexual abuse material:** Any representation (including images, videos or text) that depicts or describes a child engaged in sexual activity or depicted in a sexual context, and which is considered exploitative or abusive.

**Coercive control:** A pattern of controlling, manipulative, or threatening behaviours – such as isolation, intimidation, and surveillance – used to dominate and entrap a partner, often forming the core dynamic of domestic and family violence.

**Domestic violence:** Violent, threatening, coercive, or controlling behaviour that occurs within family, domestic or intimate relationships, or in the aftermath of relationship breakdown. This term is used interchangeably with the term ‘family violence’ throughout this report.

**Evatt List:** A specialist list in the Federal Circuit and Family Court of Australia for case management of high-risk family law matters.

**Gender-based violence:** Abuse or violence, including child sexual abuse, domestic violence and sexual assault, that is directed against an individual or group based on their gender.

**Grooming:** A premeditated pattern of manipulative conduct by child sex offenders targeting potential victims, protective adults, bystanders and relevant institutions designed to overcome obstacles to the sexual abuse of children and evade detection.

**Independent Children’s Lawyer:** A legal practitioner appointed by the Court under s 68L *Family Law Act 1975* (Cth) to represent the best interests of the children in parenting disputes.

**Magellan List:** A specialist case management pathway in the Federal Circuit and Family Court of Australia for family matters in which allegations of child sexual or physical abuse have been made.

**Perpetrators:** People who commit criminal offences or harmful acts against others.

**Survivors:** People who are experiencing, or have experienced, abuse and violence.

# Introduction

Although it is well recognised that some perpetrators commit both domestic violence and child sexual abuse, responses to these two forms of gender-based violence can become siloed within distinct sectors. Children and women face particular challenges in disclosing and seeking support and protection from these intersecting and compounding forms of violence.

This project set out to investigate:

- how services and systems respond when child sexual abuse is reported in the context of domestic violence
- the experiences and views of sexual assault and domestic violence professionals with clients reporting child sexual abuse and domestic violence
- the experiences and needs of survivors.

The project is guided by three research questions:

- How do the family courts respond when child sexual abuse is reported in the context of domestic violence?
- How do domestic violence workers, legal practitioners, and sexual assault advocates understand and address the co-occurrence of child sexual abuse and domestic violence in their work with mothers, children, and adult survivors?
- How do survivors describe the challenges they face when seeking support in cases of co-occurring domestic violence and child sexual abuse?

This project has built on our previous research conducted in partnership with community organisations and other key stakeholders in the response to co-occurring domestic violence and child sexual abuse. The foundations of this project include research into child sexual exploitation in family environments, which highlighted gendered patterns of coercion and control between parents (Salter, 2013, 2014; Salter et al., 2021). Our evaluation of PartnerSPEAK, an Australian organisation that supports the non-offending partners and family of child sexual abuse material offenders, found an overlap between domestic violence and child sexual abuse perpetration (Jones, Salter, & Woodlock, 2022; Jones, Woodlock, & Salter, 2021; Salter, Woodlock, & Jones, 2023). We then conducted a small exploratory interview study into women's experiences in relationships with domestically violent and/or coercively controlling child sexual abuse material offenders, in partnership with several frontline services (Salter et al, 2022).

This current project broadens out our focus to study the co-occurrence of child sexual abuse (online and offline) and domestic violence, bringing together a diverse team of academic and practitioner researchers. This report was produced with funding from the National Centre for Action on Child Sexual Abuse. The National Centre gratefully acknowledges funding from the Australian Government and other support it has received, without which this work would not have been possible. The findings and views reported here are those of the authors.

# The research process

The circumstances in which offenders commit child sexual abuse and domestic violence are diverse and complex. We recognise the myriad challenges facing women and children subject to these forms of poly-victimisation, as well as the difficulties encountered by professionals who are intervening in such cases. The project does not aim to evaluate the adequacy of system responses per se, but rather to understand how co-occurrence is surfacing in these contexts, patterns of system responses, and the experiences of professionals and survivors.

The project was conducted in four phases:

1. a review of existing research into the co-occurrence of child sexual abuse and domestic violence
1. a case analysis of family law matters involving co-occurring allegations of child sexual abuse and domestic violence
2. interviews and focus groups with professionals in domestic violence, sexual violence and legal services
3. interviews with survivors, including women whose ex-partners committed domestic violence and child sexual abuse, and adult survivors of perpetrators who committed child sexual abuse and domestic violence.

## Review of existing research

This phase of the study aimed to identify existing empirical research into the co-occurrence of domestic violence and child sexual abuse, with a focus on perpetration by the same offender. A scoping review was conducted between August 2023 and December 2025 using two academic databases, EBSCO and ProQuest. These databases collate peer-reviewed articles across various disciplines relevant to child sexual abuse and domestic violence, such as public health, sociology, criminology, and social work. Additionally, Google Scholar was manually searched to identify relevant grey literature. The search was restricted to English-language publications, with no limitations on the date of publication. The search strategy focused on three core concepts – domestic violence, child sexual abuse, and co-occurrence – all of which were required for inclusion.

This process initially identified 291 studies, which were screened for eligibility. To be included, studies needed to report lifetime prevalence rates of childhood sexual abuse and adult experiences of domestic and family violence. Reference lists of eligible studies were also reviewed, and additional relevant publications meeting the inclusion criteria were incorporated. In total, 19 studies met the criteria and were included in the review (see Appendix A). These were analysed descriptively, and data were extracted on the following elements: (a) citation, (b) prevalence rates (disaggregated by sex where available), (c) country of data collection, (d) study sample, (e) methodology, and (f) definitions used for child sexual abuse and domestic violence.

This review has several limitations. Firstly, it includes only English-language publications, which may exclude relevant research published in other languages. Secondly, most included studies originate from relatively affluent nations in the Global North, limiting the applicability of findings to other contexts. Thirdly, most studies focused on estimating lifetime experiences of child sexual abuse and exposure to domestic violence during childhood, without providing information on the identities of the perpetrators. Only four studies offer sufficient detail to confirm co-occurrence, defined here as child sexual abuse and domestic violence perpetrated within the same family unit by the same

individual (Bell, 2000; Hooper, 1992; Kellog & Menard, 2003; McCloskey et al., 1995). The absence of perpetrator identification in most studies makes it challenging to interpret co-occurrence prevalence in a meaningful way.

There are also limitations within the reviewed studies themselves. Child sexual abuse and domestic violence are complex and difficult areas to research. Many studies used non-representative samples, limiting the generalisability of findings. In addition, inconsistent definitions of child sexual abuse and domestic violence across studies hinder meaningful comparison of results. Future research should prioritise identifying the perpetrators of both child sexual abuse and domestic violence to better understand the prevalence of co-occurrence within the same family context. This knowledge is critical for informing targeted policy responses and improving service delivery.

## Family law case analysis

The overarching research question for Phase I of the project was 'How do the family courts respond when child sexual abuse is reported in the context of domestic violence?'. Ethics approval for the legal case analysis was granted by the University of New South Wales Human Research Ethics Committee (Ref: iRECS5696) on 1 January 2024. The family law case analysis involved two steps:

1. case search and screening
2. coding.

### Case search

A systematic search of CaseBase, an online case citator accessed through LexisNexis, was conducted on 13 November 2023. The search terms (including Boolean connectors) used included:

("child sex! abuse" OR "child sex! assault" OR "produc! child pornograph!" OR "incest" OR "produc! child exploitat! material!") AND ("family violence" OR "intimate partner violence" OR "domestic violence")

The search was limited to cases between 1 January 2018 and 30 June 2023. The search returned 181 results. Two stages of exclusion were undertaken. The first stage was an initial screen based on the case description or other preliminary information and excluded full court and decisions heard in the appellate jurisdiction, or cases falling outside the family law jurisdiction. Sixty-one cases were excluded at this stage. Decisions heard in an appellate jurisdiction often concern challenges to a specific issue (e.g. interpretation of the meaning of a term in statute). Consequently, appellate judgements may not refer to all evidence provided during the initial proceedings, and the appeal may not be relevant to all claims made by the parties. In contrast, trial decisions will outline all relevant material and evidence provided. This allowed us to conduct a more detailed analysis of the evidence used by the Court in reaching its conclusions regarding parenting orders.

The second screening stage involved an analysis of the full text of the cases. We excluded cases:

- that did not involve a trial hearing (see above for our rationale)
- that were not determining final parenting orders (e.g. interim orders – these are often temporary and may not be published to maintain confidentiality, so collecting final orders based on trial proceedings allowed us to ensure consistency across our dataset regarding the level of information available about each case)
- without both an allegation of child sexual abuse and family violence

- where an allegation was made against different people (our definition of 'co-occurring', for the purpose of this review, was 'allegedly perpetrated by the same person in the same relationship')
- where the family violence or child sexual abuse were not perpetrated against children of the relationship in contention
- where possession of child sexual abuse material was not related to the relationship or children of the relationship (e.g. it related to children of previous relationships)
- where the case did not relate to a dispute between parents (e.g. between a parent and a governmental minister)
- where a decision was procedural (e.g. related to a recusal or an order for costs), as these decisions would provide little insight into the presiding member's handling of the material and parties.

Decisions which involved, on their face, the making of a final determination, but where the presiding member elected to make interim orders in the best interests of the children, were included. A total of 64 cases were excluded at the second stage of exclusion. The remaining decisions (n=56) were analysed.

On 30 January 2024, a search was conducted on the Western Australian Government's eCourt Portal to identify relevant cases. The family law jurisdiction in Western Australia does not fall under the federal jurisdiction (i.e. rather than hearing matters in Division 1 of the Federal Circuit and Family Court of Australia, family law matters are heard in the Family Court of Western Australia). The broad search term 'family violence' was used to identify initial search results, and cases that fell within the 1 January 2018 to 30 June 2023 date range were downloaded. The initial search yielded 145 results. The screening process followed the same as outlined above. Of the initial 145 results, 9 decisions were included, resulting in a total of 65 cases for analysis.

Since our case analysis, the passage of the *Family Law Amendment Act 2023* (Cth) and the *Family Law Amendment (Information Sharing) Act 2023* (Cth) in May 2024 has altered the law surrounding parenting orders, particularly as it relates to the best interests of children in parenting matters. Key changes to the law include (but are not limited to):

- removal of the presumption of shared equal parenting arrangements and mandatory consideration of certain time arrangements
- clarification of the factors which must be taken into account by the Court when determining the best interests of children
- guidance for joint decision-making between parents
- a requirement for Independent Children's Lawyers to meet with children in order to ascertain their views.

At the time of our case review, the new legal framework had been in effect for a month, and we do not have had sufficient data available from published decisions to make conclusions about the impact and efficacy of the new provisions. However, future work would greatly benefit from accounting for these important changes to the law.

## Coding

Once we identified all relevant cases in the specified time period, they were imported to a Microsoft Excel spreadsheet for data analysis. The coding framework collected the following key information:

Case details	Key details collected were the Court, Registry, presiding Judge, and the gender of the presiding Judge.
Party and representation details	<ul style="list-style-type: none"> <li>• Gender of the applicant and respondent of the matter</li> <li>• Applicant's and respondent's respective representation (e.g. self-representation or lawyer-representation) and whether this changed throughout the course of the proceedings.</li> <li>• Gender of the alleging parent and the alleged perpetrator</li> <li>• Any mental health concerns of the parents</li> <li>• Whether mental health concerns were stated to impact on parenting (stratified according to gender)</li> </ul>
Details of child(ren)	<ul style="list-style-type: none"> <li>• Involvement of an Independent Children's Lawyer</li> <li>• Number of children</li> <li>• Age, gender, and disability status of the children</li> </ul>
Specialist lists and overarching legal issues	Whether the case was heard in the Evatt (specialist family violence) or Magellan (specialist child sexual and physical abuse) case management lists.
Child sexual abuse allegations	<ul style="list-style-type: none"> <li>• Content of the allegation</li> <li>• Party and gender of the alleging parent and the alleged perpetrator</li> <li>• Response of the alleged perpetrator to the allegation</li> <li>• Substantiation by authorities</li> <li>• Whether the alleging parent was a survivor of child sexual abuse or sexual violence</li> <li>• The finding of the Court</li> </ul>
Family violence allegations	<ul style="list-style-type: none"> <li>• Content of the allegation</li> <li>• Previous or standing family violence orders</li> <li>• Party and gender of alleging parent and alleged perpetrator</li> <li>• Response of the alleged perpetrator to the allegation</li> <li>• Substantiation by authorities</li> <li>• Finding of the Court</li> </ul>
Arrangements for children	<ul style="list-style-type: none"> <li>• Child residence at commencement and conclusion of proceedings</li> <li>• Child protective services involvement</li> </ul>

Evidence	<ul style="list-style-type: none"> <li>• Single expert witness</li> <li>• Reportable therapy</li> <li>• Expert reports (under several different statutory provisions)</li> <li>• Report provided under the Magellan List requirements</li> <li>• Child-inclusive conferencing or child-responsive program</li> <li>• Professional witnesses</li> <li>• Investigations undertaken</li> </ul>
Final outcomes	<ul style="list-style-type: none"> <li>• Final decision regarding:</li> <li>• parental responsibility</li> <li>• child residence (and whether the parent made the allegation of domestic violence and/or child sexual abuse)</li> <li>• time division between parents</li> <li>• additional requirements (e.g. counselling)</li> <li>• position of the ICL and whether the Court adopted that position</li> <li>• other relevant comments.</li> </ul>

Our dataset comprises a small number of final proceedings involving allegations of serious conduct by a parent. Matters that proceed to a final hearing are matters which have not been resolved through other means and represent the highest degree of acrimony and deterioration in relationships between the parties. Such cases present significant difficulties for the Court in assessing parties' evidence and reaching conclusions as to children's safety and risk. In such cases, parties are more likely to experience severe stress, may have difficulties in accessing support services, and will be challenged by the strict requirements of legal proceedings, such as rules of evidence and the role of agents such as Independent Children's Lawyers and single experts.

It is important to recognise that academic research into family court matters in Australia is difficult for several legal, ethical and institutional reasons. There are strict privacy provisions around family law matters, which necessarily limit publication of details that might identify any parties, children, or witnesses involved in family law proceedings. Researchers have very limited access to family court files and transcripts, particularly for interim or unpublished decisions, which represent the bulk of family law cases. Access often requires special approval from the courts themselves and has typically been granted to government entities rather than independent academic researchers.

In this study, we did not have independent or direct access to raw data or evidence (for instance, official court transcripts, court reports or other internal documents) drawn on by the presiding judicial officer. We are therefore relying on the presiding judicial officer's presentation and interpretation of key evidence and facts. Notably, such adjudicated matters are a small proportion of total cases before the Court, since most family law matters are resolved via mediation and do not

require judgement. Additionally, of the 657 matters which were finalised at trial and by judgement in the 2022–23 financial year,<sup>1</sup> only 13 were included in our analysis.

Our case analysis is based on the relatively small sample size of 65, which limits what we can confidently say from the data. For example, it is hard to tell whether unusual cases in our sample are random variations or indicative of a more significant trend. It also means we cannot be as confident when comparing patterns or drawing broader conclusions. Future research with a larger number of cases would help confirm our findings and allow for more detailed comparisons – for instance, between cases with both child sexual abuse and family violence allegations, and those without either. Because of these limitations, we have chosen to focus only on how often certain things occurred, rather than making strong claims about patterns or relationships in the data.

However, this analysis has allowed us to draw conclusions regarding the ‘state of the law’ from 2018 to 2023, given that reported decisions are publicly available and are what legal practitioners, academics, and litigants rely on when developing their arguments for legal matters. Although there have been important changes in the law since our review, in essence, these cases are the public face of the Court’s decision-making (i.e. the development of legal precedent) and indicate the possible directions of future decision-making by judicial officers. The impact of the changes that have come into effect, such as to the role and function of Independent Children’s Lawyers, will become known slowly as contested matters move through the system.

## Interviews and focus groups with sexual assault and domestic violence workers

The research question guiding this stage of the research was, ‘How do domestic violence workers, legal practitioners, and sexual assault advocates understand and address the co-occurrence of child sexual abuse and domestic and family violence in their work with mothers, children, and adult survivors?’. The study received ethics approval from the University of New South Wales Human Research Ethics Committee (no iRECS4606) on 30 November 2023.

To answer this question, we sought to recruit a wide range of professionals to speak to about their experience of these cases. The project advisory group supported the research team by providing information about relevant organisations and professionals, whom we contacted and shared information with about the study. Professionals who were interested in participating could then contact the project’s research officer to arrange a time for interview. Between February and June 2024 we conducted 12 interviews and four focus groups with 36 practitioners, including:

- legal practitioners (n=4)
- therapeutic staff (n=12)
- child and family advocates (n=4)
- service leaders and managers (n=13)
- peer support and coordination staff (n=3).

The interviews and focus groups were conducted online, while one participant provided written responses to the interview questions. We then transcribed the interview recordings and conducted

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<sup>1</sup> Commonwealth of Australia, FCFCOA Annual Reports 2022-23 (Annual Report, 2023) 35 [2.9.3], 44 [3.4.2], 45 [3.4.2] <<http://www.fcfoa.gov.au/annual-reports>> (*FCFCOA Annual Reports 2022-23*).

a thematic analysis, which involves identifying key themes across the dataset. There were three steps to our coding process, in accordance with the approach outlined by King, Horrocks, and Brooks (2018).

1. **Descriptive coding:** In this initial stage, researchers apply simple, factual codes to summarise the content of data (e.g. 'child removed from mother's care' and 'victims need support').
2. **Interpretive coding:** The initial descriptive codes are grouped together into more-conceptual categories that involve interpreting the meaning behind the data and looking for patterns and linkages across the interviews and focus groups (e.g. 'children are put at risk' or 'mother's protective behaviour is misinterpreted'). These codes were shared within the research team and externally to the project advisory group to validate the analysis.
3. **Thematic coding:** In this final stage, the research team identified the high-level, overarching themes in accordance with the study's primary research question.

This study has several limitations. The findings are based on qualitative interviews and focus groups with 36 professionals, which may not capture the full diversity of experiences across the broader sector or among different service settings. The sample, while purposively selected for relevant expertise, may reflect particular organisational or regional perspectives and may not be representative of all welfare professionals working with co-occurring domestic violence and child sexual abuse. Participants' reflections may also be shaped by recall bias or professional norms, particularly in the context of highly sensitive and complex cases. Finally, while the qualitative design supports rich, in-depth analysis, the findings cannot be generalised statistically, and caution should be exercised in applying them beyond the specific contexts studied

## Survivor interviews

This phase of the study was guided by the question, 'How do institutional and social responses to child sexual abuse and domestic violence shape the way survivors understand their experiences?'. The study received ethics approval from the University of New South Wales Human Research Ethics Committee (no iRECS4606) on 30 November 2023.

The study aimed to recruit adult survivors where the child sexual abuse offender also perpetrated domestic violence against their mother/stepmother, as well as mothers who had been subjected to domestic violence where the perpetrator also sexually abused their children. Information about the study was circulated through partner organisations, including networks of sexual assault and domestic violence services, as well as on social media. Survivors were invited to contact the researchers directly if they were interested in the study or wanted more information. The study recruited five adult survivors reporting child sexual abuse and domestic violence in childhood as well as five women reporting that their ex-husband perpetrated child sexual abuse and domestic violence. Interviews took place online and went for between 30 minutes and an hour, focusing on experiences of co-occurring domestic violence and child sexual abuse, experiences of disclosure and help-seeking, and intersections with systems and services. Interviews were transcribed, anonymised and subject to thematic analysis as explained above.

This is a relatively small cohort of survivors, so the study may not have documented the full extent of experiences of co-occurrence among survivors of childhood and adult-onset victimisation. Interviews were conducted in English and interviewees were predominantly, although not exclusively, Anglo-Australian, and reporting victimisation in the context of heterosexual relationships. Future research could focus on recruitment of a more diverse group of survivors across a range of communities and backgrounds. Like many qualitative studies, the findings of this study are

explorative and indicative, and should not be generalised to all survivors of co-occurring child sexual abuse and domestic violence.

# Review of existing literature

Research on the overlap between domestic violence and child sexual abuse is limited. These types of violence have usually been studied separately. Our analysis shows that prevalence estimates for co-occurring child sexual abuse and domestic violence victimisation are characterised by extreme variability, ranging from 0.9% (Herbert et al., 2023) to 91% (Bell, 2002). Nonetheless, the available research points to important patterns in the risk of domestic violence in homes where child sexual abuse occurs and vice versa, and the groups of children who are more likely to be victimised through co-occurring abuse.

## Different prevalence rates in different target populations

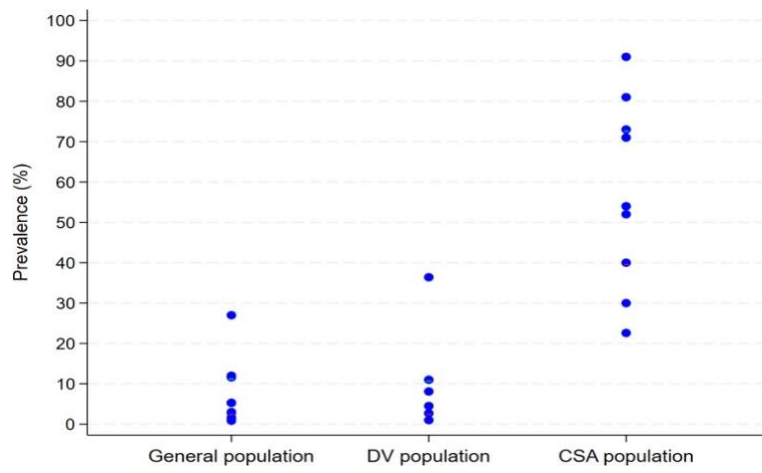
Studies in scope for this review fell into three overarching groups.

The first group comprised studies that estimated prevalence rates in the general population at the country, state, regional, or school level. These studies included participants with and without child sexual abuse and domestic violence victimisation experiences and sought to estimate the prevalence of child sexual abuse and domestic violence co-occurrence in the population as a whole. This group of studies reports the lowest prevalence rates on average, from 0.9% (Herbert et al., 2023) to 27% (Kennedy et al., 2012) (see Figure 1 and Appendix B).

The second group contained studies with domestic violence survivors who were asked about child sexual abuse victimisation. These studies reported on the percentage of identified domestic violence cases that included co-occurring child sexual abuse. The prevalence rates reported in research with this group are slightly higher on average, ranging from 1% (Chen et al., 2023) to 36.4% (Dong, 2004) (see Figure 1 and Appendix C).

The third group of studies assessed the prevalence rates for child sexual abuse survivors who were asked about childhood domestic violence exposure or victimisation. These studies reported on the percentage of identified child sexual abuse cases that included co-occurring adult domestic violence. These studies reported prevalence rates for child sexual abuse and domestic violence co-occurrence that were significantly higher than the other groups, from 22.6% (Dong, 2004) to 91% (Bell, 2002) (see Figure 1 and Appendix D).

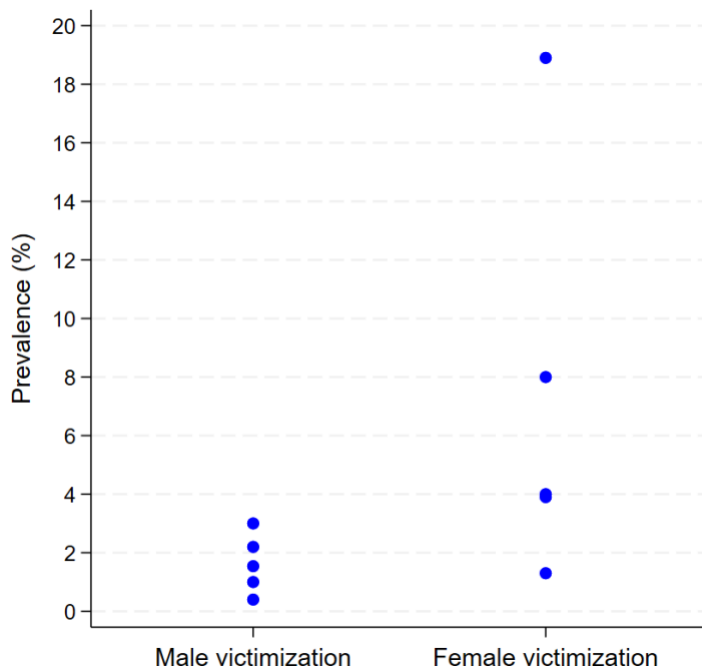
### Figure 1: Prevalence rates for child sexual abuse and domestic violence victimisation across different populations



## Sex differences

In addition to differences between study target populations, the review indicated that girls are more likely than boys to experience co-occurring domestic violence and child sexual abuse (see Figure 2). These results demonstrate that the risk of domestic violence and child sexual abuse co-occurrence in childhood varies across different groups.

**Figure 2: Prevalence of domestic violence and child sexual abuse victimisation in general populations disaggregated by sex (n = 5)**



## Conclusion

Existing research into the co-occurrence of child sexual abuse and domestic violence is limited; however, our review suggests that there is an elevated risk of child sexual abuse in circumstances of domestic violence, and a significantly elevated risk of domestic violence in circumstances of child sexual abuse. Girls are more likely to experience co-occurring child sexual abuse and domestic violence than boys. There is a need for further prevalence research that is sensitised to the co-occurrence of these two forms of abuse.

# Family law case review

The section presents a case analysis of 65 Federal Circuit and Family Court of Australia and the Family Court of Western Australia trial decisions involving co-occurring allegations of domestic violence and childhood sexual abuse. It outlines the results of a frequency analysis of the decisions and examines the Court's conceptualisation of risk and harm in family disputes involving co-occurring allegations of domestic violence and child sexual abuse.

In terms of substantiation of allegations by police, child protective services or other agencies, in 34 (52.3%) cases, neither domestic violence nor child sexual abuse were substantiated at all. In 7.7% of cases (n=5), child sexual abuse allegations were substantiated, but domestic violence allegations were not. More commonly (n=21, 32.3%), domestic violence allegations were substantiated, while child sexual abuse allegations were not. In five cases (7.7%), both allegations of child sexual abuse and domestic violence were substantiated.

Agencies such as police and child protective services produce materials (e.g. interview recordings or reports) during their investigations into domestic violence and child sexual abuse. The Court may rely on these primary materials when determining risk, but it does not automatically adopt the findings of these external agencies. If these agencies are unable to substantiate allegations before parenting proceedings commence, they are unlikely to be able to present enough materials to the Court to allow a finding of unacceptable risk to be reached.

We identified instances where shared parenting was maintained despite domestic violence allegations being substantiated by external agencies as well as the Court. This is a significant concern, particularly in the Court's assessment of risk, when there are co-occurring allegations of domestic violence and child sexual abuse. Submissions made by a member of the research team to the Senate Legal and Constitutional Affairs Legislation Committee's inquiry into the Family Law Amendment Bill 2023 have highlighted the need for improved retrospective risk assessment by the Court (Batagol, Banks and Mant, 2023). This has now been enshrined in the *Family Law Amendment Act 2023* (Cth) s 60CC(2A).

Where initial allegations were made by the mother (90.7%, n=59), children ultimately lived primarily with their mother in 42.4% of cases (n=25), and with their father in 45.8% of cases (n=27). Despite the high proportion of allegations being made against fathers, this finding indicates the difficulties experienced by the Court in assessing risk and outcomes which are appropriate for the ongoing wellbeing of the children involved.

Legal proceedings are highly complex, and adversarial proceedings require specific forensic and informational expertise. Taken in combination with the profoundly high stakes associated with parenting proceedings, the cost of obtaining legal representation in these matters can operate as a significant barrier to accessing justice. In 40.0% of cases (n=26), one or both parties were self-represented during some or all of the proceedings. This means the parties were without a lawyer for at least part of the court matter and were responsible for preparing material for the Court and/or providing evidence without the assistance of a lawyer.

The Magellan List is a specialist case management list which is intended to expedite matters that involve (or are suspected to involve) child abuse (Higgins, 2007). Of the 59 cases that involved an

initial allegation made by a mother, 16 (27.1%) were case managed via the Magellan List.<sup>2</sup> The implication of this relatively low number is that the allegations may not have been considered by the Court to involve a level of risk which warranted case management via the Magellan List. Further analysis of interim proceedings and gaining more insight into procedural reasons or the Court's decision-making in triaging matters for risk is essential to understanding why there were not more of the analysed cases on the Magellan List.

The majority of cases involved an Independent Children's Lawyer (ICL), who is legal representation appointed by the Court to represent the best interests of the children in the proceedings (Carson et al. 2014). In our study, in 42 cases (66.7%) the ICL supported the position of the parent accused of domestic violence and/or child sexual abuse. In contrast, ICLs supported the position of the alleging parent in 23.8% (n=15) of cases. In 20.7% (n=12) of cases involving child sexual abuse allegations made by mothers, the ICL supported the position of the mother. In 66.6% (n=2) of cases involving allegations made by fathers, the ICL supported the position of the father.

The Court relies on ICLs to provide an impartial position. Consequently, ICLs may influence Court decisions. This research finding offers insight into the opinions of non-judicial parties (e.g. lawyers for the parties, ICLs, expert witnesses) as to the veracity of allegations and the magnitude of risk in matters which involve co-occurring allegations of child sexual abuse and domestic violence.

The Court largely aligned its findings with the proposal of the ICL, with the Court either partially or totally adopting the orders proposed by the ICL in 85.7% (n=54) of cases where an ICL was involved. The most common outcome for child residence was for the children to reside with the parent against whom child sexual abuse and domestic violence was alleged, following the ICL's support of that same parent (60.3%, n=38).

When mothers made allegations of co-occurring domestic violence and child sexual abuse, the Court found their parenting capacity was affected by mental health concerns 44.1% (n=26) of the time. Approximately the same proportion of alleged perpetrators were found to have their parenting impacted, or brought into question, based on mental health concerns. This finding has several possible explanations; however, the most plausible explanation based on the data available to us is that these matters are highly conflicted and activated, and represent protracted experience with legal services, child protective services and forensic investigations, so it would be reasonably expected that the parties' mental health would be negatively impacted as a result.

A small but not insignificant number (16.9%, n=11) of parents alleging either domestic violence or child sexual abuse had disclosed child sexual abuse themselves (e.g. in their family of origin). We identified that a large proportion of allegations made by women of co-occurring abuse were often accompanied by questioning (by other parties, experts, or the Court) of the alleging parent's mental health. Self-reported child sexual abuse or histories of sexual violence provide important context to a party's emotional and psychological circumstances when approaching parenting proceedings involving co-occurring allegations, regardless of whether the Court or experts considered these self-reports to be 'truthful' or 'substantiated'.

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<sup>2</sup> We identified that a case was listed under the Magellan List via the headnotes. However, if this was not listed in the headnotes, we had no other way of identifying that the matter was case-managed in the Magellan List. Consequently, these findings may be numerically inaccurate.

# Practitioner interviews

Based on interviews with professionals like social workers, lawyers, therapists, and support workers, this summary presents the key themes, challenges, and recommendations for improving support for affected families.

## Mothers and children are often not believed

A major concern raised by professionals was that mothers and children are not believed when they report domestic violence and child sexual abuse happening at the same time. In many cases, mothers who raise concerns are treated with suspicion, particularly from the legal system. Their actions are often judged instead of supported. For example, if a mother tries to protect her child, she may be accused of being overprotective or even of trying to alienate the child from the father. Children also face disbelief. Some mothers may struggle to accept their child's disclosure of sexual abuse, especially if the mother is also being controlled or harmed by the same perpetrator. Professionals stressed that fear, trauma, and coercion can make it hard for mothers to act immediately. They emphasised that this is not due to a lack of care for the children but rather an indication that these mothers need support.

Professionals felt that the family court system often holds mothers to the standard of an 'ideal victim' who leaves an abusive relationship right away and provides perfect evidence. But real life is much more complicated. When mothers don't meet these unrealistic expectations, they can be disbelieved and punished. A lawyer identified this as a kind of pervasive 'gender bias' that puts obstacles in the way of women in complex family court proceedings:

*I think this is an issue that we've all been talking about, but I don't think we've been explicitly naming it, in terms of the gender bias. Women, I think, are held to a different standard, number one, but also going back to the labelling of women as hysterical, I think that is a gender bias issue as well.*

## Abusers groom mothers, children, professionals, and the public

Professionals in our study noted that abusers often target women or families who might be more isolated or under strain, such as those experiencing poverty or past trauma, or single parents juggling work and childcare. These material and relational conditions can create openings for perpetrators to embed themselves into the family and community, which sets the stage for denial in the event of an abuse disclosure in the future. Abusers use grooming tactics to get close to mothers and children, such as offering to help women with childcare. These childcare activities can then provide them with opportunities to abuse children and credible excuses for being alone with, touching, and photographing children. A therapeutic practitioner at a multidisciplinary, child-focused service said:

*There's lots of grooming going on with the primary carer who's quite often the mother, in that primary role to be able to access the child or children ... Perhaps they [the mother] have separated from the biological father, so [the offender is] knowing that they're stepping right into helping with bathing, helping with intimate care, transporting kids to and from school or sporting activities. So, it really is helping mum in a kind of planned way to access the child.*

The grooming process can isolate mothers and undermine their confidence to act in situations that might otherwise cause concern. Grooming can make mothers doubt the abuse or delay taking action, particularly when the same offender is engaged in domestic violence and coercive control. A psychologist noted:

*When that parent has experienced family violence – and especially ongoing family violence – I think their capacity to sometimes view child abuse can be more limited. It might take them longer to realise that that's what's happened because of their own vulnerabilities or fears around – I'm not saying believing it. They do. But just wanting to deal with it. I think they're vulnerable people as a result of the family violence, therefore dealing with another major crisis or issue like child sexual abuse can add another layer onto an already complex situation for people.*

Professionals observed that abusers often work hard to present themselves as great fathers or stepfathers on social media and in public, for example, coaching children's sports or volunteering for highly visible activities that can make it harder for others to believe abuse allegations. Abusers also manipulate professionals. They may be charming, polite, calm, and pleasant to judges, police, and child protection workers. Manipulating family consultants, legal services, mental health services, schools, alcohol and other drug services, and family violence services can result in positive reports that cast doubt on abuse allegations and plant concerns about mothers as crazy, unfit, or overprotective.

## **Mothers are trapped in a double bind**

Professionals observed that mothers who try to protect their children from sexual abuse face a no-win situation. If they act cautiously and don't immediately report the abuse, they're accused of failing to protect their children. If they raise concerns too forcefully or insistently, they're seen as angry, crazy, or manipulative. In this lawyer's experience, raising a sexual abuse allegation can prejudice a woman's credibility in family law proceedings:

*I think it is a genuine risk, and women have to make the unthinkable decisions to have to choose between saying something and not saying something. Either way they know that their children are at very great risk because they'll either be forced to see the abuser or forced to live with the abuser. I think that is a horrific decision for a parent to be placed in.*

Legal advice can reflect this double bind. Some lawyers advise mothers not to mention abuse in court because it's hard to prove and reporting often results in changes to parenting time that favour the abuser. However, if mothers don't raise the issue from the start and the abuse continues, they are blamed for not saying anything sooner. This creates a situation where mothers must choose between two terrible options, knowing that either could result in losing their children or being disbelieved. Practitioners in our study remarked that the risks involved in reporting abuse to family law systems can prevent mothers from leaving abusers, since they may have more opportunities to protect their children when living in the same house as their abuser.

## **Children are put at risk**

It can be difficult to substantiate child sexual abuse. Abuse typically does not leave physical or medical evidence and children may struggle to disclose in ways deemed to meet the evidentiary standards of a child protection or criminal justice investigation. Professionals noted that child abuse investigations by child protection authorities may not always conform to best-practice standards. As a result of these intersecting factors, in family court matters children may end up having to live or spend time alone with the person they say abused them. One professional described this situation as a "vortex of doom", where systems like family courts, child protection authorities and police all fail to act or protect children. When children report and are not protected, they learn not to tell anyone about abuse in the future and are denied support that could help them recover.

The emotional toll on children in these situations is severe. They may blame themselves for causing family breakdown or not being believed. Some children decide not to tell their mothers about abuse they are experiencing to protect them from knowing about it. Some children become suicidal because they are forced to maintain contact with their abuser. One support worker explained:

*I've got a child at the moment, she's eight, who is basically saying "Look, I might as well kill myself because the problem is because of me. I see how distressed you are mum; I really don't want to see him; I know the Court is going to say to me again that I have to see him". She is actively suicidal, and she's struggling with suicidal ideation, which is understandable, right? Given the context.*

Professionals noted that courts often prioritise keeping both parents involved in children's lives even if one has a known history of domestic violence. Unless the sexual abuse is clearly proven, the abusive parent often gets unsupervised parenting time. Professionals said this causes serious harm and undermines the safety of children.

## Intergenerational trauma

Professionals noted that some mothers seeking support for domestic violence were also sexually abused as children. Mothers often have not received support for childhood sexual abuse and only talk about it when seeking help for domestic violence or to protect their own children from sexual abuse. A support practitioner explained this process:

*We are seeing a pattern that some women who have experienced child sexual abuse are then coming into domestic violence relationships. They are calling us to seek information and advice around clarifying what is happening in their current relationship as part of that. It then sort of unpacks that there has been, also, a history of child sexual abuse that they can speak to as well.*

Practitioners also expressed concern about boys who experience sexual abuse or are exposed to domestic violence by one parent against another. Without support, these boys are at higher risk of using harmful sexual behaviours against other children or using sexual and domestic violence later in life. This doesn't mean all boys who are abused will go on to harm others. Nor will all girls who are sexually abused be revictimised. However, professionals emphasised the need to provide early, specialised support to children exposed to abuse to prevent trauma transmission or revictimisation in the future. A domestic violence worker said:

*When you do risk assessments, there seems to be a strong dynamic of family violence, domestic violence, and sexual assault history, but they seem to fall through the cracks. It is not until they [the boys] are engaging in harmful sexual behaviours that they are all picked up and assessed. What are we putting in place for kids who have experienced family violence?*

Professionals said there are not enough early interventions for children who have been exposed to violence as children to prevent future abusive behaviour and revictimisation. They said programs were needed to support all children experiencing abuse, not just those who are acting out. They recommended acknowledging how girls' and boys' risks may differ so that their unique experiences can be addressed more effectively.

## Services are not working together

Domestic violence and sexual abuse responses often operate separately and provide different responses, even though in reality these problems often occur together. As a result, families may get

help for one issue but not the other. The professionals interviewed said this makes it harder to support families properly. A domestic violence worker remarked:

*One of the major issues, I think, from my perspective, is at a system level the government assumes that family violence and sexual violence services are joined up. In reality, I do not think they really are. So, I think that there is a missed opportunity to intervene. Which is kind of – are we wrapping support sufficiently around the kids? I am not convinced that the child safety system does that or integrated family support.*

Funding is often tied to specific types of abuse, making it more difficult for services to provide appropriate support to mothers and children where violence against women and child maltreatment co-occur. Services often compete for limited resources. Practitioners noted that this dynamic can make it harder for organisations to share information and work together. As a result, support becomes patchy and families fall through the cracks. Sexual abuse receives less attention from the government and funding for services than domestic violence does, meaning child sexual abuse victims face long waiting lists to access support.

## Legal systems cause more harm

Many professionals criticised family, criminal, and civil legal and child protection systems for re-traumatising women and children. A lawyer asked:

*Why is it so hard for us to come up with adequate legal criminal systems around domestic violence and child abuse issues? I would really love to know people's ideas about why it is as broken as it is, despite all of the money and all of the inquiries. Why is it still – we're in 2024, why are we still in this situation? Why is it such a challenging system to change and improve for women and children?*

Children who disclose sexual abuse may face inappropriate or intense questioning from law enforcement that causes more trauma. In many cases, sexual abuse allegations don't make it to court because not enough evidence has been collected. Many cases are never investigated at all, due to limitations on which cases child protection authorities can investigate and persistent misconceptions about how child sexual abuse victims look and act. The resulting lack of a determination that child sexual abuse occurred is used against mothers in family court, even when domestic violence is proven. A lawyer observed:

*It's most often the case with really young children, where it is really difficult to have positive findings made in relation to child sexual abuse. But I think what that does is it really does colour very strongly the future path in family law proceedings. It can be a very, very difficult path that flows as a result of not being able to substantiate those allegations. I think that the court could do more to see those kinds of allegations through a more appropriate lens, rather than through what I think are those more common lenses that it's seen through, which is about really minimising women and the allegations that they bring and the fears that they have as to safety for their children.*

Despite recent family court changes to prioritise safety, professionals said the family law system favours keeping children in contact with both parents, even when it's unsafe. Judges often dismiss mothers' child sexual abuse concerns unless they can provide clear proof, which is rarely possible with these cases. Mothers who don't easily concede that abuse might not have occurred can experience harsher penalties than alleged abusers in family court.

## Conclusion

Our interviews and focus groups with professionals across the response system to domestic violence and child sexual abuse identified a strong consensus that mothers and children affected by both domestic violence and child sexual abuse face serious challenges when they seek help. Professionals recognised that this client group is often not believed, and that the systems meant to protect them can make things worse. Professionals reported that domestic and sexual violence systems often operate in silos, making it harder to support families holistically. Practitioners also raised concerns about missed opportunities for early intervention, noting that children exposed to violence often only receive support when they begin to show behavioural issues. Finally, professionals expressed frustration with legal and child protection systems that, in practice, prioritise maintaining contact with both parents, even when this compromises children's safety. Taken together, these findings underscore the need to listen to and believe women and children, improve coordination across services, and ensure that systems are equipped to respond to the complexity of abuse in a way that prioritises safety and recovery.

## Survivor interviews

This phase of the study was guided by the question: "How do survivors describe the challenges they face when seeking support in cases of co-occurring domestic violence and child sexual abuse?" To explore this, we interviewed five mothers who experienced domestic violence by the same offender who sexually abused their children, and five adults who were sexually abused as children by an offender who also abused their mother or stepmother. This section presents survivors' accounts of navigating systems of support, such as police, courts, counselling services, and community organisations, often in contexts where abuse was minimised, misunderstood, or dismissed. Rather than adjudicating the facts of each case, our focus is on how survivors made sense of what happened to them, and how institutional and social responses shaped their ability to seek help and protect themselves or their children.

### Adult survivors of childhood co-occurring sexual abuse and domestic violence

Of the five adult survivors we interviewed, two described co-occurring abuse by a biological father, two identified their brother as the perpetrator, and one woman was subject to co-occurring abuse by her father then, later, by her stepfather. We focus below on Melissa's description of adolescent-perpetrated family violence and sexual abuse by her brother, and Ruby's story of domestic violence and sexual abuse committed by her father and stepfather, before going on to draw out the key themes from participants regarding the service and system's response to their abuse.

#### Melissa's story: Adolescent-perpetrated family violence and sexually harmful behaviour

Melissa was physically and sexually abused by her brother Shane. She was raised in poverty by a single mother who struggled with a large number of children. Shane began abusing Melissa when he was 14 and Melissa was six. Shane was using drugs, committing criminal offences outside the home (such as car theft) and violent at home. Her brother's cruelty and violence provided the backdrop to Melissa's abuse. She explained:

*Shane was mean to everyone in the house, and he was always really nice to me. For me that was the trade-off. It was either I get called names, I get hit, I get stuff thrown at me, or I don't, but then I have to do those shit things for him.*

Shane's violent and criminal offending escalated to the point where the police intervened to support Melissa's mother to eject him from the home. However, after a few years Shane was financially destitute and arranged to move back into the family home. At this point, Melissa was 13 and she disclosed the sexual abuse to her sister. Her sister did not believe her initially. However, shortly after Shane moved back into the home, Melissa's sister saw Shane sexually abusing Melissa and confronted him. Melissa explained: "She ended up getting angry at him when she saw him do it and was like, "You need to stop what you're doing. If you ever do anything like that again, I will tell mum and [stepfather]". This confrontation was the last time that Melissa's brother sexually abused her.

## Ruby's story: Paternal-perpetrated domestic violence and sexual violence

Ruby was subject to physical and sexual abuse first by her biological father and then by her stepfather. She was raised in a very religious community where her father "had this really respectable social veneer and people had no idea what was really going on in our house". She described her father as sadistically violent towards his wife and children. He had friends within the church who had been convicted of sexual offences against children, and these men were invited to the home, where one of them abused Ruby. Ruby did not describe contact offending by her father but other forms of sexually abusive behaviour. She said, "His way of punishing me was to make me strip and have a cold shower in front of him".

Ruby's father abandoned her family in her early teens and her mother re-partnered with a violent and abusive man whom Ruby described as part of a criminal subculture. This man had a known history of sexually abusing children. She said that, by her mid-to-late-teens, her stepfather was "full-on grooming me, going on dates with me. A lot of flirting, sexual comments". He sexually assaulted her when she turned 18, which she disclosed to her mother. When her stepfather realised that she had reported her rape, "he just did this big backhand across my face, whacked me in the face without even looking at me". Her mother's relationship with Ruby's stepfather ended some years later after he seriously and permanently injured Ruby's mother. In explaining her mother's relationships with violent men, Ruby recognised that her mother had grown up in domestic violence and had herself been sexually abused by her father.

### Disclosure

Four of the adult survivors we interviewed had disclosed their abuse, as children, to family and friends, but rarely received a supportive response. Olivia and Elizabeth both told friends at school that they were being sexually abused by their fathers, but these disclosures did not go any further (such as to a protective adult). Elizabeth also told her mother about her father's abuse, and her mother sent her to a psychologist for counselling but otherwise took no other action. Lisa told her mother about her abuse by her brother, and her mother slapped her and called her a liar. However, she surmised that her mother appeared to have intervened, since her brother stopped abusing her after this. Melissa told her sister that she was being sexually abused by their brother, and her sister did not initially believe her, although subsequently encountered a sexual abuse incident at home.

### Police responses

In Melissa's case, her brother's physical violence in the home was known to police but they did not detect his sexual offending. They discussed safety planning for the family, but this did not protect Melissa from his sexual abuse once he ceased his violent behaviour and was permitted to return home. As an adult, Melissa gave a statement to police about her brother's sexual abuse of her, and she was surprised by the haste and urgency of the police response. Melissa described the policewoman who took her statement as "lovely". However, Melissa has found the court process to be very difficult. She wanted her brother in jail, but she found the court process prolonged, intrusive and anxiety-provoking. She explained, in relation to the court process, "This sucks so much ... I want to throw in the towel. You see why people throw in the towel, because it's too much".

### Education

Some survivors wished that there had been more sexual education and open discussion of family and sexual violence at school. Olivia grew up in a religious family where she received very little sexual education, and she felt that the secrecy around sex and abuse enabled her father's abuse. She explained:

*He's benefited by everyone just keeping it hush-hush, like, this is too yucky to talk about. Sexual assault and family violence, it's uncomfortable. We don't want to upset anyone, so we just don't talk about it, and I just don't think – that just hasn't worked, and he's been able to flourish, and continue to perpetrate violence because of it, yeah.*

Elizabeth grew up during the 1980s and 1990s in Australia where “we heard about stranger danger” and children were taught to “look out for strangers” and understanding the “difference between being safe and not being safe”. But the family had a protected place within this discourse of child safety. Elizabeth said that the lack of recognition of incest and family violence was “the foundation of the grooming because he could just be there hiding in plain sight”.

## **Fear of child protection**

As a single mother with six children, Lisa's mother was very afraid that her children would be removed by child protection “if there was any indication that she wasn't coping”. She coached the children on what to say if anyone asked how the family was going: “We had to tell them that we're fine, we're doing good, even though we weren't because there was always that fear that [child protection] would come and take us away from her”. A teacher at Lisa's school suspected that she was being sexually abused but Lisa was too afraid to tell her teacher about it. Her teacher encouraged her to tell her mother because “there's nothing so bad that you can't speak to your mother about it”. Lisa did disclose to her mother and was physically punished by her mother. However, her mother does appear to have intervened in the abuse.

## **Mental health care**

In her twenties, Lisa began experiencing panic attacks if she was left alone in a room with a man, or if a man stood in front of an entrance or exit to a room. She saw a therapist and began to recall and deal with her sexual abuse in childhood. She felt that addressing her child sexual abuse was crucially important in helping her understand and change some of her own behaviours throughout her life:

The child sexual abuse is the missing puzzle piece for a lot of my behaviours, a lot of the really poor decisions I've made in life – the unconscious poor decisions and also, I believe the basis for the reason why I've attracted so many abusers in my life and why I've allowed things to happen which ordinarily a normal healthy person wouldn't.

## **Women whose ex-partner committed domestic violence and child sexual abuse**

Of the five women we interviewed, all five disclosed co-occurring domestic violence and child sexual abuse by their ex-husband. All women reported emotional abuse during the relationship, with three women identifying physical violence, three identifying financial abuse, two identifying coercive control in the relationship, and one woman describing sexual violence in the relationship. We focus on Margot's story of coercive control and child sexual abuse, and Amber's story of domestic violence and child sexual abuse, before drawing out the key themes from respondents' narratives about service and system responses.

### **Margot's story: Coercive control and child sexual abuse**

Margot left her husband when her daughter was still a toddler. She used the word “gaslighting” to describe the behaviour of her ex-husband, saying, “I've been psychologically abused, emotionally abused and manipulated”. Once the relationship was over, Margot's daughter began disclosing

sexual abuse by her father. At this point, Margot and her husband were separated but they were still living together.

However, her young daughter “indicated to me that she was interfered with in a sexual way by pretty much demonstrating to me as to what her father did to her”, prompting Margot to seek the advice of her local hospital. The attending social worker “insisted that they call the police there and then” but Margot was unsure, since she was still living with her ex-husband. They did not offer her alternative accommodation and she was uncertain, from a practical point of view, where she and her daughter would live. However, social workers informed her that the police must be notified, and the police would interview her ex-husband about the allegation.

Margot had to return to the home she shared with her ex-husband, and she began to piece together some of the warning signs around his behaviour. The most obvious was that, some years prior, a member of her husband’s family contacted Margot to warn her that he was a child sex offender – something that Margot had not known what to make of at the time. However, after the hospital trip, she contacted his ex-partners, to discover a significant history of sexual abuse complaints and child protection investigations. Margot quickly relocated with her daughter and began the process of seeking full parental responsibility through the courts, as well as engaging with police around the sexual abuse complaint.

### **Amber’s story: Physical violence and child sexual abuse**

Amber first met her husband when she was in her late teens. He was abusive to her. She describes “the coercion and the pressure and the sleep deprivation and the arguments. It was escalating physically”. During the relationship, Amber had some concerns about her ex-husband’s behaviour towards the children. She felt that some of her ex-husband’s interactions with their children were unhealthy in a way she couldn’t quite put her finger on. After she left the relationship, she was living in a domestic violence refuge with her children, and they were spending unsupervised time with their father. She became concerned about her children’s behaviour before and after seeing their father.

Describing her son, she said, “When I dropped him off it was like he went from – behavioural-wise, he just went wild”. Her son was already receiving counselling from a child abuse agency for the violence he had witnessed living with his father. However, he then began disclosing sexual abuse by his father to the counsellor. Counselling was arranged for Amber’s daughter, who also disclosed sexual abuse. Once these disclosures took place, her children were interviewed by the police; however, what happened next is contested. Amber’s son made an allegation of sexual abuse but then, according to police, retracted it, whereas Amber insisted that her son had simply said he was “confused”.

The police did not pursue an investigation into the sexual abuse allegations, which were denied by Amber’s ex-husband, who complained that she was contravening consent orders by denying him unsupervised access to his children. Amber could not tolerate returning her children to a situation where they might be sexually abused. She decided to “throw everything into it” and fight for sole parental responsibility. She said, “I went hard. We were going towards a trial” but her ex-partner “ended up backing down”. She received sole parental responsibility, and they agreed to supervised contact at a contact centre.

### **Lack of advice or support**

Once women suspected sexual abuse or their children disclosed sexual abuse, they were often uncertain about the next steps but couldn’t access support. Amber explained that she approached multiple agencies: “I actually was going to them after that going, are you able to please help me

because I don't know what to do?" Like Amber, Margot also found herself trying to manage simultaneous criminal investigations and family court proceedings as a mother of a traumatised child. She was accused of potentially coaching her child, but she had very little support or advice on how to parent her child, who exhibited challenging behaviours at home. She said:

*I just wish I had someone that told me something. Anything about the process and how I can support my child. What will I do? How do I – like when she goes into her flashbacks in the night when I am breastfeeding her to sleep and she's got some memories, like what do I tell the child? Like something at the very beginning, how can I talk to my child?*

## Police responses

Some of the women we interviewed had children who disclosed or indicated sexual abuse at a young age. A message that some women received was that their children were too young for an investigation. Margot recalled:

*The officer tells me and pretty much – I'm not going to be exaggerating if I will say that it was – I was laughed at. I was laughed at. [The officer said] "The child is two-and-a-half, like two-and-a-half. What, do you expect me to take it to the judge?" I didn't have a clue what those words even meant at that time, but the support was absolutely lacking.*

Margot recounted an incident where she was told by both a social worker and a police officer that her daughter was too young to have been harmed by the abuse:

*That was the police officer who told me, actually told the anecdote. She said, "Look, once my son, he came back from school, and he said he was playing with someone's doodle at school or something". She said, "I didn't make a big deal out of it. Your child is two. She will be fine".*

## Family court process

The women we interviewed found the family court process bewildering, shocking and alienating. They felt unsupported and misunderstood by the court. At the time of family court matters, women were typically coping with the aftermath of many years of family violence against themselves as well as allegations or suspicions that their children had been sexually abused. They were therefore extremely anxious about the safety of their children and found the legal and bureaucratic requirements of the jurisdiction to be confusing and arbitrary.

Women often remarked on what they perceived as the misogynist underpinnings of the logics of family court proceedings, which Jennifer described as "patriarchal". Jennifer wanted her family lawyer to be a fearless advocate for her cause but, instead, she felt that "their duty is to the court, then it's to the children, then it's to the client". She was frustrated by the conduct of her lawyer and felt that the family court judges did not take domestic violence or child sexual abuse seriously enough. She was subject to a psychiatric assessment, which she felt was biased and prejudiced the family court process against her. At the time of interview, Jennifer was considering a range of legal options to sue the various people involved in her matter.

## Therapeutic responses

Sonia sought therapy for her daughter, but she was told there was a six-month waiting list for clinical care for sexually abused children. Other women also struggled to find therapeutic support for their children. Children under five, according to Margot, are completely abandoned by the system.

*In the current legislation and the system by and large, children in Australia of the age of less than five have no voice. That's something that I would like to highlight. Not only is it they have*

*no voice, but there are not many services, there are not many services out there. No psychological services. That the mothers of these children are not being believed by and large and they are left to deal with everything by themselves.*

Amber was very frustrated by the fact that, once her daughter disclosed abuse at a child abuse service, therapeutic support for her ceased as the statutory response began. She acknowledged that, once “the kids opened up” to a counsellor and disclosed abuse “they had to stop most of the time” or it might undermine any criminal case, since the counsellor could be accused of “putting ideas in their head by over-counselling or something like that”. For Amber’s daughter:

*The minute she disclosed it was like, we’ve got it. That’s it. They reported it to police and we’re out the door. I was thinking, well, maybe they thought they were doing the best thing for me but it’s not for my daughter.*

## **The need for a multidisciplinary, wraparound service for sexually abused children and their families**

Amber wanted a multidisciplinary, wraparound service for women in her situation. In particular, she sought a service where she could find therapeutic support for her children that would not be seen to otherwise prejudice family court or criminal justice proceedings:

*Having that team where they could collaborate under one roof and you could have someone that works with the parents, and they all talk, and it’s just in the one place. There’s short-term – I guess, for the kids counselling, jumping from this one to that one – because we’re all short term ... And it not being reflected on badly in court. Because if you were to go to, say, [an advocacy service], they would have wrapped their arms around you and support you. Then they’re going, well, if you go to [that service] you’re kind of putting the idea in your kid’s head.*

These services do exist, but the fact that Amber was unable to access such support shows that they are not widely available for survivors.

## **Conclusion**

Co-occurring domestic violence and child sexual abuse places victims and survivors in an impossible situation: efforts to prevent one form of abuse can increase the risk of another, attempts to protect others from abuse can increase risk to the self (or vice versa), resistance to abuse is dangerous but adaptation to abuse results in more abuse, and the mental, physical and psychosocial impacts of violence and abuse compound over time. These are situations where there is no single, obvious or “right” way to survive. In these circumstances, the survivors we interviewed frequently found themselves unable to access support or advice. For child victims of co-occurring abuse, family privacy, secrecy, threats and the pressure not to upset the adults around them created an environment in which perpetrators were unlikely to be detected or stopped. Women who had experienced co-occurring abuse described lack of accessible supports for themselves and their children, and a lack of advice on how to navigate the conflicting demands placed on them as mothers facing multiple simultaneous investigations and legal proceedings.

# Conclusion

This study offers a critical examination of the intersection between domestic violence and child sexual abuse, highlighting the complex realities faced by women and children when these forms of harm co-occur. By integrating legal analysis, practitioner insights, and survivor narratives, the research provides a multidimensional understanding of how systemic responses often fall short in addressing the compounded risks and needs of affected families. The findings underscore the urgent need for integrated, trauma-informed, and gender-sensitive approaches across legal, therapeutic, and support systems. In doing so, this research makes a significant contribution to the field by illuminating the gaps in current practice and policy, and by centring the voices of those most impacted in the call for systemic reform.

To build on these findings, future research should prioritise large-scale prevalence studies that identify perpetrator overlap; longitudinal studies that track outcomes for affected families; and evaluations of integrated service models that address both domestic and sexual violence. Expanding the diversity of survivor voices – particularly across cultural, linguistic, and gender identities – will also be essential to developing inclusive and effective responses. This research lays the groundwork for a more coordinated, trauma-informed, and survivor-centred approach to addressing co-occurring abuse.

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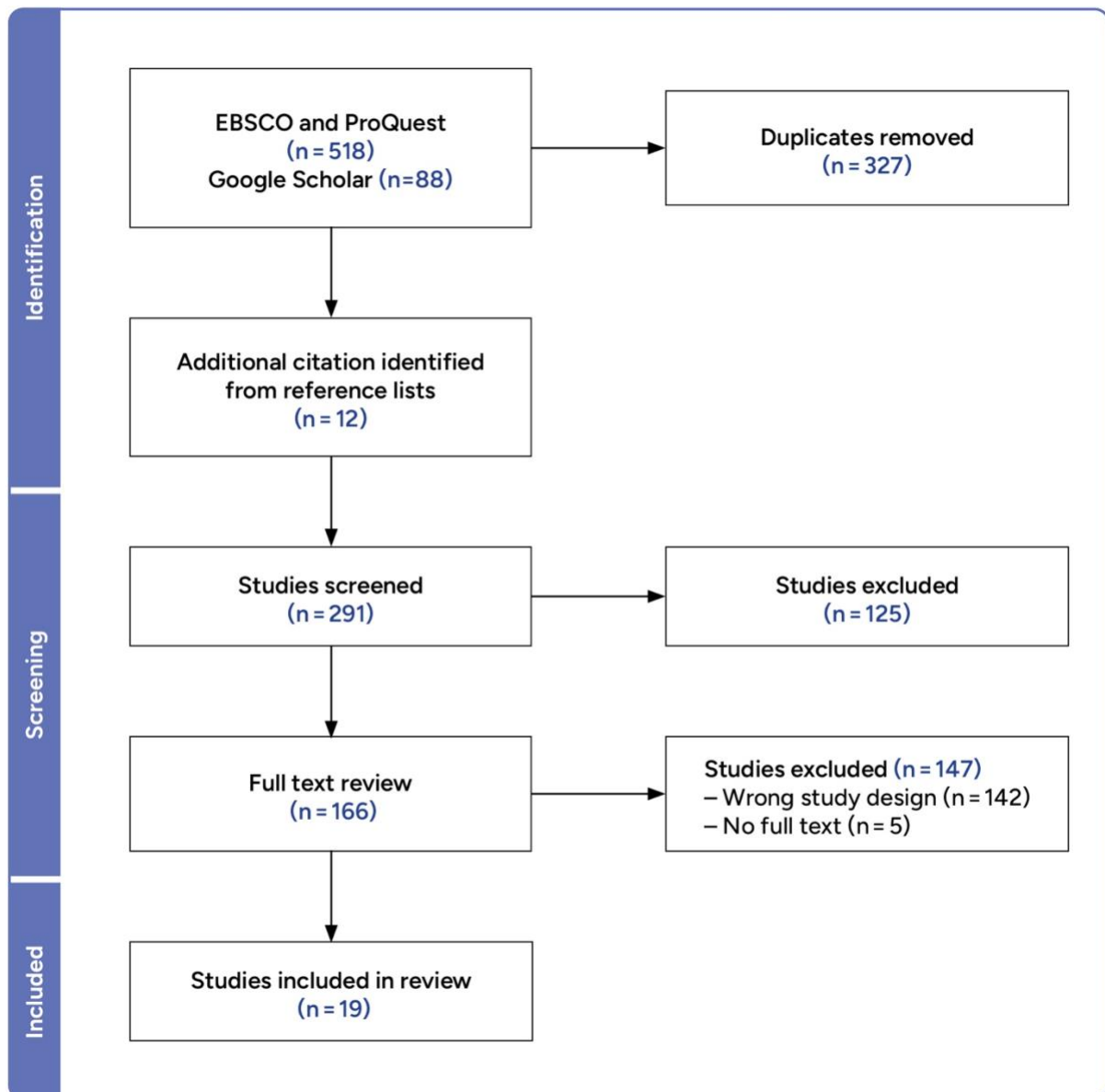
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## Appendix A: The review scoping process

Flow chart of the scoping review process



## Appendix B: Co-occurrence in general population samples

Studies reporting prevalence rates for co-occurring child sexual abuse and domestic violence in general populations (n=9)

Study	Prevalence of child sexual abuse and domestic violence	Country	Sample	Methodology
Afifi et al. (2015)	<p>2.8% overall prevalence in both categories</p> <p>2.4% (3.2% female, 1.5% male) experienced sexual abuse, exposure to intimate partner violence (IPV) and physical abuse</p> <p>0.4% (0.8% female, 0.04% male,) experienced sexual abuse and exposure to IPV</p>	Canada (10 provinces)	n = 23,395 50% female, 50% male	<p>Secondary data analysis from the Canadian Community Health Survey-Mental Health (CCHS-2012)</p> <p>Representative general population sample</p>
Ahmadabadi et al. (2018)	12% (18.9% female, 1% male) experienced child sexual abuse with maternal IPV victimisation	Australia (Queensland)	n = 2,064 59% female, 43% male	<p>Secondary data analysis of the Mater Hospital and University of Queensland Study of Pregnancy (Najman et al., 2005) – a longitudinal study using surveys – mothers asked about IPV at 14-year follow-up and adult children asked about child sexual abuse at 30-year follow-up.</p> <p>Convenience sample</p>

Fuller- Thomson and Agbeyak (2020)	5.3% (2010) 6.6% (2012) weighted averages* 7.7% of women and 1.6% of men experienced child sexual abuse and exposure to parental IPV in 2010 8.1% of women and 4.3% of men in 2012	United States (7 states)	2010: n = 22,868 60% female, 40% male  2012: n = 29,801 61% female, 39% male	Secondary data analysis of the Brief Risk Factor Surveillance Survey (BRFSS) of the Centers for Disease Control and Prevention that used phone interviews from a population-based sample of adults with landlines.  2010: DC, Hawaii, Nevada, Vermont, and Wisconsin 2012: Iowa, Tennessee, and Wisconsin  Regionally representative sample
Hamby (2010)	5.3% of children experienced sexual abuse by a known adult and witnessed intimate partner violence	United States	n = 4,549 50% female, 50% male	Secondary data analysis of the National Survey of Children's Exposure to Violence (NatSCEV) that used telephone interviews with caregivers of children aged 0–10 and youth aged 10–17 using random digit dialling.  Nationally representative sample
Herbert et al. (2023)	0.9% weighted average* 0.4% men and 1.3% women experienced child sexual abuse and parental domestic violence	UK (Avon)	n = 6,252 52% female, 48% male	Secondary data analysis using Avon Longitudinal Study of Parents and Children (ALSPAC), which invited all pregnant women to participate between 1991 and 1992 in the Bristol area. The data was drawn on reporting from the pregnant mother and their children at 25 years of age.  Volunteer sample
Higgins et al. (2023)	3% (2.2% male, 3.9% female) experienced sexual abuse and exposure to domestic violence	Australia	n = 8,503 50% female, 50% male	Secondary data analysis of the Australian Child Maltreatment Study (ACMS) Telephone interviews of people aged 16 or older using random digit dial via an advance text message

				inviting participation, with a follow-up phone call. Random population sample
Kennedy et al. (2012)	27% of female adolescents experienced sexual victimisation and family violence	United States (Chicago)	n = 180 100% female	Survey of urban African American female adolescents aged 14–19 at a public charter high school in a disadvantaged community in Chicago. Convenience sample
Miranda et al. (2021)	11.6% of adolescents experienced sexual assault by a known adult and IPV exposure in their lifetime	Chile	n = 19,684 50% female, 50% male	Survey of students from 7th to 11th grade in 699 schools using stratified sampling in three stages (schools, classrooms, and students). Random sample
Saed and Talat (2013)	1.6% co-occurrence of child sexual abuse and IPV exposure	Iraq (Erbil)	n = 300 66% female, 34% male	Survey of college students from four colleges (Education, Art, Nursing, and Medicine) in Erbil. Random sample

\*Note: If data on overall prevalence were not reported in a study, weighted averages were calculated using reported estimates for female and male victimisation and the proportion of women and men in the sample

# Appendix C: Co-occurrence in domestic violence survivor samples

Studies reporting prevalence rates for child sexual abuse in domestic violence populations (n = 6)

Study	Prevalence of child sexual abuse and domestic violence	Country	Sample	Methodology
Avery et al. (2002)	11% of children experienced child sexual abuse	United States	n = 570 50% female, 50% male	Secondary data analysis of case records from a domestic violence shelter for women in which children received services.  Convenience sample
Chan et al. (2023)	1% of children experienced child sexual abuse as reported by their mothers	China (Hong Kong)	n = 260	Survey of 260 women living in three major domestic violence shelters about their experience of domestic violence and the experience of child abuse of their children.  Convenience sample
Dong (2004)	36.4% of people who witnessed domestic violence also experienced child sexual abuse	United States (San Diego)	n = 8,629 54% female, 46% male	Secondary data analysis of the ACEs Study data (Felitti et al., 1998) that used a survey of adult members of the Kaiser Health Plan who had received an examination at the Health Appraisal Center.  Convenience sample

Herbert et al. (2023)	4.3% of domestic violence-exposed households reported child sexual abuse	UK (Avon)	n = 6,252 52% female, 48% male	Secondary data analysis using Avon Longitudinal Study of Parents and Children (ALSPAC), which invited all pregnant women to participate between 1991 and 1992 in the Bristol area. The data was drawn on reporting from the pregnant mother and their children at 25 years of age.  Volunteer sample
McCloskey et al. (1995)	1.8% reported paternal sexual abuse in families with domestic violence (according to children)  3.6% reported paternal sexual abuse in families with domestic violence (according to mothers)	United States	n = 730 (365 mothers and 365 children - 50% female, 50% male)	In-depth interviews of battered and nonbattered women and their children.  Convenience sample
Saed and Talat (2013)	8.1% of those who were exposed to IPV also experienced child sexual abuse	Iraq (Erbil)	n = 300 66% female, 34% male	Survey of 300 college students from four colleges (Education, Art, Nursing, and Medicine) in Erbil  Random sample

\*Note: If data on overall prevalence were not reported in a study, weighted averages were calculated using reported estimates for female and male victimisation and the proportion of women and men in the sample

## Appendix D: Co-occurrence in child sexual abuse survivor samples

Table 3: Studies reporting prevalence rates for domestic violence in child sexual abuse populations (n = 9)

Study	Prevalence of child sexual abuse and domestic violence	Country	Sample	Methodology
Bell (2002)	91% of mothers of incestuously abused children reported violence from their partners	UK (Scotland)	n = 11 100% female	In-depth interviews Convenience sample
Bowen (2000)	54% of mothers of sexually abused children reported domestic violence at home	United States (Arizona)	n = 402 82% female, 18% male	Survey of families of children seen in a sexual abuse evaluation clinic regarding domestic violence in the child's home. Children aged from 7 months to 18 years. Convenience sample
Goddard and Hiller (1993)	40% of child sexual abuse survivors reported domestic violence in the family	Australia (Melbourne)	n = 206	Secondary analysis based on the data from the Child Protection Unit, Royal Children's Hospital in Melbourne. Convenience sample
Dong (2004)	22.6% of people who experienced child sexual abuse also witnessed domestic violence in childhood	United States (San Diego)	n = 8,629 54% female, 46% male	Secondary data analysis of the ACEs Study (Felitti et al., 1998) that used a survey of adult members of the Kaiser Health Plan who had received an examination at the Health Appraisal Center. Convenience sample

Hamby (2010)	70.9% of children who were sexually abused by a known adult also witnessed intimate partner violence	United States	n = 4,549 50% female, 50% male	Secondary data analysis of the National Survey of Children's Exposure to Violence (NatSCEV) that used telephone interviews with caregivers of children aged 0–10 and youth aged 10–17 using random digit dialling. Nationally representative sample
Herbert et al. (2023)	30% of sexually abused children (33.3% male, 26.5% female) were exposed to parental domestic violence abuse	UK (Avon)	n = 6,252 52% female, 48% male	Secondary data analysis using Avon Longitudinal Study of Parents and Children (ALSPAC), which invited all pregnant women to participate between 1991 and 1992 in the Bristol area. The data was drawn on reporting from the pregnant mother and their children at 25 years of age. Volunteer sample
Hooper (1992)	81.8% of mothers whose children had been sexually abused by their fathers/father substitutes were abused by the same perpetrator	UK	n = 15 93% female, 7% male	Interviews with 15 women whose children had been sexually abused. Convenience sample
Kellogg and Menard (2003)	52% of sexually abused children indicated IPV at home	United States (Texas)	n = 164 90% female, 10% male	Secondary data analysis of 164 children's charts from sexual abuse clinic (ages 7-19). Convenience sample
Truesdell et al. (1986)	73% of mothers of incestuously abused children reported physical violence from their spouse	United States (Texas)	n = 30 100% female	Survey of a mother's group of the incest treatment program offered by the Texas Department of Human Resources. Convenience sample