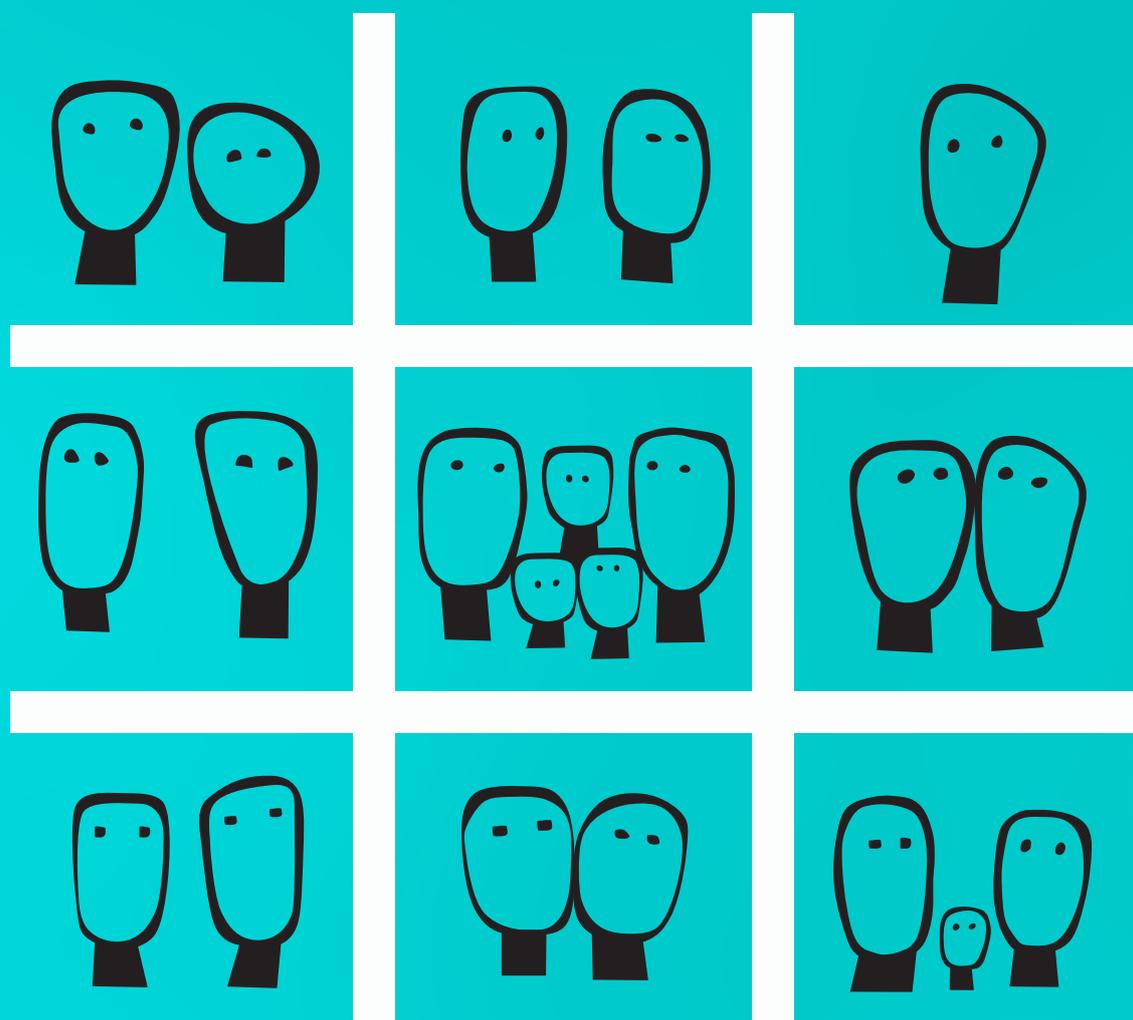


Intimate Relationships in Australia

A proposed new annual longitudinal study of the Australian population



Anne Summers
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and Thomas Shortridge

Business School
University of Technology Sydney
March 2026

This report was produced with funding from the Paul Ramsay Foundation and the Snow Foundation. We thank them for their generous support.

How to cite this report: A. Summers, M. O’Loughlin, & T. Shortridge. (2026). *Intimate Relationships in Australia (IRINA): A proposed new annual longitudinal study of the Australian population*, University of Technology Sydney.

The report can also be found on the following website: www.annesummersresearch.com

Report design by Libby Blainey: www.libbyblainey.com.au

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Paul Ramsay Foundation (PRF) works for a future where people and places have what they need to thrive. With organisations and communities, it invests in, builds, and influences the conditions needed to stop disadvantage in Australia.

This research was funded by PRF (grant number: 142).

Snow Foundation

www.snowfoundation.org.au

The Snow Foundation creates opportunities and strengthens resilience for a more caring and inclusive community where everyone can thrive.

This research was supported by a donation from the Snow Foundation.

Any opinions, findings or conclusions expressed in this report are those of the authors and do not necessarily reflect the views of PRF or the Snow Foundation.

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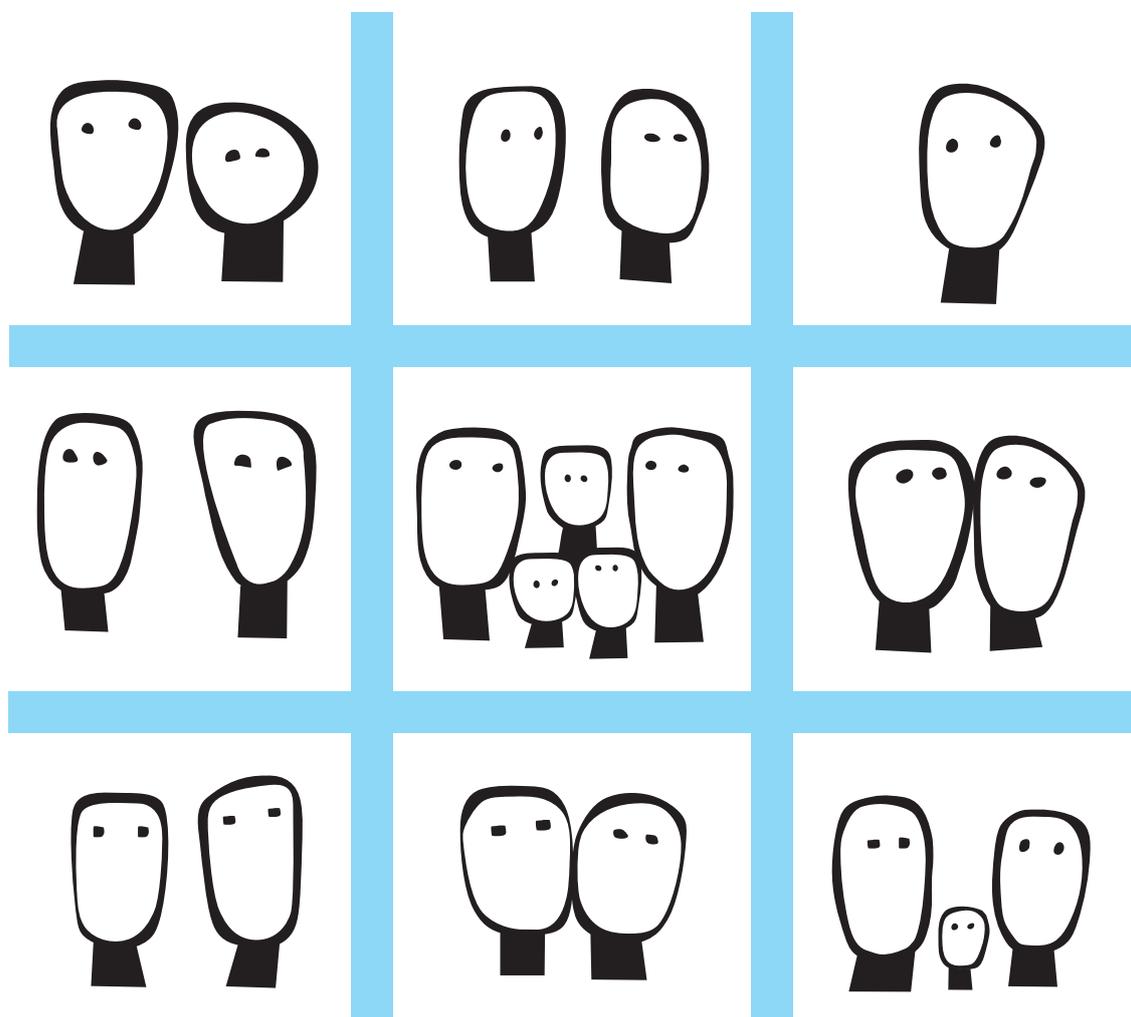
The authors are grateful to UTS for hosting this project, and in particular wish to thank Business School Dean Professor Carl Rhodes, Interim Dean Professor Sara Denize, Associate Dean Kathy Walsh and Pro-Vice Chancellor (Social Justice and Inclusion) Amy Persson for their support.



The authors acknowledge Aboriginal and Torres Strait Islander peoples as the first inhabitants of the nation and the traditional custodians of the lands where we live, learn and work.

Intimate Relationships in Australia

A proposed new annual longitudinal study of the Australian population



Anne Summers AO PhD
Mary Ann O'Loughlin AM
and Thomas Shortridge

Business School
University of Technology Sydney
March 2026

We commit to ending violence against women and children in Australia in one generation.

Commonwealth of Australia
(Department of Social Services). (2022).
National plan to end violence against women and children 2022–2032

Information on perpetrators is lacking, with limited longitudinal evidence to understand patterns of offending or engagement with the justice system.

Commonwealth of Australia
(Domestic, Family and Sexual Violence Commission). (2025).
Yearly report to parliament

Currently, there is a significant lack of research and data on Aboriginal and Torres Strait Islander women, children and families' experiences of violence, as well as the causes, drivers and multiple forms of marginalisation that contribute to violence.

Commonwealth of Australia
(Department of Social Services). (2026).
*Our Ways – Strong Ways – Our Voices:
National Aboriginal and Torres Strait Islander Plan to End Family,
Domestic and Sexual Violence 2026–2036*

We do not collect longitudinal data, which is necessary to understand what triggers or increases the risk, onset and escalation of intimate partner violence.

Dr Hayley Boxall,
Research Fellow,
ANU College of Arts and Social Sciences

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Definitions and language

Intimate partner violence

There is still no nationally agreed upon definition of domestic violence in Australia. A variety of terms are used, often interchangeably. These include ‘domestic violence’, ‘intimate partner violence’, ‘domestic abuse’, ‘domestic, family, and sexual violence’ and ‘partner violence’.

Consistent with the National Plan to End Violence against Women and Children 2022–2032 (National Plan), this report defines intimate partner violence as ‘any behaviour within an intimate relationship (including current or past marriages, domestic partnerships or dates) that causes physical, sexual or psychological harm’.¹ The National Plan notes that this term is often used interchangeably with the term ‘domestic violence’.

This report will use both ‘domestic violence’ (DV) and ‘intimate partner violence’ (IPV) when referring to violence and abuse by a current or former partner. At times, the report refers to ‘domestic, family and sexual violence’ (DFSV), as this is the term used by the DFSV Commission, which is responsible for monitoring progress against the National Plan.

Intimate partner

For the report, ‘intimate partner’ refers to any person with whom a respondent has or has had an intimate relationship. This includes current or former spouses (married or de facto), partners who do not live together, and boyfriends/girlfriends/dates.²

Violence and abuse

This report aligns with the language used by the Australian Bureau of Statistics when conducting the Personal Safety Survey. The term ‘violence’ describes the occurrence, attempt or threat of either physical assault or sexual assault.³ The term ‘abuse’ refers to instances of emotional or economic abuse.⁴ Throughout, the report generally refers to ‘violence and abuse’ to capture both of these terms, or does so under the umbrella terms of ‘domestic violence’ and/or ‘intimate partner violence’. When referring to findings from

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- 1 Commonwealth of Australia (Department of Social Services). (2022). *National plan to end violence against women and children 2022–2032*, p. 37 (‘National plan’).
 - 2 The definition of ‘boyfriends/girlfriends/dates’ is consistent with the definition used by the Australian Bureau of Statistics in the Personal Safety Survey 2021–22: ‘This relationship may have different levels of commitment and involvement that does not involve living together. For example, this will include persons who have had one date only, regular dating with no sexual involvement, or a serious sexual or emotional relationship’: Australian Bureau of Statistics (ABS). (2023). *Personal Safety Survey 2021–22*, Glossary, www.abs.gov.au/methodologies/personal-safety-australia-methodology/2021-22#glossary
 - 3 ABS. (2023). *Personal Safety Survey 2021–22*, Glossary, www.abs.gov.au/methodologies/personal-safety-australia-methodology/2021-22#glossary
 - 4 ABS. (2023). *Personal Safety Survey 2021–22*, Glossary, www.abs.gov.au/methodologies/personal-safety-australia-methodology/2021-22#glossary

specific surveys or studies, this report uses the preferred terms of that study. For example, the longitudinal survey of men’s health, Ten to Men, refers to sexual abuse, rather than sexual violence.⁵

Coercive control

As defined in the National Plan, coercive control:⁶

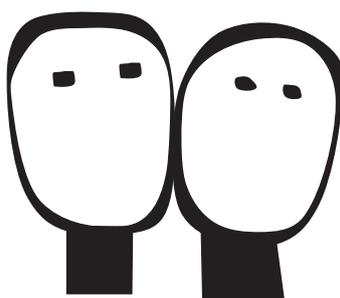
describes someone’s use of a pattern of abusive behaviours against another person over time, with the effect of establishing and maintaining power and dominance over them. Abusive behaviours that perpetrators can use as part of their pattern of abuse include physical abuse (including sexual abuse), monitoring a victim-survivor’s actions, restricting a victim-survivor’s freedom or independence, social abuse, using threats and intimidation, emotional or psychological abuse (including spiritual and religious abuse), financial abuse, sexual coercion, reproductive coercion, lateral violence, systems abuse, technology-facilitated abuse and animal abuse.

Victim-survivors and perpetrators

This report uses the term ‘victim-survivor’ to refer to people who have experienced or are experiencing violence or abuse by a partner.

This report uses the term ‘perpetrator’ to refer to people who have used or are using violence or abuse against a partner.

Most victim-survivors are women and most perpetrators are men.⁷ However, both men and women can be, and are, victim-survivors and/or perpetrators of violence.



5 K. O’Donnell, M. Woldegiorgis, C. Gasser, K. Scurrah, C. Andersson, H. McKay, K. Hegarty, Z. Seidler, & S. Martin. (2025). *The use of intimate partner violence among Australian men*. Ten to Men Insights #3 Report, ch. 1, Australian Institute of Family Studies.

6 Commonwealth of Australia (DSS). (2022). *National plan*, p. 37.

7 ABS. (2023). *Personal Safety Survey 2021–22*, Partner violence, Table 1.1, ‘Persons aged 18 years and over, Experiences of violence and abuse by a cohabiting partner since the age of 15: Estimates and proportions’.

Executive summary

Domestic violence is a national emergency, with up to one woman murdered each week in Australia and many more hospitalised with severe injuries. We know that children witness this violence and often experience it themselves. Governments are united in their opposition to this violence and vow to tackle it – but the toll remains and grows higher every year.

The National Plan to End Violence against Women and Children 2022–2032 acknowledges that governments have not succeeded in the goal of reducing violence against women and children:⁸

The prevalence of violence against women and children has not significantly decreased during the last 12 years and reported rates of sexual assault continue to rise.

A major reason for this lack of progress is that we are not collecting the right data needed to understand the causes, trajectories and consequences of domestic violence. We also do not have the right kind of data to support the development of interventions and programs to disrupt pathways into domestic violence and support pathways out of perpetration and victimisation.

We are not collecting the right data needed to understand the causes, trajectories and consequences of domestic violence.

In particular, we do not collect the necessary longitudinal data to understand what triggers or increases the risk of domestic violence and its escalation, and what helps stop the violence. This also means we cannot examine protective factors – that is, those factors that reduce the risk of domestic violence, even in situations where the individual is exposed to specific risk factors.

We also do not collect adequate data about the perpetrators of violence, or about the services and supports that people access in response to experiencing domestic violence.

Domestic violence is fundamentally relational. It emerges, escalates and persists within the dynamics of intimate relationships. Understanding domestic violence requires a deep understanding of the intimate relationships in which it occurs: their formation, their dissolution, their dynamics, their qualities and their patterns of interaction.

This report proposes a new population-based annual longitudinal study, Intimate Relationships in Australia (IRINA), to generate urgently needed evidence about how intimate relationships form, evolve and end in contemporary Australia. The data collected will show how and why some relationships become abusive or violent, revealing the causes, trajectories and consequences of intimate partner violence (IPV). These insights will be

8 Commonwealth of Australia (DSS). (2022). *National plan*, p. 16.

critical for identifying early warning signs of stress or breakdown in relationships, strengthening prevention and early intervention policies for partner violence, and ensuring that services are responsive to people's needs.

To be serious about ending domestic violence, governments need to change tack. They cannot keep on doing the same thing each year and expect different results. This study offers governments a circuit-breaker, a chance to learn why domestic violence is developing within relationships, and how we can reduce it. Only with the kind of comprehensive data about the pathways into and out of violence provided by a bespoke longitudinal study can we design effective policies to reduce, and ultimately eliminate, IPV – as committed to by all governments under the National Plan to End Violence against Women and Children 2022–2032 and reinforced under the Australian government's Working for Women: A Strategy for Gender Equality.⁹

We recommend the Australian government fund a suitably qualified and trusted organisation to design, manage and deliver IRINA. The data provided by this study will be more than a collection of statistics. It is likely to be life-saving data.

Why IRINA is needed

We need to better understand modern relationships

Intimate partner relationships are among the strongest influences on our wellbeing. Supportive relationships are linked to better mental and physical health, positive outcomes for children, and stronger communities. When relationships deteriorate, they can lead to psychological harm and poorer health outcomes.

Our current data sources have not kept up with these changes in how relationships are formed, experienced and maintained.

Over recent decades, intimate relationships in Australia have changed substantially but these changes are not always well understood. Marriage rates have declined, de facto relationships have become more common, divorce rates have fallen and people are marrying later, often after prior periods of cohabitation. Young adults appear to be forming fewer intimate relationships than earlier generations, a trend sometimes described as a 'relationship recession', and those who do form relationships are increasingly likely to meet online. Our current data sources have not kept up with these changes in how relationships are formed, experienced and maintained.

9 Commonwealth of Australia (DSS). (2022). *National plan*; Commonwealth of Australia (Department of the Prime Minister and Cabinet). (2024). *Working for women: A strategy for gender equality*, p. 34.

We lack the evidence needed to understand contemporary relationship dynamics. We need a new study to capture details about relationship formation, quality, communication, intimacy, conflict and transitions. We need to gain a deeper understanding of what supports relationship stability and satisfaction, and what contributes to relationship deterioration or breakdown.

Violence and abuse in intimate relationships is widespread

More than one in four women have experienced physical, sexual, emotional or economic abuse by a cohabiting partner in their lifetime. The impacts of this violence and abuse are often severe and long-lasting, both on the women who endure them and the children who witness (or themselves experience) such violence or abuse. There are major gaps in our understanding of how IPV begins, escalates, persists, and – if it does – ends.

IPV has also changed dramatically in recent decades. There has been growing recognition that, in addition to physical and sexual violence, domestic violence increasingly involves patterns of coercive control by perpetrators, using emotional abuse, economic abuse, surveillance and harassment to control their partners' lives. Technology now provides the means to control and monitor victims' movements, often remotely, even after separation.

Generating high-quality data on people's experiences before, during and after IPV will enable deeper insights into its patterns, trajectories, causes and consequences, as well as the life circumstances that increase or reduce the likelihood of experiencing or perpetrating IPV. This data will substantially strengthen the national evidence base for preventing and responding to IPV.

Current data sources cannot provide much needed information

Australia has a strong cohort of surveys that collect data about our lives, but none of these can provide the much-needed detailed longitudinal data about intimate relationships and the patterns, trajectories, causes and consequences of IPV.

Australia has a suite of longitudinal studies, but they are not designed to understand intimate relationships in all their complexity.

Australia's main national survey on domestic, family and sexual violence – the ABS Personal Safety Survey (PSS) – is conducted approximately every four years and is a repeated cross-sectional survey. It provides prevalence and trend estimates, but as it is not longitudinal it is unable to track individual changes and transitions, or establish the sequence of events necessary to explain why outcomes occur. Longitudinal data, which track the same people over time, are needed.

Australia has a suite of longitudinal studies, but they are not designed to understand intimate relationships in all their complexity. These studies do not collect detailed enough information about relationship dynamics and changes over time, particularly for non-cohabiting relationships. As IPV is fundamentally relational, it can only be understood in the context of the relationship within which it occurs.

Existing studies do not capture the full range of violent and abusive behaviours that occur within relationships, particularly patterns of coercive control that develop over time. They also provide limited data on accessing services, offering little insight into how and when people seek support for IPV, or how engagement with services changes over time.

These limitations cannot be resolved by adapting existing studies. These longitudinal studies were established for other nationally important purposes and cannot accommodate the extensive additional content required without increasing respondent burden or displacing core questions. Their survey intervals, typically two to three years, are too infrequent to adequately capture dynamic relationship trajectories or the cumulative patterns that characterise coercive control. Existing studies were also not designed with sampling strategies that ensure sufficient numbers of victim-survivors and perpetrators to support detailed, disaggregated analysis of these groups.

As a purpose-built, annual longitudinal study, IRINA will address these gaps by generating detailed longitudinal data on both relationships and IPV.

A dual survey approach

IRINA will be a study comprised of two surveys: a survey of the general population, with a focus on victim-survivors and perpetrators, and a dedicated survey of Indigenous people.

Below, first we describe the design of the general population survey, and then we outline the co-design process to be undertaken with Indigenous organisations to develop the Indigenous survey.

General population survey design

The general population survey has two major research aims:

- to measure and understand how intimate relationships form, change, and sometimes become abusive and violent, and the factors that promote satisfying relationships and reduce the likelihood of unhappy or violent relationships
- to measure and understand the different forms, patterns, trajectories, causes and consequences of IPV, to inform ways to prevent and reduce it.

Survey content

To address the research aims, IRINA will collect information across four core domains.

Demographic and background characteristics

The survey will collect core demographic and socioeconomic information about respondents (for example, age, location, sex, gender, sexual orientation, ethnic background, language spoken, educational background, employment status, finances and disability status).

Intimate relationships

IRINA will capture information on all forms of partner relationships, including those who do not live together. It will measure relationship status, and transitions over time, as well as key dimensions of relationship quality such as satisfaction, communication, intimacy and conflict.

IPV measurement, trajectories, and service use

All forms of IPV will be measured, including physical and sexual violence, emotional and psychological abuse, economic and financial abuse, technology-facilitated abuse and systems abuse.¹⁰ IRINA will track patterns and trajectories of violence and abuse over time, including changes in frequency or severity, the kinds of IPV being experienced or used, and the context in which IPV occurs. There will be a particular focus on patterns of coercive control.

All forms of IPV will be measured, including physical and sexual violence, emotional and psychological abuse, economic and financial abuse, technology-facilitated abuse and systems abuse.

The survey will also collect information on the use of supports and services for IPV, including the kinds of services used, barriers to access, and satisfaction with support received. This will include both mainstream services (for example, hospitals, police and GPs) and specialist services (such as refuges and men's behaviour change programs).

Risk and protective factors

IRINA will collect detailed information on a wide range of risk and protective factors linked to relationship quality and IPV. These include:

- individual factors and behaviours, such as wellbeing and mental health, social connection, adverse childhood experiences, substance abuse, gambling and attitudes to gender roles and violence
- relationship dynamics, such as communication, conflict and relationship satisfaction
- major life events, such as pregnancy, separation, financial shocks, health issues and housing instability.

Sample design

IRINA will focus on three target populations: people aged eighteen and over residing in private dwellings across Australia (excluding very remote areas); victim-survivors of IPV; and perpetrators of IPV.

¹⁰ The National Plan defines system abuse as 'the manipulation of legal and other systems by perpetrators of family violence, done so in order to exert control over, threaten and harass a current or former partner': Commonwealth of Australia (DSS). (2022). *National plan*, p. 133.

As the annual incidence of some forms of IPV is relatively low in the general population, IRINA will use a two-stage sampling approach to ensure sufficient representation of victim-survivors and perpetrators.

In stage 1, a large random sample of adults across Australia will be selected. This sample will be screened to identify individuals who have experienced or perpetrated IPV, or who are at elevated risk.

From stage 2 onwards, all identified victim-survivors, perpetrators, and high-risk individuals will be retained in the study. The comparison group with no identified IPV experience or risk at stage 1 will also be studied. Surveying the comparison group over time will allow a study of the onset of IPV and its contributing factors from a sample of people who had not previously reported experiencing and/or perpetrating IPV.

Survey frequency

IRINA will be conducted annually to capture the dynamic nature of intimate relationships and IPV. Because relationship circumstances and experiences of abuse can change rapidly, annual data collection enables more accurate tracking of relationship transitions and the onset and trajectories of violence – including patterns of coercive control which develop through cumulative patterns of behaviour over time. For example, annual data can better reveal the sequence and timing of changes in IPV, such as a shift from emotional abuse to physical violence, that are harder to detect with less frequent data collection.

IRINA will be conducted annually to capture the dynamic nature of intimate relationships and IPV.

Annual data collection also strengthens data quality and causal analysis by improving participants' recall accuracy and supporting participant retention.

Data collection

IRINA will use a face-to-face data collection approach that combines interviewer-led questions with self-completion modules for sensitive content. Interviews will be conducted in private, safe settings by specially trained, trauma-informed interviewers, and participants will be able to skip questions or withdraw from sensitive sections at any time. All participants will also be provided with information about relevant support services.

Study governance

IRINA will require clear governance arrangements to ensure effective delivery and strong safeguards. We recommend the Australian government fund a suitably qualified and trusted organisation to design, manage and deliver the study. This will include attaining ethics approvals, complying with relevant privacy requirements, and developing a comprehensive safety plan for respondents and interviewers.

We also recommend governance arrangements include expert advisory mechanisms, including a technical and policy advisory group and a Lived Experience Panel of victim-survivors.

A dedicated Indigenous survey

As part of the overall study, we recommend a dedicated survey of Indigenous people. The recommendation is based on advice from the Indigenous Expert Group established to advise the project. Having a dedicated survey will ensure culturally safe data collection, Indigenous-led governance, and content that reflects Indigenous priorities and experiences, including forms of violence that go beyond intimate relationships.

The Indigenous survey should be developed through a comprehensive co-design process with Indigenous experts, communities, peak bodies and service organisations, including the new National Aboriginal and Torres Strait Islander Peak Body to address Family, Domestic and Sexual Violence. It should also be aligned with the newly released Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Family Safety Plan.¹¹

The Indigenous survey should be developed through a comprehensive co-design process with Indigenous experts, communities, peak bodies and service organisations.

Conclusion

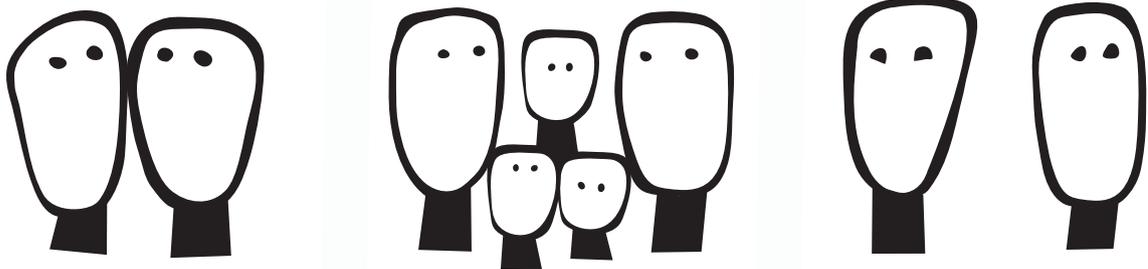
We are confident the Australian government, which has already given us in-principle support for this project, will see the wisdom in taking up this much needed study and selecting a suitably qualified body to administer it. Although it will take several years for meaningful results to flow through because of the longitudinal nature of the study, the benefits will be of immeasurable national value. Not only will we learn new things about ourselves, and how we relate to each other, but we will have created a new and invaluable data asset that will guide our knowledge, and our policy-making for decades to come.

¹¹ Commonwealth of Australia (DSS). (2026). *Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Plan to End Family, Domestic and Sexual Violence 2026–2036*.

Recommendations

The authors of this report recommend that the Australian government:

1. Agree to conduct an annual longitudinal study on intimate relationships and intimate partner violence – Intimate Relationships in Australia (IRINA) – informed by the design outlined in this report.
2. Fund a suitably qualified and highly trusted organisation to conduct IRINA. The organisation would be responsible for the testing and piloting of the study, as well as its design, delivery and management.
3. Set up an advisory group to advise on the design, development and implementation of IRINA. As well as technical expertise in conducting longitudinal studies, the group should include experts with relevant policy understanding and service delivery experience. We also recommend a Lived Experience Panel of victim-survivors be set up to share their insights and advice to shape the survey design and delivery.
4. Support and fund the design by Indigenous organisations, peak bodies and community leaders of a survey that is representative of Indigenous people that will be included within the overall IRINA study. This co-design process will define the focus and scope, data collection methods and governance of this dedicated Indigenous survey.



Chapter 1: Introduction

This report proposes a new population-based longitudinal study: Intimate Relationships in Australia (IRINA). IRINA would be conducted annually and would provide currently unknown but urgently needed information about why some relationships are satisfying and supportive and why others can become unhappy and conflict-ridden.

IRINA will also provide data on the causes, trajectories and consequences of partner violence. This evidence is essential for designing policies and programs to disrupt pathways into violence and support governments' commitment, under the National Plan to End Violence against Women and Children 2022–2032, to end violence within a generation.

This introduction provides background information on the process that has been undertaken to develop the proposal for IRINA.

The project began in December 2022 with a substantial grant from the Paul Ramsay Foundation to fund two projects initiated by Dr Anne Summers, who was already based at the Business School of the University of Technology Sydney. The projects were (1) a study of the impact of domestic violence on women's employment (which was later expanded to include the impacts of such violence on women's education);¹² and (2) a proposal for the Australian government to undertake a longitudinal study into various social issues, including domestic and family violence in Australia. We later received additional funding from the Snow Foundation to support the latter project. In August 2023, Mary Ann O'Loughlin and Thomas Shortridge were recruited to the research team, and work began concurrently on both projects.

We conducted extensive consultations with ministers, senior public servants, researchers, data experts and representatives from the domestic violence sector, and received widespread support for a new longitudinal study focused on the collection of data on intimate partner violence (IPV). This encouraged us to approach the government.

On 21 May 2024, we wrote to Senator the Hon Katy Gallagher, Minister for Finance, Minister for Women and Minister for the Public Service, and the Hon Amanda Rishworth MP, then the Minister for Social Services, informing them that we wished to design a new longitudinal study on domestic, family and sexual violence (DFSV) and seeking their support in principle for the project. We stressed that we were not seeking financial assistance at this stage. The ministers replied to us on 4 July 2024, giving the project their in-principle support and offering the services of officers from their relevant departments to provide us advice on the project (see Appendix 1).

We put together a 25-member Working Group to advise the project. Its members included representatives from government agencies such as the Department of Social Services (DSS), the Australian Bureau of Statistics (ABS), the Australian Institute of Family Studies (AIFS),

12 A. Summers, T. Shortridge, & K. Sobek. (2025). *The cost of domestic violence to women's employment and education*, University of Technology Sydney, www.doi.org/10.71741/4pyxmbnjq.28489736

the Australian Institute of Health and Welfare (AIHW), the National Data Commission and the Office for Women, Department of the Prime Minister & Cabinet; academics specialising in survey design and in domestic violence research; and leaders from the domestic violence sector. From this group was drawn a Technical Group, whose members had expertise in survey design and other technical aspects of longitudinal studies, and an Indigenous Expert Group, which undertook to provide input on the major issues of survey design as they related to Indigenous people. The Working Group held its first meeting, in person, on 8 October 2024 (see Appendix 4 for the membership and meeting schedules of the advisory groups).

The Working Group and Technical Group provided advice from a range of expert perspectives and, although we did not achieve consensus on a number of issues, this report has been informed by their advice. However, it is important to be clear that the arguments and recommendations in this report reflect the views of the authors of the report and not necessarily those of members of the Working Group.

Throughout the year, these groups provided key guidance on the direction of the proposed study. This included changing the original proposal that this study be a household study, that is one that interviews all members of a household (as is the methodology used by the Household, Income and Labour Dynamics in Australia (HILDA) survey). After careful investigation of the safety risks we decided not to proceed with the household study (see Appendix 2). Instead, IRINA will interview men and women separately in separate households, without the other partner being present or even aware that the interview is taking place.

The Indigenous Expert Group advised that the study should include a dedicated survey of Indigenous people. Given the differences in the experiences of domestic violence by Indigenous people, this survey would allow for a different scope of violence to be included, targeted content areas, culturally appropriate collection methods, and Indigenous-led governance.¹³ The group also recommended that the survey be developed through a formal co-design process.

As such, IRINA will be a longitudinal study comprised of two surveys:

- a dedicated survey for Indigenous people (Chapter 2 describes the considerations and process for developing this survey)
- a general survey for the Australian population (Chapters 3 to 8 outline the rationale and survey design, including survey content, sample design, survey frequency, data collection methods and governance).

13 K. Cripps. (2023). Indigenous women and intimate partner homicide in Australia: Confronting the impunity of policing failures. *Current Issues in Criminal Justice*, vol. 35, no. 3, pp. 293–311; C. Brown, M. Yap, A. Thomassin, M. Murray, & Eunice Yu. (2021). *'Can I just share my story?': Experiences of technology-facilitated abuse among Aboriginal and Torres Strait Islander women from regional and remote areas*. eSafety Commission; M. Longbottom, & K. Mills. (2025). Exploring family and domestic violence through hospital admission data in regional and remote Queensland, Australia. *Current Issues in Criminal Justice*, pp. 1–15.

Chapter 2:

A survey for Indigenous people

At the first meeting of the Working Group, Indigenous members noted that it would be valuable to have discussions between themselves to advise on matters specific to Indigenous people. In response, the Indigenous Expert Group was formed, and met to advise on key issues relating to Indigenous people.

The Indigenous Expert Group determined that the best method for meaningfully including Indigenous people in IRINA is through a dedicated survey.

A major issue considered by the Indigenous Expert Group was how to ensure that Indigenous people were properly represented in this study. As Indigenous people comprise only a small proportion of the Australian population, the general survey will not produce results that are representative of Indigenous people and their experiences. Similarly, the general survey will not be targeted to address content and topic areas that are the most important and relevant for Indigenous people, researchers, organisations and services. Given the disproportionate impact that violence has on Indigenous people, it is critical to develop a survey that can produce meaningful insights to inform effective prevention strategies.¹⁴

The Indigenous Expert Group determined that the best method for meaningfully including Indigenous people in IRINA is through a dedicated survey focused on Indigenous people. This Indigenous survey should be designed in partnership with Indigenous experts, organisations and peak bodies.¹⁵

A dedicated survey

This key decision to have a dedicated survey focused on Indigenous people replaced an earlier idea of making modifications to the general survey (such as oversampling Indigenous people or having a separate Indigenous module of questions). Having a dedicated survey will allow for a unique survey focus and scope, culturally safe data collection methods, and Indigenous-led governance arrangements.

14 In 2023–24, nearly half of the total number of women (7,000) in Australia hospitalised for domestic and family violence were Indigenous (3,400): AIHW. (2025). *National Hospital Morbidity Database*, NHMD 1, 'Family and domestic violence hospitalisations, by relationship to perpetrator and age group, 2019–20 to 2023–24'; AIHW. (2025). *National Hospital Morbidity Database*, NHMD 3, 'Family violence hospitalisations among First Nations people, by sex, age group and relationship to perpetrator, 2019–20 to 2023–24'.

15 It was beyond the scope of this project to undertake this process to design the Indigenous survey.

The Indigenous Expert Group provided some initial guidance on the parameters of this survey, but ultimately determined that, given the critical importance and complexity of the survey, it should be developed separately through a co-design process with Indigenous communities and sector organisations. Co-design is crucial to creating a survey that genuinely reflects the diverse realities and priorities of Indigenous people.

This process will involve structured engagement with peak Aboriginal Community-Controlled Organisations (ACCOs), domestic and family violence services, community leaders, and researchers with expertise in Indigenous methodologies. This must include the new National Aboriginal and Torres Strait Islander Peak Body to address Family, Domestic and Sexual Violence.¹⁶ This process should also ensure that the dedicated survey is aligned with Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Family Safety Plan.¹⁷

Through co-design, decisions about the survey’s scope, content, sampling approaches and data collection methods can be made in ways that are culturally safe and inclusive. This includes determining what sensitive questions may be appropriate to ask, and identifying the supports required to ensure participant wellbeing and safety. The process will also clarify governance arrangements, ensure Indigenous leadership in oversight and data access, and embed principles of Indigenous Data Sovereignty (IDS) to safeguard community control over the use of information.

This survey will fill a major gap in the Indigenous data landscape.

A dedicated Indigenous survey will provide valuable new insights on the experiences of Indigenous people. As there is currently no survey that collects detailed information about Indigenous people’s experiences of domestic and family violence, this survey will fill a major gap in the Indigenous data landscape.¹⁸

Benefits of a dedicated survey

Focus and scope

Oversampling Indigenous respondents within the general survey would limit these respondents to survey questions that are primarily designed for non-Indigenous participants. Even with additional modules or revised wording, the survey would still be limited in its ability to collect information that is directly relevant for Indigenous people.

16 Coalition of Peaks. (2025). *Establishing a national Aboriginal and Torres Strait Islander peak body to address family, domestic and sexual violence*, www.coalitionofpeaks.org.au/family-domestic-and-sexual-violence-peak-body

17 Commonwealth of Australia (DSS). (2026). *Our Ways – Strong Ways – Our Voices: National Aboriginal and Torres Strait Islander Plan to End Family, Domestic and Sexual Violence 2026–2036*.

18 There are two longitudinal studies of Indigenous people: the Longitudinal Study of Indigenous Children (LSIC) and Mayi Kuwayu. LSIC asks one question of primary carers about whether there are arguments with a partner that involve pushing, hitting, kicking and shoving: see L. Kneebone. (2015). *Partner violence in the longitudinal study of Indigenous children*, National Centre for Longitudinal Data, Research summary, no. 3/2015, www.dss.gov.au/system/files/documents/2024-10/research_summary_no_3_2015_4_jan_2106.pdf. Mayi Kuwayu does not include questions about individual experiences of violence.

Allowing for a unique focus and scope ensures that the survey produces a more accurate and meaningful account of the drivers, contexts and protective factors shaping Indigenous people's experiences, rather than replicating the focus of the general survey. For example, the Indigenous Expert Group recommended that the dedicated survey should collect information about all forms of violence experienced by Indigenous people, not only violence within the context of an intimate relationship, which is the scope of the general survey.

Data collection

A dedicated survey would more easily allow for the use of culturally safe and trauma-informed data collection methods for Indigenous respondents. A specialised survey would enable survey instruments to be tailored with appropriate language, tone and framing, and allow data collection to be undertaken through customised processes, such as employing Indigenous interviewers or community-based recruitment.

One potential approach to using dedicated survey methodologies, as employed by the Family and Community Safety (FaCtS) study, is outlined in Box 1 below.¹⁹ The FaCtS study, conducted by the Australian National University in 2017, worked with 18 Aboriginal communities across urban, rural and remote areas to better understand the drivers of violence against Indigenous people, and how prevention responses could be strengthened.²⁰

Box 1: Data collection used by the FaCtS study

A cadre of local Aboriginal and/or Torres Strait Islander researchers, trained to coordinate and administer surveys and conduct focus groups/interviews, undertook most of the data collection from community members. These community researchers received training from the study team and then became involved in several aspects of the work: conducting the focus groups, analysing and reporting on proposed themes, and grounding the analysis within their own experiences of working with their communities.

Community researchers and members of the fieldwork team conducted the focus groups. Where all interview/focus group participants provided consent, the discussions were audio recorded. If one or more participants did not want to be audio recorded in a focus group, notes were taken instead. Participants were informed that data would be de-identified.

Source: J. Guthrie, et al. (2020). *'The answers were there before white man come in': Stories of strength and resilience for responding to violence in Aboriginal and Torres Strait Islander communities*, Family and Community Safety for Aboriginal and Torres Strait Islander Peoples Study Report, ANU, pp. 14–27.

19 J. Guthrie, K. Thurber, R. Lovett, M. Gray, E. Banks, A. Olsen, B. Calabria, N. Priest, P. Dance, J. Thandrayen, E. Colonna, R. Cohen, M.-M. Brinckley, S. Wells, M. Salmon, K. Doery, N. Movva, T. Dunbar, & V. Hovane. (2020). *'The answers were there before white man come in': Stories of strength and resilience for responding to violence in Aboriginal and Torres Strait Islander communities – Family and Community Safety for Aboriginal and Torres Strait Islander Peoples Study Report*, Australian National University, pp. 14–27.

20 Guthrie, et al. (2020). *'The answers were there before white man come in'*.

The Longitudinal Study of Indigenous Children (LSIC) data collection methods have also been supported as an example of better practice data collection.

Box 2: LSIC data collection methods

LSIC collects data through annual face-to-face interviews with Aboriginal and Torres Strait Islander families. Interviews are conducted by Aboriginal and Torres Strait Islander Research Administration Officers (RAOs), who live in the study areas. As far as possible, the RAOs are kept consistent across the different waves of the study so that connections and rapport can be established between the RAO and the survey respondents. The main respondent is Parent 1 (usually the child's mother), but data are also gathered from the study child or youth, other carers, and teachers or principals. LSIC combines quantitative surveys and qualitative responses, allowing participants' own words to be captured alongside structured measures. The project is overseen by an Indigenous-majority Steering Committee, ensuring that data collection methods are culturally respectful, community-embedded, and responsive to families' needs.

Source: J. Rogers, et al. (2025). *Footprints in time: The Longitudinal Study of Indigenous Children – Early childhood report*, Queensland University of Technology.

Appropriate data collection practices have additional benefits for engagement and retention within the survey. For example, a longitudinal birth cohort study of babies born in remote Aboriginal communities in the Northern Territory reported that the high rates of retention, even for hard-to-reach participants, over the course of the study was a result of their community consultation and culturally appropriate data collection practices.²¹

Governance

A dedicated survey improves the ability to have Indigenous-led governance, leadership and management of the survey. Governance structures that ensure accountability to Indigenous stakeholders will be more effective within a dedicated survey.

The governance for the dedicated study will need to be Indigenous-led and consist of an Indigenous-majority membership. A critical role for the governance structure will be ensuring appropriate access to, and use of, the data generated from the survey, and that researchers do not misinterpret the data to stigmatise or demonise Indigenous people and communities.

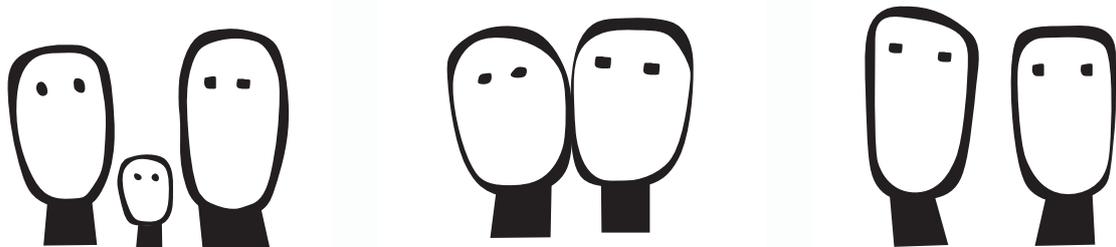
Independent governance is essential to ensure proper implementation of IDS principles. IDS is:²²

the right of Indigenous peoples to govern the collection, ownership and application of data about Indigenous communities, peoples, lands, and resources.

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- 21 M. Lawrence, S. Sayers, & G. Singh. (2014). Challenges and strategies for cohort retention and data collection in an Indigenous population: Australian Aboriginal birth cohort. *BMC Medical Research Methodology*, vol. 14, no. 31.
- 22 G. Bodkin-Andrews, M. Walter, V. Lee, T. Kukutai, & R. Lovett. (2019), *Delivering Indigenous Data Sovereignty*, presentation at 2019 National Indigenous Research Conference.

Professor Maggie Walter, the co-chair of the Indigenous Expert Group, highlights the importance of IDS as a response to the Indigenous data paradox.²³ This paradox lies in the fact that there is simultaneously too much and too little data about Indigenous people. On the one hand, vast amounts of data are collected through official statistics and administrative records, but these data are often irrelevant, unhelpful or harmful to Indigenous communities. On the other hand, there is a significant lack of data generated by Indigenous people themselves, for their own priorities and purposes.

This dedicated survey, co-designed with Indigenous communities and organisations, will help to address this lack of relevant, useful and appropriate data.



23 M. Walter. (2018). The voice of Indigenous data: Beyond the markers of disadvantage. *Griffith Review*, vol. 60, pp. 256–263.

Chapter 3: Why a new study?

Research aims

Intimate Relationships in Australia (IRINA) will generate longitudinal evidence on how intimate relationships form, change, and sometimes become violent or abusive. By examining the dynamic factors that shape these trajectories over time, it seeks to identify the mechanisms and protective factors that promote healthy and satisfying relationships and reduce the likelihood of unhappy or abusive relationships.

IRINA will also improve our understanding of victimisation and perpetration of intimate partner violence (IPV) in Australia, including for different forms of violence and abuse (for example, physical violence, emotional abuse and economic abuse), with a particular focus on perpetration. This will include understanding the patterns, experiences, causes, trajectories, impacts and consequences of IPV, to inform ways to help prevent and reduce it.

Understanding intimate partner relationships

If we are to understand Australian society in all its complexity, we need to know far more than we already do about the intimate relations we form with partners, and how they shape our lives and our country. Intimate partner relationships are among the most powerful determinants of wellbeing. A supportive, respectful and stable partnership provides emotional security and practical assistance, and contributes to both mental and physical health.²⁴ Positive relationships foster life satisfaction, improve resilience in the face of stress, and help individuals navigate challenges in their lives.²⁵ High-quality relationships also have important and not always acknowledged societal benefits. As well as being a basis for individual emotional and even physical wellbeing, they support effective parenting and improve community stability.²⁶

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- 24 J. Kansky. (2018). What's love got to do with it?: Romantic relationships and well-being, in E. Diener, S. Oishi, & L. Tay (eds), *Handbook of well-being*. DEF Publishers, pp. 619–642; D. Umberson, R. Crosnoe, & C. Reczek. (2010). Social relationships and health behavior across the life course. *Annual Review of Sociology*, vol. 36, no. 1, pp. 139–157.
- 25 S. Braithwaite, & J. Holt-Lunstad. (2017). Romantic relationships and mental health. *Current Opinion in Psychology*, vol. 13, pp. 120–125; D. Umberson, & J. Montez. (2010). Social relationships and health: A flash-point for health policy. *Journal of Health and Social Behavior*, vol. 51(S), pp. S54–S66.
- 26 R. Lerman. (2002). *Marriage and the economic well-being of families with children: A review of the literature*, report prepared for the US Department of Health and Human Services, Washington D.C.; C. Nicolaus, V. Kress, M. Kopp, & S. Garthus-Niegel. (2021). The impact of parental relationship satisfaction on infant development: Results from the population-based cohort study DREAM, *Frontiers in Psychology*, vol. 12, pp. 1–14; J. Goldberg & M. Carlson. (2014). Parents' relationship quality and children's behavior in stable married and cohabiting families. *Journal of Marriage and Family*, vol. 76, no. 4, pp. 762–777.

In contrast, when intimate relationships are marked by persistent conflict or dissatisfaction, they can have significant, and mostly negative, consequences. Relationship distress is linked to greater psychological stress and poorer physical health for the partners in the relationship, but can also impact those close to them.²⁷ For instance, children exposed to chronic parental conflict often experience long-term emotional and behavioural difficulties.²⁸

Intimate partner relationships are among the most powerful determinants of wellbeing.

Such distress can lead to relationships failing, with partners breaking up, not always by mutual agreement, with acrimony and negative feelings creating additional stress and distress.

The causes of such breakdowns can be varied, ranging from the relatively mundane – couples outgrowing or becoming bored with each other – to more serious breaches of trust or harmony, such as infidelity, gambling, substance abuse, or violence and abuse. Financial pressures can also pose serious threats to the viability of a relationship. Problems come from not just the shortage of money itself, but the ways in which couples deal with such issues, including the way they communicate and the extent to which blame is assigned for problems that perhaps need to be addressed jointly.²⁹

There have been significant changes in the forms and nature of intimate partner relationships over recent decades. Although legally contracted traditional marriage remains the most prevalent form of intimate partnership, marriage rates have been falling consistently for the past 50 years, with the rate declining by 22.5 per cent over the last twenty years.³⁰ The ages at which people enter marriage are increasing significantly. In 1984 the median ages for marriage were 25 years for men and 23 years for women; in 2024 those numbers had risen to 33 years for men and 31 years for women.³¹ The rates of premarital cohabitation have also soared, from 16 per cent in 1975 to over 80 per cent in 2017.³²

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- 27 K. Birditt, C. Sherman, C. Polenick, L. Becker, N. Webster, K. Ajrouch, & T. Antonucci. (2018). So close and yet so irritating: Negative relations and implications for well-being by age and closeness. *Journals of Gerontology*, vol. 75, no. 2, pp. 327–337; M. Shrout. (2021). The health consequences of stress in couples: A review and new integrated Dyadic Biobehavioral Stress Model. *Brain, Behaviour and Immunity – Health*, vol. 16, 100328.
- 28 C. Orr, S. Sims, C. Fisher, M. O'Donnell, D. Preen, R. Glauert, H. Milroy, S. Garwood. (2022). *Investigating the mental health of children exposed to domestic and family violence through the use of linked police and health records*. ANROWS Research Report 10/2022; R. Brock, & G. Kochanska. (2016). Interparental conflict, children's security with parents, and long-term risk of internalizing problems: A longitudinal study from ages 2 to 10. *Development and Psychopathology*, vol. 28, no. 1, pp. 45–54.
- 29 H. Kelley, A. LeBaron, & E. Hill. (2018). Financial stress and marital quality: The moderating influence of couple communication. *Journal of Financial Therapy*, vol. 9, no. 2, pp. 18–36; G. Harold, D. Acquah, H. Chowdry, & R. Sellers. (2016). *What works to enhance inter-parental relationships and improve outcomes for children*. Department for Work & Pensions Research Report no. 32, pp. 18–48.
- 30 L. Qu. (2020). *Australian families then and now: Couple relationships*, Australian Institute of Family Studies (AIFS) report; ABS. (2025). *Marriages and divorces, Australia, 2024*, Number of marriages registered and crude marriage rate, Australia, 2004–2024.
- 31 Qu. (2020). *Australian families then and now*, p. 5; ABS. (2025). *Marriages and divorces, Australia, 2024*, Selected marriage indicators 2020–2024.
- 32 Qu. (2020). *Australian families then and now*, p. 9.

The divorce rate in 2023 reached its lowest level since the introduction of the *Family Law Act 1975*.³³

At the same time, newer and non-traditional forms of intimate relationships are increasing and need to be included in any comprehensive study about intimate relationships in Australia.

Of people under 44, nearly a quarter (24 per cent) met their partner online, compared to only 6 per cent of people over 44.

De facto relationships once were rare – and often frowned upon – but today make up 20 per cent of legally recognised intimate partnerships, up from just 6 per cent in 1986, when 94 per cent of legally recognised couples were married.³⁴ Same-sex relationships have also become socially acceptable, and are legally sanctioned, and the number of cohabiting same-sex relationships has more than doubled from 33,714 in 2011 to 78,425 in 2021.³⁵

Not measured by the Census, but able to be extracted from HILDA data, are ‘living-apart-together’ (LAT) relationships, where serious committed partners do not reside together. In 2019, 23.9 per cent of men and 28.3 per cent of women aged 18 to 24 were in such a relationship.³⁶

At the same time, there has been a decrease in young people forming intimate relationships of any kind. This is often referred to as a ‘relationship recession’, and is predicted by some to have grave implications for the future of our society, especially for our already very low fertility rates and rising rates of loneliness.³⁷

Among young people who do form intimate relationships, it is common for this to be through dating apps. Of people under 44, nearly a quarter (24 per cent) met their partner online, compared to only 6 per cent of people over 44.³⁸ This is a new way of forming intimate relationships that is not well understood.

33 L. Qu, J. Baxter, C. Andersson, & R. Jenkinson. (2024). *Divorces in Australia*, Facts and figures 2024, www.aifs.gov.au/research/facts-and-figures/divorces-australia-2024

34 ABS. (2003). *Australian Social Trends 2003*, catalogue no. 4102.0, p. 38; ABS. (2022). *Household and families: Census*, www.abs.gov.au/statistics/people/people-and-communities/household-and-families-census/latest-release#key-statistics

35 ABS. (2022). *Same sex couples living together in Australia*, www.abs.gov.au/articles/same-sex-couples-living-together-australia

36 R. Wilkins, F. Botha, I. Laß, & K. Peyton. (2021). *The Household, Income and Labour Dynamics in Australia survey: Selected findings from waves 1 to 19*, Melbourne Institute of Applied Economic and Social Research, University of Melbourne, p. 16. For a discussion of LAT relationships in HILDA, see A. Reimondos, A. Evans, & E. Gray. (2011). Living-apart-together (LAT) relationships in Australia. *Family Matters*, no. 87.

37 J. Burn-Murdoch. (2025). The relationship recession is going global. *Financial Times*, 11 January, www.ft.com/content/43e2b4f6-5ab7-4c47-b9fd-d611c36dad74

38 Relationships Australia. (2023). *The rise of online dating and open relationships*, www.relationships.org.au/document/online-dating-and-the-rise-of-open-relationships

We currently have few means of measuring and thus understanding these changing dynamics because we lack robust, longitudinal evidence about how different types of relationships develop and evolve. Current longitudinal studies focus on labour force status, health and the life course and do not have a focus on relationship formation, evolution and dissolution (see Appendix 3 for more details). We need to know what is important in forming a good relationship, and what makes one difficult to maintain. We need more detailed information about the quantity and duration of relationships individuals engage in, and the quality of relationships – including considerations such as communication styles, emotional support, and sexual intimacy. It is also necessary to understand relationship pressures and how life events – such as parenthood, financial stress, unemployment or health crises – influence relational dynamics. We seek to understand how individuals navigate separation and re-partnering.

Better understanding of these kinds of modern relationships has significant implications for many areas of interest to governments. There is increasing awareness of issues around social isolation and loneliness, particularly among young people, and the impact on mental and physical health and wellbeing.³⁹ Better understanding how people can form supportive, fulfilling partnerships will be critical to effectively addressing how to support meaningful connections and reduce loneliness. A strong partnership at home can also be an important factor for ensuring that children get a strong start to life. Children who grow up in stable, supportive and cooperative family environments benefit from exposure to strong social connections, reduced stress, and a greater sense of emotional security.⁴⁰ In contrast, regular instability between parents increases the likelihood of less effective parenting and behavioural difficulties in children.

Understanding intimate partner violence

Violence and abuse are disturbingly common in relationships and have a disastrous impact on victim-survivors. ABS figures show that 21 per cent of people over the age of 18 have experienced physical, sexual, emotional or economic abuse by a cohabiting partner in their lifetime, and that 27 per cent of women have experienced at least one of these forms of violence or abuse by a cohabiting partner.⁴¹ Our previous research revealed that nearly 60 per cent of women who are now single mothers had experienced partner violence, and that most of them had left their partner because

39 AIHW. (2025). *Mental health*, Social isolation and loneliness, www.aihw.gov.au/mental-health/topic-areas/health-wellbeing/social-isolation-and-loneliness

40 M.-T. Chen, G.-X. Lin, C. Lu, & Y.-P. Chang. (2022). Good partners, good parents: Parent relationship satisfaction predicts parenting efficacy for young children. *Applied Research in Quality of Life*, vol. 17, no. 4, pp. 2405–2422; J. Goldberg. (2014). Parents' relationship quality and children's behavior in stable married and cohabitating families. *Journal of Marriage and Family*, vol. 76, no. 4, pp. 762–777; C. Nicolaus. (2021). The impact of parental relationship satisfaction on infant development: Results from the population-based cohort study DREAM. *Frontiers in Psychology*, vol. 12, pp. 1–14.

41 ABS. (2023). *Personal Safety Survey 2021–22*, Partner violence, www.abs.gov.au/statistics/people/crime-and-justice/partner-violence

of the violence they experienced.⁴² For this reason, our study of intimate relationships will have a major focus on IPV, its causes and its impacts.

For IRINA, IPV, also commonly referred to as ‘domestic violence’, refers to any behaviour within an intimate relationship (including current or past marriages, domestic partnerships or dates) that causes physical, sexual or psychological harm.⁴³ It often involves a pattern of violent and abusive behaviours against a current or former intimate partner over time, with the effect of establishing and maintaining power and dominance over them – commonly referred to as coercive control.⁴⁴

IRINA’s focus is on IPV; it does not cover family violence. Family violence covers a broader scope of violence. It includes violence by parents/step-parents, children/step-children, siblings/step-siblings, and other relatives or in-laws.⁴⁵ We acknowledge that the National Plan to End Violence against Women and Children 2022–2032 and the Personal Safety Survey (PSS) run by the ABS cover family violence as well as IPV. However, as IRINA is looking at violence in the context of intimate partner relationships, its focus is on IPV.

We know very little about the perpetrators of violence – for example, what causes them to start or to stop their abusing.

When measuring physical violence, the ABS includes such abuse by current or former boyfriends, ‘dates’ and similar short-term, non-cohabiting unions. A study of intimate relationships needs, therefore, to include people in these non-cohabiting unions when asking about patterns of violence.

In recent decades we have seen changes in the nature of IPV. Physical abuse appears to be declining while technology-facilitated abuse, stalking and financial control are increasing.⁴⁶ Coercive control is now legally recognised in many Australian jurisdictions as a common pattern of violence and abuse.⁴⁷ There are now extremely high rates of IPV among young people, with 29 per cent of 18 to 19 year olds having reported some form of IPV in the previous year, according to data from the Longitudinal Study of Australian

42 This analysis was based on a customised dataset prepared by the ABS: A. Summers. (2022). *The choice: Violence or poverty*. University of Technology Sydney pp. 15–16, www.doi.org/10.26195/3s1r-4977

43 Commonwealth of Australia (DSS). (2022). *National plan*, p. 37.

44 Commonwealth of Australia (DSS). (2022). *National plan*, p. 37.

45 ABS. (2023). *Personal Safety Survey 2021–22*, Methodology, www.abs.gov.au/methodologies/personal-safety-australia-methodology/2021-22

46 The PSS shows a decline in women aged 18 and over who experienced physical violence by a cohabiting partner during the last 12 months from 1.3% in 2016 to 0.7% in 2021–22: ABS. (2023). *Personal Safety Survey 2021–22*, Table 3.1; A. Summers. (2024). How tech became the next frontier in domestic violence. *Saturday Paper*, www.thesaturdaypaper.com.au/news/2024/03/16/how-tech-became-the-next-frontier-domestic-violence; A. Flynn, L. Wheildon, A. Powell, & K. Bentley. (2024). Technology-facilitated coercive control: Mapping women’s diverse pathways to safety and justice. *Australian Institute of Criminology*, www.aic.gov.au/sites/default/files/2024-10/crg-technology-facilitated-coercive-control-v7.pdf

47 AIHW. (2024). *Family, domestic and sexual violence: Coercive control*, www.aihw.gov.au/family-domestic-and-sexual-violence/understanding-fdsv/coercive-control

Children (LSAC).⁴⁸ This raises the question as to whether there is a correlation between the ‘relationship recession’ and the increase in violence among young people.

Experiences of IPV have severe mental and physical health consequences, inflict trauma upon children who witness it (or are otherwise affected), can prevent victim-survivors from studying and working, and, in the most extreme cases, lead to death.⁴⁹

There are critical gaps in our knowledge of IPV. We know very little about the perpetrators of violence – for example, what causes them to start or to stop their abusing. We know little about how violence develops and changes over time, the risk and protective factors that influence these changes, and what the consequences for victim-survivors might be.

We also know little about the services and supports that victim-survivors use, including health care (hospitals, GPs and mental health services), legal help (police, family lawyers, and courts), and refuges or shelters. We know little about how and why victim-survivors access (or are prevented from accessing) these services, and what effect service use has on their safety, health and wellbeing. Likewise, there is limited evidence about services for people who perpetrate IPV (for example, men’s behaviour change programs, counselling or substance-use treatment). We need to know more about who attends them, how people engage with them, and whether participation reduces abusive behaviour.

IPV is fundamentally a relational issue. It emerges, escalates and persists within the dynamics of intimate relationships.

Importantly, IPV is fundamentally a relational issue. It emerges, escalates and persists within the dynamics of intimate relationships. Understanding IPV requires understanding the relationships themselves: their formation, their dissolution, their dynamics, their qualities, and their patterns of interaction. Research demonstrates, for example, that mismatched attachment styles or interacting personality traits can function as dyadic risk factors for IPV, even where no single attachment style or trait is inherently risky in isolation.⁵⁰ Similarly, economic factors operate relationally: an individual’s economic standing within a relationship (such as whether they are the primary breadwinner) can shape power dynamics and increase or decrease the risk of IPV.⁵¹

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- 48 Australian Institute of Family Studies (AIFS). (2023). *Intimate partner violence among Australian 18–19 year olds*, Growing up in Australia snapshot series, issue 11, p. 4.
- 49 AIHW. (2019). *Family, domestic and sexual violence in Australia: Continuing the national story 2019*, Cat no. FDV 3, pp. 44–56; N. Hing, C. O’Mullan, L. Mainey, E. Nuske, H. Breen, & A. Taylor. (2021). Impacts of male intimate partner violence on women: A life course perspective. *International Journal of Environmental Research and Public Health*, vol. 18, no. 8303; A. Summers, et al. (2025). *The cost of domestic violence to women’s employment and education*.
- 50 D. Dumas, C. Pearson, J. Elgin, & L. McKinley. (2008). Adult attachment as a risk factor for intimate partner violence: The ‘mismatching’ of partners’ attachment styles. *Journal of Interpersonal Violence*, vol. 23, no. 5, pp. 616–634; E. Maneta, S. Cohen, M. Schulz, & R. Waldinger. (2013). Two to tango: A dyadic analysis of links between borderline personality traits and intimate partner violence. *Journal of Personality Disorders*, vol. 27, no. 2, pp. 233–243.
- 51 H. Boxall, & A. Morgan. (2022). *Economic insecurity and intimate partner violence in Australia during the COVID-19 pandemic*, ANROWS Research Report, no. 2, p. 32.

The benefits of longitudinal data

The ABS Personal Safety Survey (PSS), Australia’s pre-eminent survey on domestic, family and sexual violence (DFSV), is undertaken approximately every four years by the ABS. It is a repeated cross-sectional survey. Cross-sectional surveys take a snapshot of a population at a single point in time.⁵² They are invaluable for showing the scale of a problem and identifying which groups are most affected. Repeated cross-sectional surveys (using new samples each wave) add trend information (for example, on whether the prevalence of IPV is increasing or decreasing in the population over time).

Because cross-sectional surveys only have data for a particular point in time, they have important limitations.⁵³ First, they offer limited insights into individual changes and transitions. For example, cross-sectional data cannot track the impact of financial strain on relationship satisfaction over time, or identify individuals whose abusive behaviours escalate over time, or stop.

Second, cross-sectional data are not good at explaining why something has occurred. With cross-sectional data, we do not know what happened before or after relationship breakdown, which means we cannot analyse the importance of factors that preceded this, and so may have had a role. For example, cross-sectional data may show that, on average, men who experience relationship conflict have higher rates of depression, but cannot track whether this precedes the conflict or is an outcome of it.

These shortcomings critically restrict our ability to design effective policy to influence the incidence and impacts of IPV on victim-survivors, their children, and society. We are not able to track the causes and consequences of IPV, the changes over time, or whether government policies are working.⁵⁴ As summarised by Emeritus Professor Bruce Chapman, the fundamental point is that:⁵⁵

it is difficult to understand the nature, incidence, and the usefulness of policy responses to domestic violence unless the data involve following the same people over time.

IRINA will be a longitudinal study. Longitudinal data have many unique advantages for understanding intimate partner relationships and IPV. To understand how intimate partner relationships form, change and sometimes become violent or abusive, we must observe the same individuals over time: before they partner, when they partner, when/if they separate, and if they re-partner. By following the same individuals over extended periods, longitudinal studies reveal how risk and protective factors emerge, shift and interact in people’s lives.

52 Department of Social Services (DSS). (2016). *Review of Australia’s longitudinal data system 2016 final report*, p. 11.

53 DSS. (2016). *Review of Australia’s longitudinal data system 2016 final report*, pp. 11–13.

54 B. Chapman. (2024). Notes on longitudinal data concerning domestic violence, pp. 2–5, <https://utsd8.prod.acquia-sites.com/sites/default/files/2024-05/Bruce%20Chapman%20longitudinal%20data%20advantages%20Final%20May%202024.pdf>

55 Chapman. (2024). *Notes on longitudinal data concerning domestic violence*, p. 6.

Longitudinal data are particularly valuable because they allow researchers to address the influence of factors that cannot be directly observed or measured. People differ in countless ways, such as temperament, resilience or formative childhood experiences, and these may shape their lives in many ways. These stable, unseen characteristics often go unmeasured in surveys, but can still distort results if not accounted for, creating what researchers call ‘confounding factors’.

Longitudinal data allow for statistical methods known as ‘fixed-effects’ regression models to be employed to examine properly the effects of various factors on life outcomes. Models using longitudinal data can control for the effects of stable characteristics that are typically not observed, such as personality traits, motivation and optimism, that will always confound estimates of causal effects using cross-sectional data.⁵⁶ This is a profound and unique advantage of longitudinal data.

For a study of this kind, it is essential the data be collected annually, since seismic shifts can occur within relationships within shorter time frames. An obvious example is pregnancy, where research shows that formerly loving and devoted partners can become jealous, resentful and, ultimately, violent over a very short period of time.⁵⁷ Collecting data every two or three years, as is usual for most other Australian longitudinal studies (with the exception of HILDA), would mean missing or misinterpreting such critical triggers to the onset of violence or relationship dissatisfaction. This is because respondents’ memories are less reliable the further out they are from the relevant incident. Yearly survey waves also offer critical methodological advantages. (Chapter 6 discusses in more detail the importance of annual longitudinal data.)

It is essential the data be collected annually, since seismic shifts can occur within relationships within shorter time frames. An obvious example is pregnancy.

Limitations of existing longitudinal studies

There are, of course, a number of excellent longitudinal studies conducted in Australia, but all are limited when it comes to understanding intimate relationships and partner violence. A more detailed explanation of the current advantages and disadvantages of each of these studies can be found in Appendix 3.

56 I. Laß, F. Botha, K. Peyton, & R. Wilkins. (2025). *The Household, Income and Labour Dynamics in Australia survey: Selected findings from waves 1 to 23*, Melbourne Institute of Applied Economic and Social Research, The University of Melbourne, p. 6.

57 M. Campo. (2015). *Domestic and family violence in pregnancy and early parenthood*, Australian Institute of Family Studies, pp. 1–3, www.aifs.gov.au/sites/default/files/publication-documents/cfca-resource-dv-pregnancy_0.pdf

Annual data collection

As discussed in more detail in Chapter 6, annual data collection is essential to capture the fast-changing nature of relationships. Of current national longitudinal studies, only HILDA collects data annually. This has been a crucial factor for HILDA's ongoing success and robustness as a national dataset. However, as HILDA does not include questions on experiences of IPV, it cannot be used to study IPV within relationships.

Detailed relationships data

A limitation of existing Australian longitudinal studies is the lack of detailed measures on relationship quality and dynamics, with studies not capturing elements that are important to a study of relationships, such as communication, emotional support, pressures, or sexual intimacy. Relationship satisfaction is also measured broadly (as overall satisfaction), and even studies that use multi-item satisfaction scales predominantly focus on different measures of overall satisfaction rather than the different components of a satisfying relationship (for example, emotional closeness, strong communication, a shared vision for the future). These datasets generally also make it difficult to confirm whether the same partner is reported across waves, which limits our ability to follow specific relationships over time, and restricts analysis to changes in individuals' relationship status.

Analysis of relationships and IPV together

The rationale for IRINA to study IPV within the context of relationships is that violence and abuse occur within dyadic contexts, involving ongoing interactions between the victim-survivor and the perpetrator. The abuse is influenced by relationship events such as pregnancy, by changes in relationship dynamics (for example, the victim-survivor becoming the primary breadwinner), and by relationship-related stressors (for example, childcare responsibilities, financial stress).

No existing study collects comprehensive data on both IPV and relationship dynamics. Studies that provide detailed insights into relationship factors, such as HILDA and LSAC, collect less detailed information about experiences of violence within relationships. In contrast, studies with more extensive data on IPV, such as the Australian Longitudinal Study on Women's Health (ALSWH), contain less detailed information about relationship histories, satisfaction or dynamics. As a result, there is currently no study capable of examining the full continuum of relationships, from healthy and supportive partnerships to those marked by violence and abuse.

No existing study collects comprehensive data on both IPV and relationship dynamics.

Comprehensive measure of IPV

Existing longitudinal studies do not measure the wide range of abusive behaviours in relationships, as these studies were not specifically designed to examine IPV. Economic

abuse, for instance, is often only addressed through questions about financial control, without exploring deeper and more complex forms such as employment or school sabotage, coerced debt, or abuse through financial institutions.⁵⁸

Moreover, coercive control, which is central to many abusive relationships, remains inadequately measured and studied as a pattern of sustained domination and intimidation. Current study frameworks often compartmentalise abusive behaviours, missing the cumulative and interconnected nature of how different abusive behaviours constitute a pattern of coercive control. To fully understand IPV perpetration, future research must adopt a more comprehensive approach that recognises how different forms of abuse function, combine and evolve over time to establish and maintain power and control.⁵⁹

Perpetrators of IPV

A key limitation of existing longitudinal studies is the lack of data collected about perpetrators of IPV. As the recent annual report of the Domestic, Family and Sexual Violence Commission noted:⁶⁰

Information on perpetrators is lacking, with limited longitudinal evidence to understand patterns of offending or engagement with the justice system.

Apart from the Ten to Men study, which includes a small set of perpetration questions that only capture lifetime prevalence, no national longitudinal dataset in Australia captures the experiences of people who use violence in their intimate relationships. (See Appendix 3 for more detail.)

Use of support services

Another critical gap in the current landscape of longitudinal research on intimate relationships is the absence of data concerning engagement with services and supports. This includes services related to IPV, ranging from crisis and legal services for victim-survivors to therapeutic and behavioural interventions for perpetrators (for example, men's behaviour change programs). IRINA will generate data capable of describing the prevalence, patterns and nature of help-seeking among people using and experiencing IPV, as well as the timing of and reasons for help-seeking behaviours. This information is essential for the design and delivery of intervention programs, to measure the uptake of services by people experiencing IPV, as well as to measure their short- and long-term impacts.

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- 58 J. Breckenridge. (2020). *Understanding economic and financial abuse in intimate partner relationships*, Gendered Violence Research Network, University of New South Wales; K. Cook, A. Byrt, T. Edwards, & R. Burgin. (2025). Postseparation financial abuse perpetrated through government systems: A survey of Australian mothers' experiences of child support. *Violence Against Women*, vol. 31, no. 12–13, pp. 3355–3379; R. Voth Schrag, T. Edmond, & A. Nordberg. (2020). Understanding school sabotage among survivors of intimate partner violence from diverse populations. *Violence Against Women*, vol. 26, no. 11, pp. 1286–1304.
- 59 E. McLindon, M. Kyei-Nimakoh, F. Giles, K. FitzPatrick, L. Tarzia, & K. Hegarty. (2025). Timelines of psychological, physical and sexual intimate partner violence among a nationally representative sample of Australian women. *Women's Health*, vol. 21, pp. 1–12.
- 60 Commonwealth of Australia (Domestic, Family and Sexual Violence Commission). (2025). *Yearly report to parliament*, p. 35.

A purpose-built longitudinal study would help answer critical questions about which services are most effective, when in a person's life they are most impactful, and how service engagement changes as circumstances evolve. It would also allow for analysis of the barriers that prevent individuals from accessing services in the first place.

Geographic representativeness

Given the disproportionately high rates of violence, it is essential to ensure that a longitudinal study captures the unique experiences of people in remote areas.

Current longitudinal studies have limited geographical coverage. In particular, most are not able to provide representative results about people living in remote areas. Given the disproportionately high rates of violence in remote communities, it is essential to ensure that a longitudinal study captures the unique experiences of people in remote areas.⁶¹ While IRINA will not include those living in very remote areas due to practical concerns, it will include those living in remote areas.⁶²

Need for a new longitudinal study

Consideration was given to whether existing longitudinal studies could be adapted to collect more detailed information on relationships and IPV, rather than establishing a new study. However, this approach would have significant limitations, which are discussed in more detail in Appendix 3.

These studies were each designed with their own distinct and critical purposes, such as examining Australians' health outcomes. They are designed, and have been constantly refined, as data collection instruments for these purposes. Including the large number of additional questions that would be required to fulfill IRINA's research aims would likely compromise the existing value of these nationally important statistical instruments, either by increasing respondent burden or by displacing other, important questions in these studies.

Existing studies, other than HILDA, also collect data every two to three years, rather than annually. As Chapter 6 explains, annual data collection improves the ability to understand the dynamics and trajectories of relationships.

In addition, current longitudinal cohorts are built around defined populations and employ differing survey methodologies (for example, ALSWH collects data on women in particular birth cohorts, and Ten to Men collects data for men in a particular age range). To develop

61 AIHW. (2019). *Family, domestic and sexual violence in Australia: Continuing the national story 2019*, Cat. no. FDV 3, p. ix.

62 The distinction between remote and very remote areas is based on the Australian Statistical Geography Standard Remoteness Structure, which defines five classes of remoteness: Major Cities, Inner Regional, Outer Regional, Remote, Very Remote: ABS. (2021). *Remoteness structure: Australian Statistical Geography Standard (ASGS) Edition 3*, www.abs.gov.au/statistics/standards/australian-statistical-geography-standard-asgs-edition-3/jul2021-jun2026/remoteness-structure

a comprehensive understanding of relationships, a single, purpose-designed study that includes both men and women and uses consistent measures would make it easier to produce insights about both men and women of all ages.

It is also important to include a wide age range among respondents when studying IPV. Research into intimate partner homicide has found that the risk of committing homicide increases for some men in later life, after retirement, due to a loss of identity and purpose contributing to behaviours that in turn increase the risk of severe violence.⁶³ In the most recent wave of the Ten to Men study, the oldest men were 67, which limits our ability to understand these trajectories of violence during later stages of life, such as post-retirement.⁶⁴

Further, to ensure that there are sufficient samples of victim-survivors and perpetrators captured in the data to allow smaller sub-samples of these groups to be analysed, it is proposed that IRINA will use a targeted sampling process to increase the number of respondents who are victim-survivors and perpetrators. This process has not been undertaken when designing the samples of the existing studies, which means these studies may not have the samples necessary to allow analysis of specific subgroups of victim-survivors and perpetrators (for example, victim-survivors living in regional areas, or perpetrators with substance abuse issues). In contrast, a purpose-designed study such as IRINA can plan its sampling approach and sample size from the outset to maximise the likelihood that victim-survivors and perpetrators are represented in sufficient numbers to allow for analysis of more detailed subgroups of these populations.

Essential data for the National Plan to End Violence against Women and Children

A new longitudinal study on intimate partner relationships is urgently needed to assist the government to meet its stated policy, under the National Plan to End Violence against Women and Children 2022–2032, of ending domestic violence within a generation.⁶⁵

That means domestic violence in Australia would be completely eliminated by 2047, just 21 years from now. The previous plan, which was to ‘reduce’ violence in the twelve years between 2010 and 2022, failed to produce any significant reduction in the rates of violence, and one reason for that is that it had no means of identifying and measuring the trajectories, causes and consequences of domestic violence. This lack of data, including on help-seeking behaviours and the effectiveness of services and supports, has made it difficult to develop policies and programs that will help to reduce and prevent IPV.

63 H. Boxall, L. Doherty, S. Lawler, C. Franks, & S. Bricknell. (2022). *The ‘Pathways to intimate partner homicide’ project: Key stages and events in male-perpetrated intimate partner homicide in Australia*. ANROWS Research Report, no. 4, Australian Institute of Criminology.

64 AIFS. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health wave 5 data book*, p. 4.

65 Commonwealth of Australia (DSS). (2022). *National plan*.

We are still lacking critical data. In her most recent report to federal parliament, DFSV Commissioner Micaela Cronin reported that of the 131 measures used to track the performance of the National Plan, only 42 (32 per cent) have data sources to enable them to be measured.⁶⁶ IRINA will provide data that could be used to track progress against several of these National Plan measures that do not currently have an appropriate data source. The National Plan Performance Measurement Plan has a strong focus on data about access to services and supports for people experiencing or perpetrating IPV.⁶⁷ This is a core focus for IRINA, which will generate critical insights to better measure many of the indicators related to services and supports in the National Plan, such as the proportion of victim-survivors who seek advice or support from a service for gender-based violence.⁶⁸

Of the 131 measures used to track the performance of the National Plan, only 42 (32 per cent) have data sources to enable them to be measured.

The government's commitment to end IPV is reinforced in *Working for Women: A Strategy for Gender Equality*, which identifies ending gender-based violence as the first priority area.⁶⁹ The strategy outlines future directions for work under this priority area, which include:⁷⁰

improving the national evidence base by ... strengthening collection and sharing of data, to better prevent and respond to violence.

Improving the national evidence base is importantly Action 2 of the First Action Plan under the current National Plan:⁷¹

We will work towards building the data and evidence base on the nature and characteristics of the perpetration of different types of violence, to identify mechanisms and early intervention strategies.

Improving the national evidence base is importantly Action 2 of the First Action Plan under the current National Plan.

IRINA offers a critical opportunity to help the government meet the objectives of the National Plan. IRINA will collect data on the form (physical, sexual, technological, etc.), trajectories, causes and consequences of IPV, as well as on the services and supports used by victim-survivors and perpetrators. This will provide crucial data to improve policies and programs to prevent such violence from occurring, or from escalating.

66 Commonwealth of Australia (Domestic, Family and Sexual Violence Commission). (2025). *Yearly report to parliament*, p. 58.

67 Commonwealth of Australia (Department of Social Services). (2024). *National plan outcomes framework: Performance measurement plan*, pp. 18–39; AIHW. (2025). *National targets and sub-outcome measures*, www.aihw.gov.au/getmedia/ebd9ba0d-5ddf-46f4-88f6-49d3eaaabfdc/aihw-fdsv-full-list-of-pmp-measures.pdf

68 AIHW. (2025). *National targets and sub-outcome measures*, p. 8.

69 Commonwealth of Australia (Department of the Prime Minister and Cabinet). (2024), *Working for women: A strategy for gender equality*, p. 34.

70 Commonwealth of Australia (DPMC). (2024). *Working for women: A strategy for gender equality*, p. 38.

71 Commonwealth of Australia (DSS). (2023). *First Action Plan & Outcomes Framework 2023–2027*, p. 27.

The objective of eliminating domestic violence is unachievable unless we can arrive at a means of understanding the factors that drive victimisation and perpetration of violence.

Obviously, a new study will be costly. We are not able to estimate the cost, as many factors that will define the scope – and hence the cost – of the survey will be decided in the next phase of development (for example, the number and form of the specific questions to be asked). As an indication, HILDA had an estimated cost of \$29.5 million for the two most recent waves, which included a small sample top-up for immigrants to Australia.⁷² But our view is that this work is essential to saving lives, and is thus a necessary investment by the federal government. Furthermore, its overall cost will be paltry compared with the \$22 billion annual cost of violence against women and their children, as estimated by KPMG in 2016.⁷³

Perhaps just as importantly, we are creating a new and potentially invaluable data asset that will have many uses for governments and researchers. For example, IRINA could also provide new insights on loneliness within relationships, and the risk factors associated with relationship harms (for example, pornography usage, gambling, and inappropriate use of social media).

We are creating a new and potentially invaluable data asset that will have many uses for governments.

The study will fill a much-needed gap that other researchers and those wanting to end domestic violence have been calling for. As recently as April 2025, the Victorian Parliamentary Inquiry into capturing data on family violence perpetrators recommended that:⁷⁴

The Victorian government undertake a longitudinal research study to track people from different backgrounds and with varying levels of system contact to build a better understanding of family violence trajectories, protective factors, behaviour change over time, pathways in and out of perpetration, long-term impacts of behaviour interventions, attitudes, offending contexts and what increases or reduces risks of adverse outcomes.

72 A. Rishworth. (2023). 'Extending support for Melbourne Institute's HILDA survey into Australian families', Department of Social Services, media release, <https://ministers.dss.gov.au/media-releases/12616>.

73 KPMG 2016, *The cost of violence against women and their children in Australia*.

74 Victorian Legislative Assembly Legal and Social Issues Committee. (2025). *Building the evidence base: Inquiry into capturing data on people who use family violence in Victoria*, Parliament of Victoria, recommendation 51.

Chapter 4: Survey content

The two major aims of IRINA are:

- to measure and understand how intimate relationships form, change, and sometimes become violent and abusive, and the factors that promote satisfying relationships and reduce the likelihood of unhappy or violent relationships
- to measure and understand the different forms, patterns, trajectories, causes and impacts of IPV, to inform ways to prevent and reduce it.

This chapter describes the survey content needed to achieve these aims. It lists four domains for survey content:

- demographic information
- information about intimate relationships
- experiences of IPV
- risk and protective factors for intimate partner relationships and IPV.

The general content for these domains is summarised below. However, the specific questions and survey instruments will be determined by the organisation that is awarded responsibility for designing and conducting the survey.

The chapter concludes with a discussion of the potential of linking IRINA with administrative data as an additional source of information.

Demographic and background information

Under the first domain, the survey will collect personal demographic and background information. This will include the respondent's age, geographic location, sex, gender, sexual orientation, ethnic background, language spoken, educational background, employment status, finances and disability status.

This information is essential to study the connection between personal characteristics and the experience of intimate partner relationships, and the characteristics of victim-survivors and perpetrators of IPV. This demographic information can also be used as control variables when analysing the variables described below.

Relationship history, status and transitions

As explained in Chapter 3, there are many different forms of intimate partner relationships, ranging from traditional marriages and cohabitation to less traditional forms such as same-sex marriages and living-apart-together (LAT) relationships. There are also increasing numbers of young people who are not in intimate partner relationships of any kind.

This domain will establish respondents' experience of intimate partner relationships, covering current status and the past 12 months. It will include questions about all forms of relationships, including how they met, duration and transitions (entering and leaving

relationships). Respondents will also be asked a small number of questions about their current partner, such as their age, gender, employment status, education level and language spoken.

Experience of intimate partner violence

To gain greater understanding of IPV in Australia, this survey domain will measure the annual incidence of different forms of IPV,⁷⁵ ranging from physical and sexual violence; economic and financial abuse; technology-facilitated abuse; emotionally abusive, harassing and controlling behaviours; and systems abuse.

The National Plan to End Violence against Women and Children 2022–2032 defines system abuse as:⁷⁶

the manipulation of legal and other systems by perpetrators of family violence, done so in order to exert control over, threaten and harass a current or former partner.

The 2024 Rapid Review of Prevention Approaches identified the manipulation of government systems – notably family law, child support, immigration and taxation – as a form of IPV:⁷⁷

Perpetrators may seek to control victim-survivors by manipulating systems and services. Practically, this can manifest as the withholding of payments, not fully disclosing income and assets, prolonging legal proceedings, threats to cancel immigration visas, raising debts against a victim-survivor's name and making false allegations and complaints.

Data from IRINA will assist the government to identify areas of abuse and to further strengthen systems to improve safety for victim-survivors.

The Australian government recognises that perpetrators of domestic violence are exploiting and manipulating government systems to control, threaten and harass victim-survivors.⁷⁸

As part of measuring forms of IPV, IRINA will include questions about the incidence of perpetrators' manipulation of key government systems to abuse victim-survivors.

Data from IRINA will assist the work of the government to identify areas of abuse and to further strengthen systems to improve safety for victim-survivors.

75 IRINA will measure the incidence of IPV but not the prevalence. 'Incidence' is defined as the number of incidents of IPV that have occurred in the relevant population within a specified reference period. 'Prevalence' is defined as the number of people in the relevant population who have experienced IPV at least once within a specified reference period. ABS, *Defining the data challenge for family, domestic and sexual violence*, www.abs.gov.au/statistics/people/crime-and-justice/defining-data-challenge-family-domestic-and-sexual-violence/latest-release

76 Commonwealth of Australia (DSS). (2022). *National plan*, p. 133.

77 Rapid Review Expert Panel. (2024). *Unlocking the prevention potential: Accelerating action to end domestic, family and sexual violence*, Report of the Rapid Review of Prevention Approaches, pp. 100–103, www.pmc.gov.au/sites/default/files/resource/download/unlocking-the-prevention-potential-4.pdf

78 Department of the Prime Minister and Cabinet. (n.d.). Audit of Australian government systems, <http://www.pmc.gov.au/office-women/womens-safety/audit-australian-government-systems>

This domain will also cover the patterns, experiences and trajectories of IPV. Coercive control refers to perpetrators' use of patterns of violent and abusive behaviours over time to establish power and control over a victim-survivor.⁷⁹ Identifying coercive control will require a set of survey questions that drill down into the characteristics of IPV.

This will include:

- changes in the frequency and kinds of violence experienced (for example, whether people who initially experience one kind of violence later experience other kinds of violence)⁸⁰
- co-occurrence of different categories of abuse, recognising that coercive control may involve physical or non-physical abusive behaviours, or a combination of both
- patterns of abuse over time (onset, persistence, escalation and desistance)
- the context for IPV (for example, self-defence and retaliation). An important difference between male- and female-perpetrated IPV is that women are more likely to use self-defensive and retaliatory violence – violence to protect themselves and others from an abusive partner.⁸¹

Victim-survivors of IPV will also be asked additional questions about the characteristics of the perpetrators of IPV, such as whether they have problems with substance abuse. This information can be compared to similar information provided by perpetrators who self-report in the survey, to assess any important differences (noting that the partners are not matched).

We want to know about patterns of service use; why people access services and why they do not.

Contact with mainstream and specialist services

This domain will also include questions about what contact victim-survivors and perpetrators have with mainstream services, such as police, hospitals and GPs, and with specialist domestic violence services, such as women's refuges or men's behaviour change programs.⁸² In particular, we want to know about patterns of service use; why people access services and why they do not; barriers to access of services; and level of satisfaction with services that are accessed. The survey will also ask about informal support – that is, reliance on family, friends and community.

79 Commonwealth of Australia (DSS). (2022). *National plan*, p. 37.

80 McLindon, et al. (2025). Timelines of psychological, physical and sexual intimate partner violence among a nationally representative sample of Australian women, pp. 1–12.

81 H. Boxall, C. Dowling, & A. Morgan. (2020). Female perpetrated domestic violence: Prevalence of self-defensive and retaliatory violence. *Trends and Issues in Crime and Criminal Justice*, no. 584, Australian Institute of Criminology, p. 2.

82 Specialist DV services are services whose core business is DV. They are non-legal and non-clinical services across a continuum including prevention, early intervention, crisis response and recovery.

Risk and protective factors

As Chapter 3 makes clear, IRINA seeks to find out what is important in developing and maintaining a healthy intimate partner relationship, and what makes it challenging to sustain. It will also identify the risk and protective factors for experiencing and perpetrating violence in intimate relationships.

Good information and understanding of intimate partner relationship factors is particularly important in understanding coercive control.

Relationship factors (such as relationship status and satisfaction) are important predictors of IPV.⁸³ Conversely, positive relationship qualities like commitment and constructive communication can act as protective factors, reducing the likelihood of IPV.⁸⁴ However, relationship factors are under-researched and not well understood.⁸⁵ Understanding IPV requires looking at the relationship context in which it occurs. The trajectory of IPV is linked to the trajectory of the relationship. IPV emerges from ongoing interactions between partners, each with their own individual characteristics and developmental history.⁸⁶

Good information and understanding of intimate partner relationship factors is particularly important in understanding coercive control. As noted above, coercive control is an overall pattern of behaviours that is ongoing, repetitive and cumulative in nature.⁸⁷ Viewed in isolation, these behaviours may appear relatively benign or innocuous. However, within the context of the relationship they may provoke feelings of fear, intimidation or anxiety in victim-survivors.⁸⁸

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- 83 H. Boxall, S. Lawler, & A. Morgan. (2025). Unpacking variation in technology-facilitated intimate partner violence: A conceptual and empirical analysis. *Journal of Family Violence*, 9 July 2025.
- 84 D. Capaldi, N. Knoble, J. Shortt, & H. Kim. (2012). A systematic review of risk factors for intimate partner violence. *Partner Abuse*, vol. 3, no. 2, pp. 231–280; C. Spencer, S. Stith, & B. Cafferky. (2022). What puts individuals at risk for physical intimate partner violence perpetration? A meta-analysis examining risk markers for men and women. *Trauma, Violence, & Abuse*, vol. 23, no. 1, pp. 36–51; C. Feldman, & C. Ridley. (2000). The role of conflict-based communication responses and outcomes in male domestic violence toward female partners. *Journal of Social and Personal Relationships*, vol. 17, no. 4–5, pp. 552–573.
- 85 D. Capaldi, S. Low, S. Tiberio, & J. Shortt. (2021). Intimate partner violence across the lifespan: Dyadic theory and risk and protective factors, in R. Geffner, J. White, L. Hamberger, A. Rosenbaum, V. Vaughan-Eden, & V. Vieth (eds), *Handbook of interpersonal violence and abuse across the lifespan*. Springer, pp. 2426–2432.
- 86 Spencer, et al. (2022). What puts individuals at risk for physical intimate partner violence perpetration?; Capaldi, et al. (2021). Intimate partner violence across the lifespan; C. Collibee, & W. Furman. (2016). Chronic and acute relational risk factors for dating aggression in adolescence and young adulthood. *Journal of Youth and Adolescence*, vol. 45, pp. 763–776; Y. Kusunoki, K. Bevilacqua, & J. Barber. (2023). The dynamics of intimate relationships and violent victimization among young women. *Journal of Interpersonal Violence*, vol. 38, no. 3–4, pp. 3344–3372; N. Charlot, S. Joel, & L. Campbell. (2025). The predictive validity of intimate partner violence warning signs. *Social Psychological and Personality Science*, vol. 16, no. 2, pp. 192–201.
- 87 Australia's National Research Organisation for Women's Safety (ANROWS). (2021). *Defining and responding to coercive control: Policy brief*, ANROWS Insights, 01/2021, p. 1.
- 88 H. Boxall, & A. Morgan. (2021). *Intimate partner violence during the COVID-19 pandemic: A survey of women in Australia*, ANROWS Research Report, 03/2021, p. 33.

We use a socio-ecological model for conceptualising the range of risk and protective factors relevant to understanding intimate partner relationships and IPV. The socio-ecological model is a framework that explains how individual behaviour is influenced by multiple levels of interconnected systems, including individual, interpersonal, community and societal. It emphasises that these levels are reciprocal, meaning that changes at one level can affect other levels, and vice versa. The socio-ecological model is used in many areas of research.⁸⁹ The theory of change used by the National Plan to End Violence against Women and Children 2022–2032 is underpinned by a socio-ecological model.⁹⁰

IRINA will include, but not be limited to, questions about the following risk and protective factors.⁹¹ Other factors might be added once advice has been received from the Lived Experience Panel advising on the development of IRINA.

Individual characteristics and personal factors

- wellbeing and mental health
- social connectedness and support (including participation in social, sporting and community activities)
- attitudes about gender roles and violence
- feelings of loneliness
- suicidal ideation and self-harm
- adverse childhood experiences
- behaviours which can impact on wellbeing and the quality of relationships, such as excessive gambling, use of pornography and inappropriate use of social media
- physical health and health-related behaviours, such as substance abuse.

89 US Centres for Disease Control and Prevention (CDC). (2025). About violence prevention, www.cdc.gov/violence-prevention/about; M. Flood, C. Brown, L. Dembele, & K. Mills. (2022). *Who uses domestic, family, and sexual violence, how, and why? The state of knowledge report on violence perpetration*, Queensland University of Technology, pp. 30–42; J. Figueroa, H. DeLuca Bishop, & E. Baker. (2022). Using a socio-ecological framework to understand romantic relationship satisfaction among emerging adults during the COVID-19 pandemic. *Emerging Adulthood*, vol. 10, no. 6, pp. 1561–1573; C. Wan, & W. Yeung. (2022). A socio-ecological approach to relationship goals and self-presentation strategies in American and Chinese online dating websites. *Current Research in Ecological and Social Psychology*, vol. 3, p. 100029.

90 Commonwealth of Australia (Department of Social Services). (2023). Theory of Change 2022–2032, under the *National plan*, pp. 10–11.

91 For references on risk and protective factors for IPV, see footnote 100. For research on risk and protective factors for quality intimate relationships see A. Galovan, T. Orbuch, R. Shrout, E. Drebit, & T. Rice. (2023). Taking stock of the longitudinal study of romantic couple relationships: The last 20 years. *Personal Relationships*, vol. 30, no. 1, pp. 174–216; S. Joel, P. Eastwick, C. Allison, & S. Wolf. (2020). Machine learning uncovers the most robust self-report predictors of relationship quality across 43 longitudinal couples studies. *Proceedings of the National Academy of Sciences (PNAS)*, vol. 117, no. 32, pp. 19061–19071; J. Bühler, & U. Orth. (2024). How relationship satisfaction changes within and across romantic relationships: Evidence from a large longitudinal study. *Journal of Personality and Social Psychology*, vol. 126, no. 5, pp. 930–945; M. Johnson, J. Lavner, M. Mund, M. Zemp, S. Stanley, F. Neyer, E. Impett, G. Rhoades, G. Bodenmann, R. Weidmann, J. Bühler, R. Burriss, J. Wünsche, & A. Grob. (2022). Within couple associations between communication and relationship satisfaction over time. *Personality and Social Psychology Bulletin*, vol. 48, no. 4, pp. 534–549.

Relationship factors

- relationship satisfaction
- emotional closeness, trust and commitment
- sexual intimacy
- partner communication, level of affection, spending time together
- approach to parenting and domestic labour
- conflicts and disagreements – frequency, intensity and approach to resolution.

Life events in the last twelve months

- marriage, cohabitation, separation and divorce
- family formation (pregnancy and birth of child(ren))
- death of close family member or friend
- serious illness or injury (self or partner or child)
- change in employment status (job loss, promotion, change in hours)
- financial circumstances and stress
- change in housing
- natural disasters
- legal issues for self or family (for example, protection orders, custody and property disputes, child support).

Linked administrative data

Administrative data offer the potential of an additional source of information about survey respondents as a complement to IRINA survey data.

Administrative data are collected by organisations (usually the government) for record-keeping or operational purposes, rather than research. Surveys can be linked with administrative datasets to combine the survey responses that respondents provide with relevant information about the respondents that is already recorded in administrative data systems. For example, the ALSWH survey data are linked to respondents' Medicare, hospital, immunisation and disease registry data.

Linking IRINA survey data with administrative data could have many benefits for survey content:⁹²

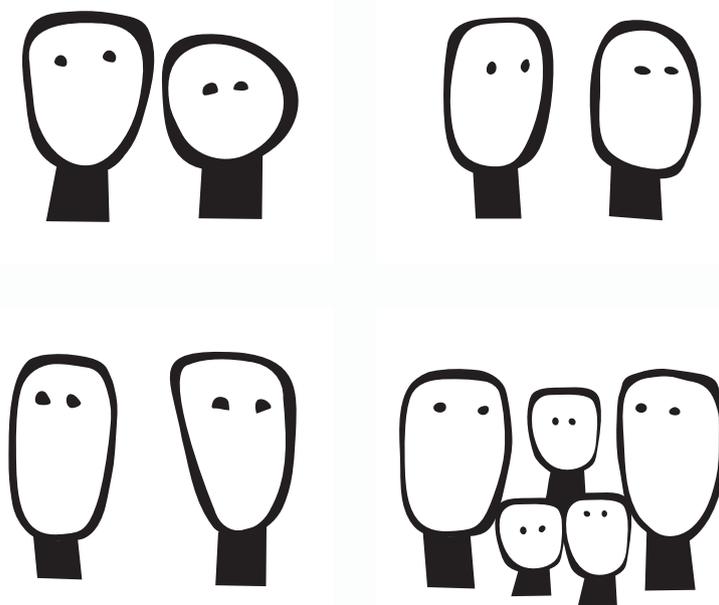
- Survey respondents could be linked to relevant administrative datasets that include data on health, education, employment, earnings and income support. This would expand the information we have on respondents.

92 P. Davis-Kean, R. Chamber, L. Davidson, C. Kleinert, Q. Ren, & S. Tang. (2017). *Longitudinal studies strategic review*, 2017 Report to the Economic and Social Research Council, p. 30, www.ukri.org/wp-content/uploads/2022/03/ESRC-020222-Longitudinal-Studies-Strategic-Review.pdf

- Data collection could be more efficient and less costly, and the burden on survey respondents could be lower, if information obtained from a respondent could be replaced with better quality data available from an administrative data source (for example, relying on the ATO for income data). This would allow IRINA to focus on collecting information that can only be obtained via a survey.
- Collection of information that cannot be obtained from survey participants, or is subject to reliability concerns, could be obtained from administrative data. For example, collecting more reliable data on retrospective or hard-to-remember events may be possible via data linkage, such as use of health services and periods of receipt of income support.

However, there are also potential problems with linking survey and administrative data. These include:⁹³

- linking data can be very costly and time-consuming, requiring agreement with data providers
- privacy concerns restrict data access and content available
- requesting consent to use the linked data may introduce consent bias (consenters differ from non-consenters) or may reduce response rates. There are many reasons respondents may not consent, such as fear that sensitive personal data might be misused, and distrust of, or poor relationship with, the data-owning agency.



93 S. Künn. (2015). The challenges of linking survey and administrative data. *IZA World of Labor*, <https://wol.iza.org/uploads/articles/214/pdfs/challenges-of-linking-survey-and-administrative-data.pdf>

Chapter 5: Sample design

This chapter outlines an approach to sampling. It first identifies the target populations for IRINA and then puts forward an approach to sample selection.⁹⁴

Target populations

The sample for IRINA must be designed to gain information to meet its objectives.

To achieve its aims, IRINA will have three target populations:

- the population of adults in Australia – to understand the nature of intimate partner relationships and to track the annual incidence of different forms of IPV
- victim-survivors of IPV – to identify the characteristics of victim-survivors of IPV and follow the patterns, trajectories and impacts of IPV experienced over time
- perpetrators of IPV – to identify the characteristics of perpetrators of IPV and follow the patterns and trajectories of IPV over time.

Including both victim-survivors and perpetrators of IPV as target populations is essential, as IRINA is designed to gain an understanding of the full spectrum of relationship outcomes, which includes relationships that have become violent or abusive. Relying solely on a general population sample would not capture enough cases of violent and abusive relationships to draw meaningful conclusions about their causes, patterns and trajectories. Without this dedicated focus, one of the most harmful relationship outcomes would remain insufficiently understood.

The population of adult Australians

The definition of this target population is people aged eighteen years and over residing in private dwellings across Australia (excluding very remote areas).⁹⁵ This would be consistent with the scope for the ABS Personal Safety Survey (PSS) (see Box 3).

94 The chapter does not put forward a detailed approach to sampling (for example, the sampling frame) and does not suggest an appropriate sample size. We consider these issues will be better addressed by the organisation responsible for conducting IRINA.

95 The distinction between remote and very remote areas is based on the Australian Statistical Geography Standard Remoteness Structure, which defines five classes of remoteness: Major Cities, Inner Regional, Outer Regional, Remote, Very Remote: ABS. (2021). *Remoteness Areas: Australian Statistical Geography Standard (ASGS) Edition 3*, www.abs.gov.au/statistics/standards/australian-statistical-geography-standard-asgs-edition-3/jul2021-jun2026/remoteness-structure

Box 3: Target population for the 2021–22 PSS

The scope of the 2021–22 PSS was persons aged eighteen years and over residing in private dwellings across Australia (excluding very remote areas). Interviews were conducted with one randomly selected person aged eighteen years or over who was a usual resident of the selected household.

Private dwellings are:

- houses
- flats
- home units
- any other structures used as private places of residence at the time of the survey.

Usual residents are people who usually live in a particular dwelling and regard it as their own or main home. People usually residing in non-private dwellings, such as hotels, motels, hostels, hospitals, nursing homes, or short-stay caravan parks were not in scope.

Both urban and rural areas in all states and territories were included in the survey, except for very remote areas of Australia. The following groups were also excluded from the scope of the survey:

- visitors at a dwelling whose usual place of residence is Australia (as they would have their chance of selection at their usual residence)
- overseas visitors intending to stay in Australia for less than twelve months
- non-Australian diplomats, non-Australian diplomatic staff and non-Australian members of their household
- members of non-Australian defence forces stationed in Australia and their dependants
- people who usually reside in non-private dwellings
- households where all residents are aged less than eighteen years.

Source: ABS. (2023). Sampling, *Personal Safety Survey: User guide*, www.abs.gov.au/statistics/detailed-methodology-information/concepts-sources-methods/personal-safety-survey-user-guide/2021-22/sampling#scope

Victim-survivors and perpetrators of IPV

The second and third target populations for IRINA are the victim-survivors and perpetrators of IPV. The aims of IRINA focus on the patterns, trajectories and impacts of IPV over time. Hence, we are interested in the experience of IPV between survey waves (that is, over a one-year period). But if the rates of violence over a one-year period are consistent with the findings of the PSS, they are likely to be low. For instance, 1.5 per cent of women reported experiencing physical or sexual violence by a cohabiting partner in 2021–22, according to the PSS. Thus, by way of example, with a responding sample of 20,000, half of whom were men, we would only expect about 150 female respondents to report physical or sexual IPV by a cohabiting partner in a year (although a much larger proportion would be expected to

report emotional abuse or violence by a non-cohabiting partner).⁹⁶ It could be a challenge to identify an adequate sample of victim-survivors and perpetrators of IPV to obtain reliable estimates for key survey variables.

The problem of obtaining reliable estimates for survey subpopulations is common in survey design.⁹⁷ To address this, there are several sampling methods used to generate adequate samples for estimating the characteristics of subpopulations.⁹⁸ The Technical Group advising on the design of IRINA considered the potential sampling methods and favoured an oversampling approach based on screening to identify and select an adequate sample of victim-survivors and perpetrators of IPV. The screening sampling method approach is explained in Box 4.

Box 4: Screening sampling method

A screening method can be used to identify and select the subpopulation group for oversampling. Screening of the population can be done at the time of the interview for survey data collection. For example:

- A large first-phase sample of the general population is selected, from which samples of the members of the subpopulation are identified.
- A person's membership in the subpopulation is determined from responses to a set of survey questions that can quickly identify individuals belonging to the target subpopulation.
- Following this, a larger proportion of participants from the target subpopulation is included in the sample for the subsequent survey phases than for the other respondents.

Source: G. Kalton. (2009). Methods for oversampling rare subpopulations in social surveys. *Survey Methodology*, vol. 35, no. 2, pp. 125–141, Statistics Canada; R. Singh, et al. (1994). *Oversampling in panel surveys*, US Bureau of Census, Presented at the American Statistical Association Meeting, August 1994, www2.census.gov/prod2/sipp/wp/SIPP_WP_196.pdf

96 In the PSS 2021–22, 3.9% of women reported experiencing emotional abuse by a cohabiting partner over the past 12 months: ABS. (2023). *Personal Safety, Australia, 2021–22*, www.abs.gov.au/statistics/people/crime-and-justice/personal-safety-australia/latest-release#cohabiting-partner-violence-emotional-abuse-and-economic-abuse

97 G. Kalton. (2009). Methods for oversampling rare subpopulations in social surveys. *Survey Methodology*, vol. 35, no. 2, pp. 125–141, Statistics Canada.

98 Kalton. (2009). Methods for oversampling rare subpopulations in social surveys, pp. 125–141, Statistics Canada; R. Singh, R. Petroni, & T. Allen. (1994). *Oversampling in panel surveys*, US Bureau of Census, Presented at the American Statistical Association Meetings, August 1994, www2.census.gov/prod2/sipp/wp/SIPP_WP_196.pdf

Approach to sample selection

We recommend a two-stage sample selection process for IRINA, using the screening sampling method.

Stage 1

In the first stage, a random sample of the population of Australians aged eighteen and over across Australia would be selected. The sample frame for this target population would be identified by the organisation responsible for conducting IRINA. Similar to HILDA, we would envisage that the sampling would be based on clustered area-based sampling.⁹⁹

From this sample of adult Australians, a subsample of victim-survivors and perpetrators of IPV as well as people at high risk of experiencing/perpetrating IPV would be identified from a set of targeted questions. The questions about risk would be based on research about risk factors for IPV. The research literature is consistent about the main risk factors for victimisation and perpetration of IPV. In summary, the strongest risk factors include:¹⁰⁰

- previous experience of IPV (victimisation and/or perpetration)
- criminal involvement
- relationship factors, such as low satisfaction and communication skills, and high discord and conflict
- substance abuse (alcohol and illegal drugs)
- mental health issues
- being abused as a child, including exposure to adult domestic violence.

The organisation responsible for conducting IRINA would have the task of determining a set of target questions based on the risk factors for IPV that would identify victim-survivors and perpetrators of IPV as well as people at high risk of experiencing/perpetrating IPV.

Thus, the sample of adult Australians would have two identified subsamples included in the population sample:

- group A: a group of victim-survivors and perpetrators of IPV and people at high risk of experiencing/perpetrating IPV identified at stage 1 of the survey
- group B: the remaining group of people identified as non-victim-survivors, non-perpetrators and people not at high risk of experiencing/perpetrating IPV at stage 1 of the survey.

99 M. Wooden. (2001). Design and management of a household panel survey: Lessons from the international experience. *HILDA Project Discussion Paper Series*, no. 2/01, p. 9.

100 Capaldi, et al. (2021). Intimate partner violence across the lifespan; Spencer, et al. (2022). What puts individuals at risk for physical intimate partner violence perpetration?; A. Curtis, T. Harries, B. Pizzirani, S. Hyder, R. Baldwin, R. Mayshak, A. Walker, J. Toumbourou, & P. Miller. (2023). Childhood predictors of adult intimate partner violence perpetration and victimization. *Journal of Family Violence*, vol. 38, pp. 1591–1606; Collibee, & Furman. (2016). Chronic and acute relational risk factors for dating aggression in adolescence and young adulthood; Capaldi, et al. (2012). A systematic review of risk factors for intimate partner violence.

Stage 2 and ongoing

In stage 2 of the sample selection and ongoing:

- All group A – the victim-survivors, perpetrators and those at high risk of IPV identified in stage 1 – would be surveyed.
- A smaller number of group B – non-victim-survivors, non-perpetrators and people not at high risk of IPV – than those identified in stage 1 would be surveyed.

The advantages of this approach are:

- The total sample size would be reduced, reducing the costs of the survey and the overall survey burden.
- Group B would be a comparator group of non-victim-survivors and non-perpetrators for group A. This would allow a comparison of the relationships, circumstances, behaviour and life outcomes of victim-survivors and perpetrators with those of non-victim-survivors and non-perpetrators. This is essential to be able to understand the impact of IPV on victim-survivors over time.
- Critically, the group B sample would be followed over time, allowing a study of the onset of IPV and its contributing factors from a sample of people who had not previously experienced and/or perpetrated IPV.

Problems of attrition

A disadvantage of longitudinal studies is that they are almost always affected by relatively high levels of attrition over time.¹⁰¹ Attrition occurs when a person interviewed at one wave ceases to participate in the survey at a later wave. Attrition is particularly problematic when these people have characteristics that are systematically different from those who remain. If this is the case, analyses of the survey data that do not account in some way for the selective nature of the attrition will most likely lead to biased inferences.¹⁰²

The organisation responsible for conducting IRINA will need to develop retention strategies aimed at reducing attrition. Examples of strategies from other longitudinal studies include:¹⁰³

- Strategies for promoting and maintaining a positive relationship, such as:
 - communicating regularly with survey participants
 - sending newsletters, which help keep individuals invested in the research and makes it easier to update contact information
 - providing information on the research team and ways to contact them

101 N. Watson, & M. Wooden. (2004). Sample attrition in the HILDA survey. *Australian Journal of Labour Economics*, vol. 7, no. 2, pp. 293–308.

102 Watson, & Wooden. (2004). Sample attrition in the HILDA survey.

103 See, for example, K. Hanna, L. Scott, & K. Schmidt. (2014). Retention strategies in longitudinal studies with emerging adults. *Clinical Nurse Specialist*, vol. 28, no. 1, pp. 41–45; Wooden. (2001). Design and management of a household panel survey, pp. 16–17; M. Wooden, & N. Watson. (2000). The Household, Income and Labour Dynamics in Australia (HILDA) Survey: An introduction to the proposed survey design and plan. *HILDA Project Discussion Paper Series* no. 1/00, p. 18.

- if possible, allocating the same staff member as the contact point for a participant over survey waves.
- Strategies for maintaining contact, such as:
 - gathering contact information at the initial enrolment, including participant's current address, mobile number and email address, as well as contact details for one or two persons (parents, relatives, friends) who would know the participant's whereabouts
 - including tracking questions in survey instruments, seeking updated contact information and information on future movement intentions
 - sending thank you cards to all interviewees following the interview, together with change-of-address cards for notification of any intended moves
 - maintaining a 1800 phone number so that participants can contact the fieldwork agency
 - allocating considerable effort to encouraging participation
 - annual data collection, which helps maintain contact with survey participants.
- A committed and motivated interviewer workforce, with good interpersonal skills and trained in 'interviewee-friendly' techniques, such as reminding participants of the availability of the next questionnaire and making follow-up telephone calls encouraging completion of surveys.
- Respect for participants, including:
 - contacting participants via their preferred mode of contact
 - where possible, providing participants with a choice about how they complete the survey
 - making all follow-ups brief, flexible, and convenient for participants.
- Provide incentives for participation:
 - For example, in wave 23 of HILDA, conducted in 2023, a \$50 incentive was offered for completion of the individual personal interview and \$20 was offered on completion of the self-completion questionnaire. The incentive could be received in cash or from non-cash options, including via bank transfer, an EFTPOS card, eGift, or charitable donation.¹⁰⁴



104 M. Summerfield, B. Garrard, R. Kamath, N. Macalalad, M. Nesa, N. Watson, R. Wilkins, & M. Wooden. (2024). *HILDA user manual – release 23*, Melbourne Institute: Applied Economic and Social Research, University of Melbourne, p. 148.

Chapter 6: Survey frequency

This chapter outlines the reasons IRINA should be conducted on an annual basis.

Benefits of annual longitudinal studies

The benefits of longitudinal studies, as previously discussed, are amplified with more frequent data collection, particularly for the dynamic outcomes that IRINA will study. Annual survey frequency will improve the potential of IRINA to collect data on the causes, consequences, patterns and trajectories of relationships and IPV. Emeritus Professor Mark Wooden summarises the arguments for annual longitudinal studies:¹⁰⁵

International experience suggests that survey frequency should be annual. Higher frequency is too burdensome on respondents, while less frequency is insufficient to adequately capture the dynamics of interest.

Accurately mapping changing dynamics

The outcomes that IRINA aims to understand are fast-changing and are more accurately studied through annual data collection.

Intimate relationships can form, change or end rapidly, and annual survey waves are needed to catch these transitions close to when they occur.

An annual study would allow the tracking of the lives of adults as they move through different relationship statuses. Intimate relationships can form, change or end rapidly, and annual survey waves are needed to catch these transitions close to when they occur. Annual data allows the monitoring of transitions such as entering or ending relationships, cohabitation, marriage, and separation. This is especially important for younger people, who experience more frequent relationship changes. While some changes within relationships will still be missed by annual data collection (for example, if a relationship starts and ends in less than a year, before the next survey wave), these changes are more likely to be captured in the study the more frequently data are collected. Moreover, it is envisaged that retrospective questions would be asked in IRINA about relationships that commenced and ended within the one-year period of data collection.

Annual longitudinal data are also important to be able to identify the onset of IPV and follow persistence, escalation and desistance. Annual data are particularly important for understanding coercive control. Coercive control involves patterns of violent and abusive behaviours, which have cumulative effects over time. Incidents of violence are often best

105 Wooden. (2001). Design and management of a household panel survey, p. i.

understood as part of these patterns, rather than as isolated behaviours.¹⁰⁶ Annual longitudinal data are essential to map these trajectories and observe how controlling relationships change over time.

In addition to accurately tracking the key outcomes, annual data collection establishes a clear sequence of key events in each person's life which impact on relationships and IPV. Key events include employment and unemployment, pregnancy, birth of a child, serious illness, retirement and moving house, among others. By measuring these factors each year, the study can observe whether a spike in stress or other risk factors in one year is followed by a deterioration in relationship quality or increased conflict in the next year.

For example, detailed annual data are required to fully understand the incidence of IPV during pregnancy. Some international research suggests that IPV often begins during pregnancy or, if violence already existed, increases in severity during pregnancy.¹⁰⁷ Other research suggests that IPV is low or decreases during pregnancy.¹⁰⁸ However, available research is not based on annual longitudinal data, which prohibits an adequate understanding of the relationship between pregnancy and IPV. Further, to assess whether IPV increases or decreases during pregnancy we need data on the experience of IPV in the years before pregnancy. As one research study which reported a decrease in IPV during pregnancy pointed out:¹⁰⁹

the lack of data concerning domestic violence victimisation prior to pregnancy is problematic. It is possible that victimisation prior to pregnancy was even lower than that reported during pregnancy and that in pregnancy women were victimised at a substantially higher rate.

Causality

Annual longitudinal data are beneficial for studying causal outcomes because they provide the temporal detail to understand how and why changes occur. When data are collected every year, researchers can observe patterns and transitions closer to when they occur. This frequent observation helps to clarify the order of events, which is a key requirement for potentially establishing causality, by showing which factors emerge first and which follow. It also reduces the risk of missing short-term fluctuations or reversals that can be critical for understanding complex social and behavioural changes.

106 Commonwealth of Australia (DSS). (2022). *National plan*, p. 37; S. Beckwith, L. Lowe, L. Wall, E. Stevens, R. Carson, R. Kaspiew, J MacDonald, J. McEwen, M. Willoughby, & L. Gahan. (2023). *Coercive control literature review final report*, AIFS Research Paper, p. 10.

107 M. Campo. (2015). *Domestic and family violence in pregnancy and early parenthood*, Australian Institute of Family Studies, practitioner resource, p. 7, www.aifs.gov.au/sites/default/files/publication-documents/cfca-resource-dv-pregnancy_0.pdf

108 S. Bergvall, & N. Rodríguez-Planas. (2024). Motherhood and domestic violence: A longitudinal study using population wide administrative data. *IZA Discussion Paper*, no. 17129. This research is based on administrative data and measures the more severe cases of violence, which underestimates women's experience of IPV. See also E. Bowen, J. Heron, A. Waylen, D. Wolke, & ALSPAC Study Team. (2005). Domestic violence risk during and after pregnancy: Findings from a British longitudinal study. *BJOG: An International Journal of Obstetrics and Gynaecology*, vol. 112, pp. 1083–1089.

109 Bowen, et al. (2005). Domestic violence risk during and after pregnancy, p. 1087.

This is demonstrated by looking at two possible scenarios related to the impact of financial hardship on relationships:

- In the first scenario, annual data show that financial hardship spikes in year one, while relationship satisfaction drops in year two, and then rebounds in year three when the couple adjusts to their financial situation. However, triennial data (collected once every three years) would not show the fall in relationship satisfaction in year two, preventing a meaningful causal analysis of the impact of financial hardship on relationship satisfaction.
- In the second scenario, financial hardship spikes in year one, but the couple is resilient and relationship satisfaction remains the same in year two. The couple then has a child in year three and relationship satisfaction declines in year four. Since a triennial survey would only be conducted in year one and year four, it would not be possible to attribute the decline in relationship satisfaction to financial hardship or pregnancy (or any other confounding factors that potentially affect both financial hardship and relationship satisfaction).

Methodological advantages

Annual data collection has further methodological advantages.

Improving recall and accuracy

Asking participants to recall events or feelings over long periods can lead to memory errors. An annual survey reduces the recall period, which improves the accuracy of self-reported data. Participants are more likely to remember what happened in the past year than several years ago. This is especially important when tracking complex personal experiences like relationship conflicts or violence.

This feature of annual longitudinal data is extremely important for future research on IPV because understanding statistical relationships depends critically on minimising errors in measurement. Measurement error is unavoidable in all empirical analyses, but annual surveys will reduce the problems.

Increasing survey engagement

As discussed in Chapter 5, annual data collection also helps maintain contact with survey participants, which reduces attrition, particularly during the early years of the study.¹¹⁰ Regular yearly engagement (sending surveys, newsletters or updates) keeps individuals invested in the research and makes it easier to update contact information. By conducting the survey every year, IRINA is more likely to maintain a high proportion of participants from the original survey, which in turn preserves the representativeness and validity of the findings.

Annual longitudinal data do involve a greater burden on respondents, as the data are collected more frequently. As IRINA will involve many potentially sensitive questions,

110 Wooden. (2001). Design and management of a household panel survey, p. 8.

ways to reduce the respondent burden will need to be considered. Annual data collection will also involve a greater cost, as discussed in Chapter 3.

Illustrating the importance of annual longitudinal data

Analysis undertaken by Dr Kristen Sobeck using data from the Australian Longitudinal Study on Women's Health (ALSWH) illustrates the benefits of annual data for understanding and analysing relationships and IPV.¹¹¹ While the ALSWH is usually undertaken once every three years, it was undertaken annually between 2013 to 2017 (and again in 2019 and 2023) for the survey's youngest birth cohort of women (women born between 1989 and 1995). Sobeck undertook several analyses using the annual ALSWH data and then recalculated the same analyses by assuming that the data were instead collected triennially (in 2013, 2016, and 2019). Comparing the annual and triennial analyses sheds light on some of the implications of less frequent data collection. Those findings are summarised below.

Following the dynamics of abuse

The ALSWH asks about women's experience of different types of IPV – emotional, physical, sexual and harassment – and the co-occurrence of the different types. The availability of annual data allow us to examine the dynamics of abuse. In other words, does abuse escalate to another form of abuse in subsequent years, or does it remain the same?

The availability of annual data allow us to examine the dynamics of abuse. Does abuse escalate to another form of abuse in subsequent years, or does it remain the same?

The analysis of ALSWH found that, in the first year of reporting IPV, about half of the women (50.1 per cent) reported experiencing emotional abuse only. However, of these women, 40 per cent reported experiencing different or escalated forms of violence in the next year.¹¹² For example, in the year after first reporting IPV, 24 per cent of these women experienced physical violence (either exclusively, or with other types of violence) in the subsequent year. If we did not have annual data for the subsequent year, it would be harder to know the timing and patterns of how abuse changes over time. Annual longitudinal data enable us to follow women's trajectories of abuse in greater detail than biennial or triennial data.

111 K. Sobeck. (2025). The importance of annual longitudinal data for the purposes of measuring and understanding domestic violence, research note, Tax & Transfer Policy Institute, ANU, www.uts.edu.au/globalassets/shared-media/documents/business/dfvi/the-importance-of-annual-data.pdf

112 Sobeck. (2025). The importance of annual longitudinal data for the purposes of measuring and understanding domestic violence, p. 2.

Tracking the impact of IPV on mental health

The ALSWH also asks questions which allow for the analysis of the impact of IPV on a range of areas, including employment, educational attainment, relationship status, and mental and physical health.

In her analysis, Sobeck looked at the outcomes for mental health.¹¹³ She analysed ALSWH annual data to show the impact of IPV on suicidal thoughts. The analysis compared women who reported experiencing IPV in one survey wave only (that is, experienced IPV during one year only) with women who reported IPV for at least two survey waves (that is, who experienced IPV in at least two years). The annual data show that:

- Of women who reported IPV once, their experience of suicidal thoughts sharply increased in the first year that violence occurred – to 37 per cent from 29 per cent one year before. The level declined to pre-IPV levels over the following two years.
- For women who reported IPV in at least two years, similarly the percentage who experienced suicidal thoughts increased in the first year that violence occurred – to 35 per cent from 27 per cent in the year before. However, the experience of suicidal thoughts remained high for these women over the next two years while the violence persisted.

This precise assessment of how long IPV affects suicidal thoughts for different groups of women is possible with annual data that capture year-to-year changes.

Understanding causality

For this analysis of ALSWH data, Sobeck created a dataset which allows for a direct comparison between findings based on annual data and those based on triennial data. The annual data are for 2013 to 2017, and the triennial data are for 2013, 2016 and 2019.

This analysis used an event-study framework, which transforms calendar-time into event-time to mark the first year in which a woman reports IPV (this becomes year zero).¹¹⁴

The methodology allows for analysis of causality. Sobeck looked at the impact on relationship status – being in an intimate partner relationship – following a report by a woman of experiencing IPV.¹¹⁵

The *annual* data showed a sharp decline in the proportion of women in an intimate partner relationship in the first year that violence is reported – from 82 per cent the year before IPV is reported, to 73 per cent.

113 Sobeck. (2025). The importance of annual longitudinal data for the purposes of measuring and understanding domestic violence, pp. 4–5.

114 A more detailed explanation of event-time as applied to ALSWH data in a different research project can be found in A. Summers. (2025). *The cost of domestic violence to women's employment and education*, p. 92.

115 Sobeck. (2025). The importance of annual longitudinal data for the purposes of measuring and understanding domestic violence, p. 4.

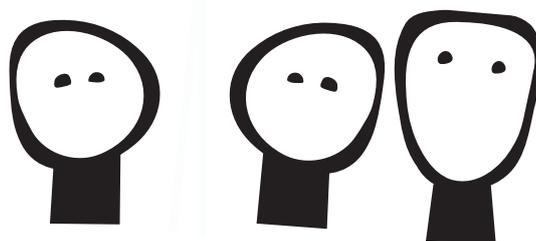
In comparison, the *triennial* data barely showed a decline in relationship status – the percentage of women in an intimate partner relationship declined from 74 per cent three years before IPV is reported to 73 per cent in the year IPV is reported.

The smaller change seen in the triennial data occurs because collecting information only once every three years obscures many of the rapid and complex changes that actually take place in women's lives. Within a three-year period, for example, a woman might start a relationship, experience violence, end that relationship, and perhaps begin another one, all before the next survey takes place. Since the survey only records her relationship status at one point in time, all these different experiences are combined into a single observation. This makes the data appear relatively stable, even though many women may have gone through significant changes in the years between surveys.

Annual data, on the other hand, capture these transitions much more precisely. They are more likely to record each stage of change – such as forming a relationship, experiencing IPV, separating and re-partnering – as distinct steps that occur in sequence. Because these events are tracked year by year, the annual data reveal shorter-term shifts and make it easier to see how IPV directly causes relationship breakdown.

The analysis shows that relying on triennial data would be misleading – it would materially understate the impact of IPV as a risk factor for relationship separation. Annual data establishes a clearer sequence of key events in each person's life, helping to establish causes and consequences.

It is important to note that annual data can also understate changes that arise between annual survey waves, but to a lesser degree than less frequently collected surveys. Furthermore, while it would be technically possible for a triennial survey to collect information about annual events, it would rely heavily on retrospective questions which are subject to issues with memory and recall (as discussed earlier in this chapter).



Chapter 7: Data collection

Given the sensitive information that IRINA will collect, the methods for collecting data must be tailored to ensuring respondents are comfortable, safe and engaged with the study, as well as encouraging accuracy in responses. The fieldwork approach would need to be designed and tested to maximise response rates and quality and ensure the wellbeing of respondents and field staff.

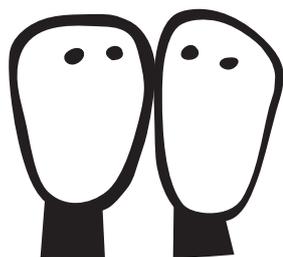
IRINA will be conducted face-to-face, using the dual approach to data collection used by the ABS for the Personal Safety Survey (PSS) (see Box 5). The approach is based on two main methods of data collection: the computer-assisted personal interview (CAPI) and the computer-assisted self-interview (CASI).

IRINA will be conducted face-to-face, using the dual approach to data collection used by the ABS for the Personal Safety Survey.

The survey will be administered by interviewers who have been carefully trained in both technical procedures and trauma-informed practice. They will be instructed on how to approach interviews sensitively, maintain a neutral and supportive manner, and respond appropriately to any signs of distress. Regardless of their responses, all participants will be given information about counselling services, helplines and other support options at the conclusion of the interview. Respondents will be told that their participation in sensitive topic areas is voluntary and that they can withdraw or decline to answer these questions if they choose. It will be important, insofar as possible, to maintain the same interviewer for each respondent each year, to build up rapport and comfort.

All participants will be given information about counselling services, helplines and other support options.

Interviews will be conducted in private, safe settings. This will most commonly be at the respondent's home, provided that the interviewer can confirm that the respondent is alone in the house and the interview can be conducted privately. Where this is not possible, the interview can also take place at a safe other location, such as a café or library.



Box 5: Data collection methods for the 2016 PSS

Both a CAPI and a CASI were used for the 2016 PSS.

At the beginning, selected individual respondents were first advised in a CAPI of the general nature of the survey. During the interview, individuals were asked less sensitive questions first, for example regarding their demographic details and general feelings of safety. This allowed people to become comfortable with the method of questioning, to build a certain level of rapport with the interviewer, and also to familiarise themselves with the survey content.

Once the questions regarding a person's experience of violence were reached in the interview, respondents were informed of the sensitive nature of the upcoming questions and their permission to continue with the interview was sought. From this point the interview was voluntary, and respondents could choose not to proceed at any stage.

At this point the respondent was also advised that the interview would continue as a CASI, that is, the respondent would complete the interview themselves using the interviewer's laptop. The CASI mode was introduced for the PSS in 2016 due to the sensitive nature of the information being collected and as a method to improve response rates. However, if the respondent identified they were not comfortable with using a computer or wanted the interviewer to continue, the interviewer could offer to continue conducting the interview as a CAPI.

In these situations, it was a specific requirement that all CAPIs for the sensitive topics were to be conducted alone (including no children) in a private setting. Interviewers were advised that it was preferable to obtain a private setting (whether in the home or at an alternative location) from the beginning of the interview in order to avoid disruption. Interviewers were also advised that if the respondent chose to complete the voluntary component as a CASI, they should ensure that other people could not see the screen or respondent reactions or hear any queries the respondent may ask them about the questions.

The questions asked during the interview (or even just raising the topics that were to be asked about) may have caused emotional distress for some respondents. The ABS provided an information card containing contact details of support services. This card was offered to all people during the sensitive, voluntary component of the interview.

Source: ABS. (2017). *Personal Safety Survey, Australia: User guide, 2016*, <https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/4906.0.55.003main+features232016>

Respondent safety

The safety of victim-survivors who participate in this study is the most important reason for adopting a combination of CAPI and CASI. Extensive consultations with researchers, frontline services, police, digital safety experts and women with lived experience have shown that participation in surveys about IPV carries very real risks. These risks arise both from the immediate threat of being overheard or monitored and from longer-term

repercussions that may follow if perpetrators suspect that victim-survivors have disclosed the violence that they are experiencing. A more thorough review of these risks and the safety considerations underpinning the study methodology is provided in Appendix 2.

The presence of children or other household members can also compromise privacy as they may report back to the perpetrator that the respondent had disclosed instances of violence during the interview. Such factors could deter participation or distort responses, undermining both respondent safety and the quality of the data collected.

This combined CAPI and CASI model reflects best practice internationally, including global ethical and safety recommendations for research on violence against women, and is the model adopted by the ABS in the PSS.¹¹⁶ In practice, this approach has been shown to protect respondents by minimising opportunities for surveillance and coercion while allowing them to answer honestly.

Safety of interviewers

The safety of interviewers conducting face-to-face research about sensitive questions also needs to be considered. As detailed in Appendix 2, we heard from some polling and survey companies about their safety protocols for interviewers who are conducting potentially sensitive interviews. These included an emergency alert system that connects interviewers to a central operations team, working in pairs, having a designated colleague waiting nearby, and having check-in and check-out procedures during all field visits.

The ABS also has specific training and field procedures for interviewers conducting the PSS, reflecting the sensitive nature and content of the survey.¹¹⁷ For PSS interviewers, a support network was put in place to provide support, stress management and coping strategies while they were working on the survey. The main components of the network were access to a counsellor hotline, a contact person in the office, and the provision of voluntary emotional debriefing sessions. Interviewers were strongly encouraged to use this network.

In addition, Sensitivity and Awareness Training sessions were led by external psychologists and aimed to increase interviewers' awareness of the experience of violence, particularly domestic, family and sexual violence, and their own response to the topic. It also provided techniques to assist interviewers to look after themselves and to react professionally and appropriately to the topics addressed in the survey.

As recommended in Chapter 8, a detailed safety plan to address risks for respondents and interviewers would be required in the development of IRINA.

116 World Health Organisation (WHO). (2001). *Putting women first: Ethical and safety recommendations for research on domestic violence against women*; ABS. (2017). *Personal Safety Survey, Australia: User guide 2016*, www.abs.gov.au/ausstats/abs@.nsf/Lookup/4906.0.55.003main+features232016

117 ABS. (2023). *Personal Safety Survey: User guide 2021–22*, www.abs.gov.au/statistics/detailed-methodology-information/concepts-sources-methods/personal-safety-survey-user-guide/2021-22/survey-development-and-data-collection

Respondent engagement

For longitudinal surveys, in general, international practice is that, during the first few waves at least, surveys are best conducted on a face-to-face basis. Face-to-face interviewing is thought to be more successful in eliciting cooperation, which is vital during the earliest years of the survey when respondent identification with the study is still developing.¹¹⁸ It also eliminates imposter participants prevalent in online studies.¹¹⁹

Over time, after several face-to-face waves have been completed, it may be possible for the study to move to a mixed-mode collection method, with options for respondents to complete the survey online or via phone, if sufficient safety measures are in place.

Accuracy of sensitive information

Researchers have concerns about the accuracy of answers to sensitive questions, such as perpetration of IPV.¹²⁰ Sensitive survey questions tend to produce comparatively higher non-response rates or larger measurement error in responses than questions on other topics. If non-response is not random but associated with the characteristics of the responders (for example, their age or sex), this will bias the estimates. (The problems of attrition are discussed in Chapter 5.)

IRINA will include many highly sensitive topics, and the proposed data collection methods are tailored to reflect this.

IRINA will include many highly sensitive topics, and the proposed data collection methods are tailored to reflect this. Many respondents may be reluctant to disclose intimate details about their relationships and their experiences or perpetration of violence. (Chapter 8 outlines the safety, privacy and confidentiality arrangements required in undertaking the longitudinal study.)

118 Wooden, & Watson. (2000). The Household, Income and Labour Dynamics in Australia (HILDA) Survey, pp. 7–8.

119 F. Giles, M. McKenzie, M. Kyei-Nimakoh, L. Satyen, L. Tarzia, & K. Hegarty. (2025). Management of imposter participants when conducting online research with victim-survivors and perpetrators of violence. *Methodological Innovations*, vol. 18, no. 2, pp. 79–88.

120 See I. Ruiz-Pérez, J. Plazaola-Castaño, & C. Vives-Cases. (2007). Methodological issues in the study of violence against women. *Journal of Epidemiology and Community Health* 2007, 61 (Suppl II), ii26–ii31; R. Tourangeau, & T. Yan. (2007). Sensitive questions in surveys. *Psychological Bulletin*, vol. 133, no. 5, pp. 859–883.

Beginning the interview with a CAPI ensures that complex questions – such as those about demographics, family arrangements, or health – are explained clearly and answered consistently. This sequencing (starting with interviewer-led questions and transitioning to self-completion for sensitive content) has been shown in the PSS to yield high-quality data while respecting participants’ privacy and emotional wellbeing. Once trust has been built through the CAPI stage, respondents are more likely to feel that their information will be treated respectfully and confidentially.

When the interview then shifts to CASI, perpetrators can answer the most sensitive questions privately, without the fear of judgement from the interviewer. The CASI mode gives respondents full control over how they answer the most personal questions, reducing social desirability bias and the likelihood of under-reporting. It is widely agreed that respondents are more likely to answer sensitive questions in a self-complete survey rather than one administered by an interviewer.¹²¹

There is a significant body of research dedicated to techniques for including sensitive questions in surveys. Other survey design features which could be employed to encourage responses to sensitive questions include:¹²²

- a private context for answering questions, such as no one else in the house
- reminding the respondent that their responses will be kept confidential and that they are not going to be subject to legal sanction for the behaviours they report¹²³
- asking questions in less stigmatising ways, using behaviourally specific language. For example, very few perpetrators will agree with a direct labelling question about rape, such as ‘Have you ever raped someone?’. However, many more perpetrators will agree to an alternative behaviourally specific question, such as ‘Have you ever had sexual intercourse with a woman when she did not want to by overwhelming her with continual arguments and pressure?’¹²⁴
- phrasing the question to lead with tactics used (for example, ‘Have you ever used some degree of physical force or in any other way restrained or physically hurt someone to make them have oral sex with you?’) rather than leading with the sex act first (for example, ‘Have you ever made someone have oral sex with you by using some degree of physical force or in any other way restraining or physically hurting them?’)¹²⁵

121 Tourangeau, & Yan. (2007). Sensitive questions in surveys. For example, a recent study using the American Longitudinal Study of Youth found that there are higher rates of reporting substance use in self-administered surveys compared to interviewer-administered surveys: see L. Gorfinkel, M. Stohl, D. Shmulewitz, & D. Hasin. (2024). Self-reported substance use with clinician interviewers versus self-administered surveys. *Journal of Studies on Alcohol and Drugs*, vol. 85, no. 1, pp. 92–99.

122 Tourangeau, & Yan. (2007). Sensitive questions in surveys. *Psychological Bulletin*, vol. 133, no. 5, pp. 859–883; Victorian Legislative Assembly Legal and Social Issues Committee. (2024). *Transcript of evidence: Professor Michael Flood and Dr Hayley Boxall*, Building the evidence base: Inquiry into capturing data on family violence perpetrators in Victoria, Monday 12 August 2024, pp. 22, 25.

123 E. Singer, D. Von Thurn, & E. Miller. (1995). Confidentiality assurances and response: A quantitative review of the experimental literature. *Public Opinion Quarterly*, vol. 59, no. 1, pp. 66–77.

124 Abbey, et al. (2005). The effects of frame of reference on responses to questions about sexual assault victimization and perpetration.

125 Abbey, et al. (2005). The effects of frame of reference on responses to questions about sexual assault victimization and perpetration.

- consider using forgiving language to introduce a question.¹²⁶ For example, before including a list of behaviour questions, the original Conflict Tactics Scale began with ‘No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they’re in a bad mood or tired or for some other reason.’¹²⁷
- ordering the questions so that the sensitive questions are placed at the end of the questionnaire¹²⁸
- matching the sex of the interviewer and respondent¹²⁹
- ‘priming’ the respondent with words related to honesty and truth at the start of the survey.¹³⁰

Furthermore, in his evidence to the Inquiry into capturing data on people who use family violence in Victoria, Professor Michael Flood challenged the view that people will not report on their own use of violence:¹³¹

There is actually now a substantial body of scholarship, including multi-country studies, large-scale national studies and so on and in fact no fewer than four or five Australian studies asking people about perpetration – the recent Man Box survey, the very recent Australian Institute of Criminology survey on sexual violence, earlier pieces on child sexual abuse perpetration and image-based sexual abuse perpetration. All those studies have shown that people will report on the use of behaviours that are stigmatised, that are undesirable and that are even criminal.

Flood also pointed out that there is evidence that people’s reports of perpetration of IPV are at least as reliable as people’s reports of victimisation as captured in, for example, the PSS.¹³²

126 There is inconsistent evidence on the effectiveness of using forgiving language to increase responses to sensitive survey questions that collect information on socially undesirable behaviours: see J. Charles, & P. Dattalo. (2018). Minimizing social desirability bias in measuring sensitive topics: The use of forgiving language in item development. *Journal of Social Science Research*, vol. 44, no. 4, pp. 587–599; Tourangeau, & Yan. (2007). Sensitive questions in surveys.

127 M. Straus. (1979). Measuring intrafamily conflict and violence: The Conflict Tactics Scale. *Journal of Marriage and the Family*, vol. 41, no. 1, p. 87.

128 H. Taherdoost. (2022). Designing a questionnaire for a research paper: A comprehensive guide to design and develop an effective questionnaire. *Asian Journal of Managerial Science*, vol. 11, no. 1, p. 13.

129 Tourangeau, & Yan. (2007). Sensitive questions in surveys.

130 K. Rasinski, P. Visser, M. Zagatsky, & E. Rickett. (2005). Using implicit goal priming to improve the quality of self-report data. *Journal of Experimental Social Psychology*, vol. 41, no. 3, pp. 321–327.

131 Victorian Legislative Assembly Legal and Social Issues Committee. (2024). *Transcript of evidence: Professor Michael Flood and Dr Hayley Boxall*, p. 25.

132 Victorian Legislative Assembly Legal and Social Issues Committee. (2024). *Transcript of evidence: Professor Michael Flood and Dr Hayley Boxall*, p. 23.

Chapter 8: Governance

This chapter canvasses governance arrangements for IRINA, addressing funding and management of IRINA; privacy requirements; and advisory mechanisms. It also highlights the need for ethics approval to conduct the study.

Funding and management

We recommend that the Australian government funds a suitably qualified and highly trusted organisation to conduct IRINA.¹³³ The organisation would be responsible for the design, delivery and management of IRINA. This would include the functions of survey design and content; sampling; testing and piloting; participant recruitment and ongoing engagement; data collection; data storage and access; and analysis and reporting.

Privacy, confidentiality and safety

In undertaking this data collection, the organisation responsible will need to incorporate an appropriate legislative framework into the end-to-end survey activities, to ensure the privacy and confidentiality of data collected, processed, published and stored, and the safety of respondents and interviewers.

A privacy impact assessment (PIA) will be essential. A PIA is a systematic assessment of a project that identifies the impact that the project might have on the privacy of individuals, and sets out recommendations for managing, minimising or eliminating that impact.¹³⁴

All Australian government agencies and other relevant organisations must comply with the *Privacy Act 1988* (Privacy Act).¹³⁵ The Privacy Act includes thirteen Australian Privacy Principles (APPs). The APPs require ‘privacy by design’, an approach whereby privacy compliance is designed into projects dealing with personal information right from the start, rather than being bolted on afterwards. The APPs:¹³⁶

133 The Australian government currently funds seven major longitudinal studies:

- four through the Department of Social Services (DSS): HILDA, LSAC, LSIC, and Building a New Life in Australia (BNLA)
- two through the Department of Health, Disability and Aged Care: Ten to Men and the Australian Longitudinal Study on Women’s Health (ALSWH)
- one through the Department of Education: Longitudinal Surveys of Australian Youth (LSAY).

The studies are managed by different agencies: AIFS manages three studies (LSAC, BNLA and Ten to Men); DSS manages LSIC; Melbourne Institute of Applied Economic and Social Research manages HILDA; the University of Newcastle and University of Queensland jointly manage ALSWH; and the National Centre for Vocational Education Research manages LSAY.

134 Office of the Australian Information Commissioner (OAIC). (n.d.). *Guide to undertaking privacy impact assessments*, www.oaic.gov.au/privacy/privacy-guidance-for-organisations-and-government-agencies/privacy-impact-assessments/guide-to-undertaking-privacy-impact-assessments#ftn1

135 OAIC. (n.d.). *The Privacy Act*, www.oaic.gov.au/privacy/privacy-legislation/the-privacy-act

136 Attorney-General’s Department. (n.d.). *Privacy*, www.ag.gov.au/rights-and-protections/privacy

- deal with all stages of the processing of personal information, setting out standards for the collection, use, disclosure, quality and security of personal information
- provide obligations on agencies and organisations subject to the Privacy Act concerning access to, and correction of, an individual's own personal information.

Given the sensitive nature of the survey content of IRINA, these privacy obligations are important to gain the confidence of survey participants that their information will be kept confidential.

Risks to the safety of respondents and interviewers from participating in a sensitive survey including questions about IPV are discussed in Chapter 7 and Appendix 2. A detailed safety plan to address these risks for respondents and interviewers would be required. It would inform the design of the survey, the approach to data collection, and communication materials for recruitment and retention of respondents.

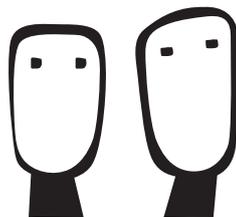
Advisory mechanisms

We recommend a Lived Experience Panel of victim-survivors of IPV be set up. People with lived experience of violence and abuse have specific contextual expertise and understanding.

All existing major Australian longitudinal studies have advisory groups to help manage the complexity and challenges of conducting a large study over a long period. The advisory groups provide guidance on technical issues (such as survey sampling and attrition) as well as research direction and relevant subject knowledge.

We recommend an advisory group be set up to advise on the design, development and implementation of IRINA. As well as technical expertise in conducting longitudinal studies, the group should include experts with relevant policy understanding and service delivery experience.

We also recommend a Lived Experience Panel of victim-survivors of IPV be set up. People with lived experience of violence and abuse have specific contextual expertise and understanding. The Panel will amplify the diverse voices of people with lived experience, and share their insights and advice to shape the survey design and delivery.



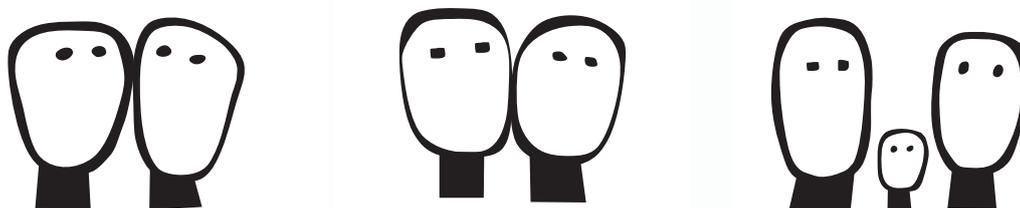
Ethics approval

The issues addressed by IRINA are extremely personal and sensitive. As with all research proposals involving human participants, the organisation responsible for conducting IRINA must have the study reviewed by a Human Research Ethics Committee (HREC) to ensure it meets ethical standards and guidelines. These guidelines include the National Statement on Ethical Conduct in Human Research (National Statement).¹³⁷

The National Statement is a set of guidelines that sets the requirements for the ethical design, review and conduct of human research in Australia. Of particular relevance to IRINA, the guidelines highlight that the impact of experience of violence, abuse and other forms of trauma may increase a person's risk of harm when participating in research.¹³⁸

We acknowledge the ethical risks of conducting IRINA. We also recommend the organisation comply with the specific ethical guidelines for conducting research on domestic violence, which are discussed in more detail in Appendix 2:

- Department of Foreign Affairs and Trade (DFAT), Ethical Considerations for Research and Evaluation on Ending Violence against Women and Girls¹³⁹
- World Health Organisation (WHO), Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women.¹⁴⁰



137 National Health and Medical Research Council, Australian Research Council and Universities Australia (2025). *National statement on ethical conduct in human research*, www.nhmrc.gov.au/about-us/publications/national-statement-ethical-conduct-human-research-2025

138 National Health and Medical Research Council, Australian Research Council and Universities Australia. (2025). *National statement on ethical conduct in human research*, p. 66, www.nhmrc.gov.au/about-us/publications/national-statement-ethical-conduct-human-research-2025.

139 Department of Foreign Affairs and Trade (DFAT). (2018). *Ethical considerations for research and evaluation on ending violence against women and girls*, pp. 6–7.

140 World Health Organisation (WHO). (2001). *Putting women first*.

Acknowledgements and gratitude

I am very grateful to the federal government ministers Senator the Hon Katy Gallagher (Minister for Finance, Minister for Women, Minister for the Public Service, Minister for Government Services) and the Hon Amanda Rishworth MP, then Minister for Social Services, who each met with us separately to listen to our idea for a study that would yield previously unknown information about why some intimate relationships become violent and what causes such violence to escalate or to decline. Following these meetings, the two ministers wrote to us giving us their in-principle support for the project. They noted that we did not ask for funding, but they offered expert advice from members of their departments and associated government bodies to assist us with the design.

Following the 2025 federal election, the Hon Tanya Plibersek replaced the Hon Amanda Rishworth as Minister for Social Services. She, too, met with us early in her tenure and added her in-principle support for this very challenging and audacious project.

Without this high-level encouragement, I wonder if our small team (there are just three of us) would have had the courage and the fortitude to take on such an unprecedented and ambitious challenge, so we express our unreserved gratitude to Ministers Gallagher, Rishworth and Plibersek for encouraging us to do this work.

Nor could we have attempted such a complex project without the significant funding provided by the Paul Ramsay Foundation, which enabled me to hire an expert team and work for almost three years on both the longitudinal study design and a prior project, *The Cost of Domestic Violence to Women's Employment and Education*, which we published in February 2025. We could not be more grateful to CEO Professor Kristy Muir; Jackie Ruddock, Head, Families; and Nicola Cannon, Partnership Associate, for their continued encouragement.

The Snow Foundation also contributed to the longitudinal study project, enabling us to, among other things, fund an in-person meeting in Melbourne of our Indigenous Expert Group. We are so grateful for the sympathy and understanding provided by Sally Grimsley-Ballard, Partnerships Manager and the initial decision to fund us made by CEO Georgina Byron.

We regard the collection of such previously unknown data as critical to the daunting but essential task of ending all forms of domestic, family and sexual violence. By providing large sums of no-strings-attached funding, these two foundations have underwritten unique, pioneering work that we hope will lead to significant change in the way the federal government responds to domestic violence.

I also want to express my sincere appreciation to the Business School at the University of Technology Sydney. Professor Carl Rhodes, Dean of the School, made the unprecedented decision to invite a small domestic violence team into his school, a move that raised eyebrows in some quarters but which attracted all the right sort of attention to our work. It made people look at us differently, take us more seriously, and gave us a legitimacy that

enabled us to do this work. The Business School under Carl and, later, his successor, Professor Sara Denize, offered us physical space and technical support, but gave us much more than that: respect for our work, by including it in the school's calendar and communications, and by hosting several high-level panel discussions that enabled us to share our work with our new colleagues. These included Professor Kathy Walsh, Associate Dean (Research and Innovation), who directly managed us and inducted us into the often mysterious ways of the academy; Bronwyn Edds, Research Manager; and Mika Bell, Research Officer (Centres).

We are also extraordinarily grateful to Sarah Angus, Senior Advancement Manager, who managed our funding for us and was always on the lookout for further ways to make our work easier, and to the team at the Centre for Social Justice and Inclusion, led by Pro Vice-Chancellor Amy Persson and ably assisted by Fiona Versey, Manager, Strategic Partnerships and Advocacy, who ran seminars to support our work and who were always on hand to help us.

We are exceptionally grateful to the individuals – public servants, researchers, academics, activists and others – who gave significant time (all of it unpaid) to attend meetings, read research documents, provide written critiques and otherwise assist our team in designing this important new Australian longitudinal study. We thank the following people who were members of the Working Group, the Technical Group or the Indigenous Expert Group:

- Catherine Andersson, Research Director, Data and Lifecourse Studies, AIFS: Technical Group
- Professor Gawaian Bodkin-Andrews, Director of Indigenous Research, Western Sydney University: Working Group, Indigenous Expert Group
- Dr Hayley Boxall, Research Fellow, ANU College of Arts and Social Sciences: Working Group, Technical Group
- Dr Tessa Boyd-Caine, CEO, ANROWS: Working Group
- Professor Bruce Chapman, Emeritus Professor, ANU College of Business and Economics: Working Group, Technical Group
- Professor Kyllie Cripps, Director, Monash University Indigenous Studies Centre: Working Group, Technical Group, Indigenous Expert Group
- Annabelle Daniel, CEO, Women's Community Shelters: Working Group, Women's Safety Subcommittee
- Wynetta Dewis, CEO, Queensland Indigenous Family Violence Legal Service: Working Group, Indigenous Expert Group
- Kayelle Drinkwater, Acting Chief Data Officer, DSS: Working Group
- Professor Ben Edwards, Senior Fellow, ANU College of Arts and Social Sciences: Working Group, Technical Group
- Nick Egan, Senior Statistician, University of Newcastle Centre for Women's Health Research: Technical Group
- Professor Kelsey Hegarty, Joint Chair in Family Violence Prevention, University of Melbourne: Working Group, Technical Group, Women's Safety Subcommittee

- Dr Sarah Hinde, Program Manager, Education and Crime Statistics Branch, ABS: Working Group
- Associate Professor Marlene Longbottom, James Cook University Indigenous Education and Research Centre: Working Group, Indigenous Expert Group
- Professor Deborah Loxton, Director, University of Newcastle Centre for Women's Health Research: Working Group, Technical Group
- Angela Lynch, Executive Officer, Queensland Sexual Assault Network: Working Group
- Professor Ben Mathews, Queensland University of Technology School of Law: Working Group, Technical Group
- William Milne, Director, Crime and Justice Statistics, ABS: Technical Group
- Gayle Milnes, National Data Commissioner: Working Group
- Liz Neville, CEO, Australian Institute of Family Studies: Working Group
- Anthea Saflekos, Assistant Director, Crime and Justice Statistics, ABS: Technical Group, Women's Safety Subcommittee
- Padma Raman, Executive Director, Office for Women: Working Group
- Jenna Roberts, Assistant Domestic, Family and Sexual Violence Commissioner: Working Group, Indigenous Expert Group
- Sharon Stuart, former Branch Manager, Data Governance and Use, DSS: Technical Group
- Natalie Townsend, Research Executive Manager for the Australian Longitudinal Study on Women's Health, University of Newcastle Centre for Women's Health Research: Technical Group
- Gemma Van Halderen, former Chief Data Officer, DSS: Working Group
- Professor Maggie Walter, Emerita Professor, University of Tasmania School of Social Sciences: Working Group, Technical Group, Indigenous Expert Group
- Dr Jananie William, Senior Lecturer, ANU Research School of Finance: Working Group
- Emeritus Professor Mark Wooden, Melbourne Institute of Applied Economic and Social Research: Working Group, Technical Group
- Louise York, Group Head, Community Services, Australian Institute of Health and Welfare: Working Group.

Special appreciation is due to the members of the Women's Safety Subcommittee: Annabelle Daniel, Professor Kelsey Hegarty, Angela Lynch and Anthea Saflekos. Their extensive consultations ensured this report gave full consideration to all of the challenges involving the risks to women as respondents and/or interviewers and came up with recommendations on how best to keep them safe.

I am also grateful to Emeritus Professor Bruce Chapman of the ANU for ongoing advice throughout the project, to Dr Kristen Sobek, Research Fellow, Tax and Transfer Policy Institute, ANU for her contribution on the benefits of annual data collection and for providing written comments on the draft report, and to Dr Liz Allen, Demographer and Senior Lecturer, ANU for providing written comments on the final draft of this report.

Tricia Dearborn provided excellent copyediting, and Libby Blainey, who designed our two previous reports, once again provided an exemplary approach in combining sensitivity to the subject matter with a bold and alluring design. I am full of admiration for their dedication and expertise.

Finally, this report is the work of a small but expert team. I was fortunate in being able to recruit Mary Ann O'Loughlin, a renowned social policy researcher with whom I have had the privilege of working several times in the past, and Thomas Shortridge, who was new to the subject matter but quickly became accomplished in every area he was called upon to master. Both analysed massive amounts of research to produce the papers needed by the advisory groups and both were adept in revising multiple drafts to produce this final version. It is a unique piece of research, one I am extremely proud of, and it would not have been possible without their contributions. I cannot thank them enough.

Anne Summers

Appendix 1: Ministerial letter of in-principle support



SENATOR THE HON KATY GALLAGHER
Minister for Finance
Minister for Women
Minister for the Public Service

THE HON AMANDA RISHWORTH MP
Minister for Social Services

4 JUL 2024

PM&C ref: MC24-079169
DSS ref: MC24-006129

Dr Anne Summers AO
University of Technology Sydney
Anne.Summers@uts.edu.au

Dear Dr *Anne* Summers

Thank you for your correspondence to us dated 21 May 2024, regarding your proposal for a New Longitudinal Study on Domestic, Family and Sexual Violence (FDSV).

Thank you also for meeting with us on separate occasions to discuss this work.

We understand you are not seeking funding at this time, but are seeking:

1. In-principle support for development of a new longitudinal study, and
2. Agreement that subject matter and methodological experts from government departments and agencies will work with you over 2024 and 2025 to assist in the design of the study.

We are supportive of these two requests. We note that a decision to provide funding for the study, once designed, will be a matter for the Government of the day, but we are supportive of your proposal to develop this work. It aligns with the ambitions of the *National Plan to End Violence against Women and Children 2022-2032* (National Plan) and is important to deepen our understanding of gender-based violence, particularly in relation to perpetrators.

We are very supportive of you working with our Departments and across the Government on the design of the study. We note that you may seek advice from a range of portfolios in addition to ours. We ask that you work with our Departments on access to expertise across these portfolios and advise us or our offices if you require further support.

We also request you work with us and our Departments on how this work can align with the National Plan, and complement other investments in research and data that are underway including:

- Work through ANROWS on a National Priority Research Fund, and to build the evidence base on pathways into and out of perpetration of FDSV.
- The Australian Bureau of Statistics Criminal Justice Data Asset (CJDA), that will provide data on people who use violence.
- Current longitudinal surveys, which may be enhanced them through collecting more fulsome data on family, domestic and sexual violence where this is possible.
- The newly formed Australian Public Service community of practice on longitudinal studies.

We also note that this work may intersect with consideration about perpetration through processes underway to support National Cabinet, including through the Rapid Review panel you are a member of.

Thank you for your work to develop and design this research. We look forward to hearing more about how the study design is progressing, and continuing to work with you on our shared ambition to end violence against women and children.

Yours sincerely


Katy Gallagher



Amanda Rishworth

Appendix 2: Report of the Women's Safety Subcommittee

This report consolidates the deliberations and advice of a Working Group subcommittee on ensuring women's safety, which was established after we were alerted to risks involved for victim-survivors in data collection. The report integrates feedback drawn from experts across research, service provision, survey methodology and polling, policing, and cybersecurity, together with insights from people with lived experience of IPV.

Background

At a meeting on 23 January 2025, the Working Group discussed the risks for respondents and interviewers engaging in a study with a significant focus on IPV. As a result, the Working Group decided to set up a subcommittee to investigate the risks, and practical ways to address them. The subcommittee was originally focused on whether the study could safely proceed as a household study, in which both members of a cohabiting couple could be included in the study. This household approach would have provided more detailed information from both members of a relationship, thus providing a fuller picture. However, there were significant concerns raised by Working Group members about potential risks if a perpetrator became aware that their partner/victim-survivor was being asked detailed questions about their violence.

The subcommittee initially sought information from a variety of experts and victim-survivors with lived experience on the level of risk that this household study might pose. The strong consensus among those consulted was that it would not be safe to interview both the victim-survivor and the perpetrator of violence in a single household, given the risk the perpetrator would find out that their partner was being asked questions about experiences of IPV and the relationship.

During these initial consultations about the possible risks of a household study, there were also general concerns expressed about possible dangers to victim-survivors and to interviewers during any kind of study that included significant focus on IPV. As a result, the chair of the subcommittee, Dr Anne Summers, decided to conduct further investigation into potential safety risks and to investigate potential mitigation strategies. This entailed another round of consultations, including with commercial survey companies, academics and government representatives.

The outcome of these consultations was a determination that, while there are safety concerns, particularly concerning potential uses of monitoring and recording technology by perpetrators, with the proper protocols in place a study with detailed questions on IPV could be safely conducted.

Safety concerns in a household study

The longitudinal study was originally conceived as a household study, similar to the HILDA study, in which all members of a household, including cohabiting partners, are surveyed. This was intended to provide detailed information about the lives of both partners in a relationship, rather than relying on the second-hand reports of one partner about the life of the other. This would also have provided valuable information about how both partners view the relationship and their lives together. (It should be noted that HILDA does not ask questions about IPV.)

All those consulted, in both rounds, advised against conducting a longitudinal household study which asked both partners living in a household questions about IPV. All were concerned about victim-survivors' safety, given there could be perpetrators in the household who would become aware of the survey content when they received their own questionnaire. There could be violent retaliation by perpetrators who were angered by their partners' participation in this study.

Although the consultations focused on women's safety during the interview, people pointed out that women could remain at risk even after the interview. While there are ways to mitigate the risks during the interview, it is not possible to do so afterwards. This was another argument for keeping a woman's participation in the study confidential, and not interviewing both partners in a household.

The subcommittee also learned that the World Health Organisation (WHO) was strongly against the use of household surveys when asking about IPV, and that this advice is widely adhered to, including by the ABS, which does not conduct household surveys on IPV. Several of those interviewed mentioned that their organisation followed ethical guidelines for conducting research on domestic violence, which recommend only interviewing one person per household about IPV, because of safety concerns. These guidelines included:

- Department of Foreign Affairs and Trade (DFAT), *Ethical Considerations for Research and Evaluation on Ending Violence against Women and Girls* (2018)¹⁴¹
- World Health Organisation (WHO), *Putting Women First: Ethical and safety recommendations for research on domestic violence against women* (2001).¹⁴²

These guidelines emphasise that protecting the safety of the participants should be the paramount concern when designing a research project to collect information about IPV. This includes ensuring informed consent among all respondents, including telling respondents upfront what the survey is about and informing them that the survey is voluntary and can be stopped at any time. Those consulted strongly supported the general principles of these documents, with one person saying that if the interview or survey would make the respondent less safe, it should not be conducted.

141 Department of Foreign Affairs and Trade. (DFAT). (2018). *Ethical considerations for research and evaluation on ending violence against women and girls*, pp. 6–7.

142 World Health Organisation (WHO). (2001). *Putting women first*.

Other people noted that this is not only a safety issue but also a data integrity issue. Research in other areas of abuse has shown that people are less likely to report victimisation or perpetration of abuse when asked in a household survey.

Finally, people familiar with ethics approval processes noted that ethics reviewers are concerned about safety issues, even for a survey with questions about IPV in which only one person per household is interviewed.

Members of the lived experience groups consulted were adamant that participating in a longitudinal household survey in which both partners living in a household were individually surveyed about IPV was, as one member put it, 'a really bad idea'.

In response to the question 'How do you think this type of survey could best be conducted with someone experiencing violence by a partner?', participants' responses included:

- Online – self-complete survey using your personal mobile device/laptop/computer.
- Private face-to-face interview with an interviewer at another location. 'Definitely could not use phones, computers, iPads etc, definitely could not attend the family home. Perhaps at a hairdressing salon or library online using the interviewer's device.'
- 'Not at all with both partners answering and increasing use of tech abuse so not private even outside, so not [at] all unless you want more women and children harmed or dead.'
- 'Perpetrators frequently use technology to stalk and monitor – nothing that uses the victim's technology will be safe. Perpetrators commonly have secret audio or video recording devices in the home to assist with their stalking and monitoring. Insisting on coming into the victim's home is not safe.'
- 'It would need to be secure otherwise he would have killed me.'

Ultimately, the safety risks associated with conducting a household study were deemed too severe to justify the potential research benefits. It was not lost on the subcommittee that conducting a full investigation on violence within relationships was effectively being vetoed by the perpetrators of this violence, a quandary that has no immediate solution, but whose consequences are grave, even lethal.

Safety concerns in a non-household study

The consultation process also raised general concerns about potential risks and dangers in conducting a survey with questions about IPV even when only one person per household was interviewed.

Technological monitoring

Experts consulted by the subcommittee highlighted the growing potential for perpetrators to secretly monitor their partner's activities through recording technologies. Hidden cameras and microphones are now affordable, easy to conceal, and can record audio, video, or both. The increasing use of 'smart' technology in homes – such as smart speakers, fridges, doorbells and sunglasses – presents new risks. These devices can be controlled remotely and may record conversations or movements without the participant's knowledge.

This makes it difficult to guarantee privacy and safety during the study. In a household setting, the current advantage is with the person undertaking surveillance rather than the person trying to avoid being monitored. Further, it is difficult to guard against this risk, as options for surveillance are increasing and changing rapidly.

Researchers who collect data through online surveys raised concerns about the potential for responses to be monitored using keylogging or screen-recording software. Keylogging captures every keystroke entered on a device, while screen recording can track what appears on the screen in real time. To reduce these risks, some recommended limiting the use of open-text questions that require typing and relying instead on multiple-choice formats. Experts advise that for any kind of survey, respondents who think that they may be being monitored should use a 'safer device' – that is, one that the perpetrator does not have access to, such as at a public library, or a friend's device. One potential option is to use a 'drop and collect' service with a safer device, where an interviewer will leave their device, usually a tablet, with the respondent to complete the survey at a time and place that is safest for them and then return to collect it when it has been completed. It was advised, however, that for sensitive surveys like this, it is likely better for an interviewer to be in the room to monitor how the survey is being completed.

For online surveys that are conducted in the victim-survivor's home with their consent, some other safety measures can be put in place. For example, the subcommittee's attention was drawn to the safety protocols in the research into IPV early in the COVID-19 pandemic that was conducted by Boxall and Morgan.¹⁴³

Although there is limited evidence about how common these forms of technological surveillance are, the perceived threat is significant. There is general agreement that the risk they pose is getting greater over time as access to these technologies becomes easier. A cybersecurity expert told the subcommittee that the risk of covert monitoring and surveillance from a large-scale survey was neither trivial or negligible. Frontline service providers, such as refuges, report that they are seeing extremely high rates of technological monitoring of victim-survivors who present to their services. These include spy apps on their phones, GPS trackers in their cars, or hidden cameras and microphones among their, or their children's, belongings. The risk of covert monitoring is affecting other related issues as well, with reports that psychologists are recommending their clients experiencing IPV call in for sessions from their cars, rather than their homes. However, some believe perpetrators may be exaggerating their monitoring abilities to increase fear and feelings of helplessness among their partners. Survey and polling companies interviewed stated that they are not experiencing high rates of issues with interviews being recorded or monitored covertly.

In-person monitoring

In addition to technological surveillance, there are concerns about the possibility of in-person monitoring during an interview. If an interview is conducted remotely (for example, via phone or online), the interviewer cannot be certain that the participant

143 Boxall, & Morgan. (2021). *Intimate partner violence during the COVID-19 pandemic*.

is alone or that another person is not listening in. Participants may be forced to put a call on speakerphone or may have someone watching them during an online session and not be able to communicate this with the interviewer. While trained interviewers can listen for signs of distress or tension and respond appropriately, they cannot fully verify privacy in a remote setting.

Even in-person interviews can carry risks if conducted inside the participant's home. Other household members – including partners, children or relatives – might overhear sensitive responses and relay these to a violent partner or get angry with the respondent for disclosing experiences of violence. Experts therefore recommend confirming that the participant is alone before beginning an interview and offering a private, external location as an option if the respondent would prefer it. These alternative locations are usually libraries, parks or cafes. Some recommended that, where possible, surveys should be conducted in private, secure locations outside the home, as this avoids the risk of being recorded or overheard.

For sensitive topics, researchers are advised to use non-verbal techniques such as allowing participants to enter responses directly into an interviewer's tablet or using response cards to indicate answers. These techniques reduce the need for participants to speak about distressing experiences and help protect their privacy by reducing the chance that they are being overheard, either in-person or remotely. This is the approach used by the ABS when they are conducting the Personal Safety Survey (PSS). The survey begins with general questions about demographics that are read aloud by the interviewer, with responses recorded on their device, but once the questions turn to IPV, the interviewer encourages the respondent to read the questions from the ABS device, and answer them on that device, rather than them being read aloud.

Providing support services

Safety extends beyond the interview itself. Participants may disclose abuse for the first time during a survey, which can leave them feeling vulnerable. Researchers have a responsibility to provide appropriate support and follow-up information. This includes giving participants discreet information about counselling, legal advice or crisis services, and allowing them to choose how to receive it: verbally, in writing, sent to them via phone or email, or via a website link. For surveys about extremely sensitive content among vulnerable people, some suggested that the survey should be conducted by a trained psychologist, or with one present, but acknowledged that this would likely not be practical for a large national survey.

For participants who share particularly sensitive information that indicates they may be in imminent serious danger, some suggested that interviewers should offer a follow-up check-in, provided this can be done safely, and with consent. Escalation procedures should be clearly defined in the research protocol, ensuring that any immediate safety concerns are addressed while respecting respondents' autonomy in how they handle any imminent dangers or threats.

In a longitudinal study, where respondents develop a relationship and a rapport with the interviewer over time, this could even present an opportunity for victim-survivors to reach out to a trusted person to seek help and support.

Dangers to interviewers

The safety of interviewers conducting face-to-face research also needs to be considered. The subcommittee heard numerous reports of interviewers being threatened, harassed or even having to escape quickly from a home. These reports are not restricted to sensitive surveys, but relate to general surveys as well, although the risk is greater for interviewers who are conducting interviews with sensitive questions, particularly asking people about their perpetration of IPV.

Some polling and survey companies outlined their safety protocols for interviewers who are conducting potentially sensitive interviews. These included an emergency alert system that connects the interviewer to a central operations team; interviewers working in pairs; having a designated colleague waiting nearby; and having check-in and check-out procedures during all field visits. They also provide interviewers with training in de-escalation and detecting potential risks during an interview.

Issues in small regional and remote communities

Many of the risks identified are often greater in small, regional, and remote communities, where anonymity is difficult, or even impossible.

In very small communities, it is quickly noticed when an interviewer arrives in town. Information about what the survey is about, and that it includes questions about IPV, may spread quickly after just a small number of people in the community participate. This makes it potentially dangerous for people to participate as the topic becomes known to the community. The spreading of this information increases the likelihood that a perpetrator may find out that their partner has taken part, which could lead to retaliation. The smaller the community, the greater the risk that information will spread to all members of the community quickly.

Research teams should adapt their methods in small communities by interviewing fewer participants, avoiding adjacent dwellings, and potentially using neutral cover stories about the study's purpose. To ensure confidentiality of respondents, the DFAT guidelines recommend an interval between selected households of five to ten houses in urban areas and two to four houses in rural areas, to reduce the risk of other family members finding out about the purpose of the interview.¹⁴⁴ In some very remote locations, it may be safest to interview just one person in the community, to avoid drawing attention to participants.

It is also more challenging in small regional areas to safely and confidentially conduct a survey outside the home. While in large towns and cities, there are many safe external sites such as cafes or libraries, these may not exist, or be less private, in smaller areas.

¹⁴⁴ DFAT. (2018). *Ethical considerations for research and evaluation on ending violence against women and girls*, p. 7.

To address this issue in particularly small communities, some researchers use a neutral cover story that involves an external location to conduct the interview in, such as a mobile health clinic. This approach has been used for studying IPV in remote areas of the Pacific Islands.

Interviewers can face additional risks even in larger communities. We heard reports of warnings and photos of interviewers (taken from video doorbells) being circulated through community message boards or local social media groups. This can pose a safety risk for the interviewer, who might face hostility from people.

Conclusion

A wide range of potential safety issues were raised during the consultations. These reflect the many ways in which the threat of male violence is impacting how research about IPV can be conducted and restricting the kinds of research that can be done. This includes preventing a household study due to safety concerns for both respondents and interviewers.

However, the consensus among those consulted was that, while there are many challenges, it certainly remains possible to conduct research and surveys that include detailed questions about IPV, if the surveys are done with clear and appropriate safety protocols. Survey design needs to be adaptable to the existing challenges and the new threats that will emerge in future.

There was strong agreement that the person best placed to decide if they could safely participate in a survey with questions about IPV was the woman herself. The interviewer should make clear what the survey will involve and allow for the respondent to make an informed choice about their participation. This may also require being flexible in how the data are collected, with potentially different data collection methods being made available to best suit the situations of different respondents. Some of the necessary precautions will increase the cost of conducting the study, but this is essential to ensuring that respondents can safely participate.

Appendix 3: Review of current data sources

Longitudinal studies

There are four major national longitudinal studies in Australia that collect information on intimate relationships.¹⁴⁵ These are:

1. Household, Income and Labour Dynamics in Australia (HILDA)
2. Australian Longitudinal Study on Women's Health (ALSWH)
3. Ten to Men: The Australian Longitudinal Study on Male Health (Ten to Men)
4. Longitudinal Study of Australian Children (LSAC).

Household, Income and Labour Dynamics in Australia

HILDA is a household-panel study which began in 2001, comprising an Australia-wide sample. It involves annual interviews with all adult members for each participating household about economic and social wellbeing, along with health, labour market and family dynamics. HILDA is an internationally lauded and extremely high-quality longitudinal study that collects data on a broad range of topics.

HILDA is the longitudinal study that collects the most comprehensive data about intimate relationships. It includes questions about current relationship status, history of that relationship, recent relationship changes (for example, marriage, separation, divorce, being widowed, reuniting with spouse), and likelihood of marriage in the future.¹⁴⁶ It asks these questions about married and cohabiting relationships. Approximately every three years there is an additional module about living-apart-together relationships, meaning that there is some data about non-cohabiting partners as well.¹⁴⁷ There are questions about both overall relationship satisfaction and a six-question version of the Relationship Assessment Scale (RAS).¹⁴⁸ However, these more detailed questions about satisfaction are not asked in every wave.¹⁴⁹ There are additionally questions about the division of labour (parenting and household) between partners.¹⁵⁰ As HILDA interviews all members of a household, responses are collected from both members of a cohabiting relationship.

145 The Longitudinal Study of Indigenous Children (LSIC) is an additional longitudinal study that focuses on Indigenous children and families. LSIC is not discussed in detail in this appendix as this focuses on general population surveys. Further, the scope of the dedicated Indigenous survey has not yet been determined, meaning there cannot be an assessment of current data gaps in light of the overall research aims. A review of the suitability of existing, Indigenous-specific data collection instruments should be undertaken as part of the co-design process to develop the Indigenous survey.

146 HILDA. (2025). *Continuing person questionnaire W25M*, H1a-H21.

147 HILDA. (2023). *Continuing person questionnaire W23M*, H12-H19.

148 HILDA. (2024). *Wave 24 self-completion questionnaire*, B17a-f; S. Hendrick. (1988). A generic measure of relationship satisfaction. *Journal of Marriage and the Family*, vol. 50, pp. 93-98.

149 In the last five waves (2021-2025), these detailed satisfaction questions have only been asked in 2024.

150 HILDA. (2025). *Wave 25 self-completion questionnaire*, B20-21.

HILDA is more limited in its potential to understand violent relationships. It asks one question about the experience of physical violence, but does not ask who perpetrated the violence.¹⁵¹ Two studies by Chapman and Taylor (2022) and Dearden and Chapman (2025) use an indirect measure of domestic violence based on HILDA data.¹⁵² As HILDA does not include a direct measure of domestic violence, the researchers used a proxy measure, by tracking women who reported experiencing physical violence and later separated from a partner (making the assumption that this violence was by the partner they separated from). The studies show negative effects on income and employment for women who experience physical abuse.

Australian Longitudinal Study on Women's Health

The ALSWH commenced in 1996 and follows women across four birth cohorts (1921–26, 1946–51, 1973–78 and 1989–95).¹⁵³ Each of these birth cohorts is representative of Australian women born between those years. Participants complete surveys approximately every three years, covering a wide array of topics that are primarily focused on health outcomes.¹⁵⁴ In 2013, a new birth cohort was added, representing women born from 1989–95. For this cohort, the study was conducted annually for the first five years (from 2013 to 2017).¹⁵⁵ The study was originally set up to provide evidence for development of policy and practice in women's health and health services.¹⁵⁶

The ALSWH collects information about relationship status, relationship satisfaction, and key relationship events. The 1989–1995 cohort is asked about current relationship status, living arrangements, and level of stress with a partner/spouse in the past twelve months.¹⁵⁷ The 1973–78 cohort are also asked about whether they have experienced a relationship breakdown in the last six years, as well as their overall satisfaction with what they have achieved in the area of partner relationships.¹⁵⁸

There are much more detailed, but differing, questions about domestic violence for the different cohorts. For the 1946–51, 1973–78 and 1989–95 cohorts, in every wave

151 HILDA. (2025). *Continuing person questionnaire W25M, B27k*.

152 B. Chapman, & L. Dearden. (2025). Summary of HILDA analysis for report,

https://cdn.prod.website-files.com/629d844333cf80f4b2550705/67bd015e1f2f233359f462a8_HILDA%20Technical%20Report.pdf

B. Chapman, & M. Taylor. (2022). Socio-economic background and the incidence of partner violence: Evidence from HILDA, Australian National University, www.polis.cass.anu.edu.au/files/docs/2025/6/AAAHILDASocioJan.pdf

153 Australian Longitudinal Study on Women's Health (ALSWH). (2025). *Survey timeline and participant numbers*, www.alswh.org.au/about/the-study/survey-timeline-and-participant-numbers

154 ALSWH. (2025). *Survey timeline and participant numbers*.

155 ALSWH. (2025). *Survey timeline and participant numbers*.

156 C. Lee, A. Dobson, & W. Brown. (2005). Cohort profile: The Australian Longitudinal Study on Women's Health. *International Journal of Epidemiology*, vol. 34, pp. 987–991.

157 ALSWH. (2025). *1989–95 cohort survey 7 (aged 28–35 years)*, Q25; Q58; Q99.

158 ALSWH. (2025). *Tenth survey for women of the 1973–1978 cohort*, Q38h–Q40; Q121e.

respondents are asked ‘Have you ever been in a violent relationship with a partner/spouse?’.¹⁵⁹ There are then further, more detailed questions about experiences of partner violence for the two youngest cohorts.

For the youngest cohort (born 1989–95), information about specific experiences of DV are captured using the abbreviated Community Composite Abuse Scale (CCAS).¹⁶⁰ These questions ask whether the respondent has experienced any of approximately twenty specific behaviours by a partner in the last twelve months, prior to the last twelve months, or have never experienced them by a partner. The behaviours are categorised into four subcategories (physical abuse, sexual abuse, emotional abuse, and harassment).¹⁶¹

In the 1973–78 cohort, the CCAS is also used, being included for the first time in wave 4 of the survey (2006).¹⁶² The CCAS used in the 1973–78 cohort consists of twenty-eight items. For the 2006 survey wave, respondents were asked about how often they experienced the behaviours from their partner in the last twelve months (never, only once, several times, once a month, once a week, or daily). In some later survey waves, data are instead collected about whether the respondent has experienced the behaviours by a partner in the last twelve months, more than twelve months ago, or never.¹⁶³

Ten to Men

Launched in 2011, Ten to Men is Australia’s longitudinal study of male health, initially recruiting over 16,000 boys and men aged ten to fifty-five across three cohorts: boys (aged ten to fourteen), young men (fifteen to seventeen) and adults (eighteen to fifty-five).¹⁶⁴ The study now has a sample of 24,000 boys and men currently aged twenty to sixty-seven. Surveys are administered roughly every two to three years, collecting information on physical and mental health, social determinants, health behaviours and economic circumstances. By covering three distinct age cohorts, the study tracks how health and wellbeing evolve from childhood into older adulthood.

Ten to Men asks about current relationship status, relationship length and relationship breakdown.¹⁶⁵ It also collects data on overall relationship satisfaction.¹⁶⁶ It is the only longitudinal study that includes a question about sexual satisfaction. However, this question

159 This is not asked for waves two and three of the 1946–51 birth cohort: D. Loxton, N. Townsend, P. Forder, & J. Coombe. (2018). *Domestic violence, risk factors and health*. Australian Longitudinal Study on Women’s Health Publication, p. 6. www.alsw.org.au/wp-content/uploads/2020/03/2018_DomesticViolence_Report.pdf

160 Loxton, et al. (2018). *Domestic violence, risk factors and health*, p. 7.

161 ALSWH. (2019). *Women’s Health Australia 1989–95 cohort survey 6*, Q223–Q243.

162 Loxton, et al. (2017). *Measuring domestic violence in longitudinal research*, Australian Longitudinal Study on Women’s Health Publication.

163 This is the case for surveys from 2012 onwards.

164 AIFS. (2025). *Research sample and data collection*, www.aifs.gov.au/tentomen/study/sample

165 F. Volpe, K. Biddiscombe, M. Silbert, & S. Martin. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, Release 5.0, Australian Institute of Family Studies, variables 4471–4472.

166 Volpe, et al. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, variable 4473.

is not directly connected to a particular relationship. It is a general question about sexual satisfaction and whether the respondent has accessed support services for this, including a relationship counsellor.¹⁶⁷

Ten to Men includes questions on IPV, although this is not a major focus of the survey. It is the only national longitudinal study that asks about the perpetration of IPV. In wave 1 of the survey, there are questions on both perpetration and victimisation for physical violence, sexual abuse and emotional abuse.¹⁶⁸ In wave 4, there are questions on perpetration and victimisation of physical violence and emotional abuse.¹⁶⁹ These questions refer to lifetime prevalence (that is, whether the respondent has ever experienced or perpetrated that kind of abuse against a partner). These questions come from three items derived from the full COHSAR (Comparing Heterosexual and Same Sex Abuse in Relationships) and represent three different types of domestic violence (emotional, sexual, physical).¹⁷⁰ In wave 5, the most recent wave, questions about the perpetration and experience of economic abuse are included for the first time, and questions about the perpetration and experience of sexual abuse were reintroduced.¹⁷¹

Longitudinal Study of Australian Children

The LSAC, initiated in 2004, tracks two cohorts of children: one born in 2003–04 (the B cohort) and one in 1999–2000 (the K cohort).¹⁷² Conducted biennially, LSAC gathers data not only from children (once old enough to complete the survey), but also from their parents, carers and teachers. The study covers a broad range of domains, including parenting practices, educational experiences, health, and social development. LSAC was originally a child development study, but now, as the children have become adults, it is a life course study.

LSAC asks the young person and parent about their relationship status.¹⁷³ In previous waves, LSAC included detailed questions for the study parent about relationship satisfaction, using an adapted version of the Quality of Marriage Index (QMI) that asks eight questions about different dimensions of relationship satisfaction. LSAC used a simpler relationship satisfaction question for study children and parents more recently.¹⁷⁴

167 In wave 2 of the survey, there were specific questions about sexual satisfaction with a partner: Volpe, et al. (2025) *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, variables 1015–1017; 4467.

168 Volpe, et al. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, variables 257–263.

169 Volpe, et al. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, variables 3022–3025.

170 O'Donnell, et al. (2025). The use of intimate partner violence among Australian men.

171 Volpe, et al. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, variables 4527–4528.

172 AIFS. (2024). *Growing up in Australia: Research sample and methodology*, www.aifs.gov.au/growing-australia/study/sample

173 LSAC. (2025). *The Longitudinal Study of Australian Children wave 10 study questionnaire*, SC CASI H1; LSAC. (2022). *Wave 9C, Survey 9C2 labelled questionnaires young person & parent 1*, P CAWI A2.2.1; P CAWI A3.

174 LSAC. (2019). *Wave 8B cohort questionnaire*, P1B CASI E11.3–10; LSAC. (2025). *The Longitudinal Study of Australian Children Wave 10 study questionnaire*, SC CASI H2.

Additional questions about time spent doing domestic tasks and raising children, and the division of labour between partners on these tasks, are also included.¹⁷⁵ Initially created as a child development study, LSAC includes detailed questions about interactions between parents relating to child-rearing together (for example, disagreements over raising children, support for each other in child-rearing issues).¹⁷⁶

There are some questions about IPV in LSAC. Primarily there have been indirect questions related to experiences of IPV that have been asked of the parents of study children, about arguments that turn physical with their partner, and fear of their partner.¹⁷⁷ In wave 8 of the LSAC K cohort, as the study children have grown older, those who indicated having been in a romantic relationship were asked questions about experiences (not perpetration) of IPV, using an adapted version of the fifteen-item Composite Abuse Scale (short form).¹⁷⁸

Other studies

Relationships Australia's Relationship Indicators study was conducted in 2022 and again in 2024. It collected information about respondents' personal relationships, including friendships and family relationships as well as intimate partnerships.¹⁷⁹ The study covered a range of topics such as satisfaction and dissatisfaction within relationships, relationship pressures, loneliness, and communication. Because most respondents from the 2022 survey also participated in 2024, the study operates as a quasi-longitudinal design.¹⁸⁰ It is not a fully longitudinal study, however, as about one-third of respondents in the first survey did not take part in the second survey (in 2024).¹⁸¹

Although the Relationship Indicators study offers valuable insights, it is not well-suited to examining the key research questions of this project. The sample size restricts the ability to meaningfully analyse subgroups of interest, such as individuals who report high levels of dissatisfaction with their partners. The study also focuses primarily on relationship-related questions and collects only basic demographic information, providing little data on other potential risk or protective factors.¹⁸² In addition, because it covers a wide range of relationship types (including family and friends), it offers limited capacity to examine intimate partner relationships in depth.

175 LSAC. (2019). *Wave 8B cohort questionnaire*, P1B CAI D11.2–D12.3.

176 LSAC. (2019). *Wave 8B cohort questionnaire*, P1B CASI E11.1.1–10.

177 H. Shin, H. Rogers, & V. Law. (2015) *Domestic violence in the Longitudinal Study of Australian Children (LSAC)*, National Centre for Longitudinal Data, Research Summary, no. 2/2015.

178 LSAC. (2023). *Intimate partner violence among Australian 18–19 year olds, supplementary materials*, Growing Up in Australia Snapshot Series, issue 11, p. 1.

179 Relationships Australia. (2024). *Relationship indicators 2024*, Full Report.

180 Of the 3,140 respondents in the first survey, 2,219 (70.7%) completed the 2024 survey: Relationships Australia. (2022). *Relationship indicators 2022*, Full Report, p. 1; Relationships Australia. (2024). *Relationship Indicators 2024*, Full Report, p. 3.

181 Of the 3,004 respondents in the second survey, 73.9% had also completed the first survey: Relationships Australia. (2024). *Relationship indicators 2024*, Full Report, pp. 2–3.

182 Relationships Australia. (2024). *Relationship indicators 2024*, Full Report, p. 16.

The Australian Study of Health and Relationships (ASHR) is a cross-sectional study that is conducted approximately every ten years. There have been three waves, in 2001–02, 2012–13 and 2023–24.¹⁸³ It collects data on sexual activities, relationship status, sexual satisfaction, sexual health, attitudes to sex and relationships, and experiences of sexual coercion.¹⁸⁴ However, the study is not a longitudinal study, meaning that patterns, trajectories, causes and consequences of sexual behaviours and relationships cannot be studied using this data.¹⁸⁵

Limitations of existing studies

Annual data collection

As discussed earlier, annual data collection improves our ability to capture the fast-changing nature of relationships. Of current national longitudinal studies, only HILDA collects data annually. This has been an important factor for HILDA’s ongoing success and robustness as a national dataset. However, as HILDA does not include questions on experiences of IPV, it is not able to be used to study violence within intimate relationships.

Table 1: Collection periods for longitudinal studies

Title	Data Collection Period
ALSWH ¹⁸⁶	Data collection varies between the different cohorts. For the newest cohort, data collection was annual but is now approximately every 3 years. For other cohorts, data collection has been approximately every 3 years since inception.
Ten to Men ¹⁸⁷	Approximately every 2–3 years.
LSAC ¹⁸⁸	Every 2 years since 2004. Between wave surveys focused on particular topics were sent out in 2005, 2007, and 2009 between the regular surveys.
HILDA	Annually.

183 Australian Study of Health and Relationships. (2025). *About ASHR*, www.ashr.edu.au/about-ashr

184 J. Richters, R. de Visser, C. Rissel, & A. Grulich. (2014). *Sex in Australia 2*, Australian Study of Health and Relationships Publication, www.ashr.edu.au/wp-content/uploads/2015/06/sex_in_australia_2_summary_data.pdf

185 J. Richters, P. Badcock, J. Simpson, D. Shellard, C. Rissel, R. de Visser, A. Grulich, & A. Smith. (2014). Design and methods of the second Australian Study of Health and Relationships. *Sexual Health*, vol. 11, no. 5, pp. 383–396.

186 ALSWH. (2025). *Survey timeline and participant numbers*, www.alswh.org.au/about/the-study/survey-timeline-and-participant-numbers

187 AIFS. (2025). *About the Ten to Men Study*, www.aifs.gov.au/tentomen/study/about

188 DSS. (2025). *Growing up in Australia: The Longitudinal Study of Australian Children*, www.dss.gov.au/long-term-research/growing-australia-longitudinal-study-australian-children

Detailed relationships information

To understand what helps relationships stay strong and supportive, it is crucial to have comprehensive information about relationship dynamics and multiple dimensions of relationship satisfaction. Existing longitudinal studies focus more on relationship status and overall measures of satisfaction rather than collecting information about more disaggregated measures of satisfaction, such as relationship pressures, communication styles and effectiveness, emotional support, or sexual intimacy. These aspects are central to understanding the strength, vulnerability and evolution of relationships. Even where studies such as HILDA and LSAC include more detailed multi-item questions about relationship satisfaction, these are focused on different ways of measuring overall satisfaction (for example, whether the relationship met expectations, or if the respondent regrets the relationship) rather than measuring the different aspects of relationship satisfaction. Incorporating more disaggregated measures of relationship quality would allow researchers to identify distinct patterns and trajectories. This could include relationships that remain emotionally supportive but sexually distant, or those where communication deteriorates long before separation. These specific dynamics are not accurately observed through measures of overall satisfaction.

Most existing studies make it difficult to identify whether the partner reported in one survey wave is the same person reported in previous or subsequent waves. HILDA is the only dataset that reliably tracks partner continuity over time, and even then, this is limited to cohabiting, married or de facto partners. Other studies either collect information about separations too infrequently (for example, asking about separations in the past twelve months but surveying only every two years) or do not include questions that confirm whether the partner remains the same across waves. As a result, important relationship dynamics, such as frequent break-ups, re-partnering or having multiple partners, are not clearly captured.

Analysis of relationships and IPV together

No existing study collects comprehensive data on both relationship dynamics and IPV. Studies that provide detailed insights into relationship factors, such as HILDA and LSAC, collect less detailed information about experiences of violence (and not always about violence within relationships). In contrast, studies with more extensive data on IPV, such as the ALSWH, collect less detailed information about partners, and relationship histories, satisfaction and dynamics.

As a result, there is currently no study capable of examining the full continuum of relationships, from healthy and supportive partnerships to those marked by violence and abuse. Studying relationships without accounting for violence overlooks a critical factor that affects a high proportion of relationships. Likewise, because IPV is inherently relational, understanding its dynamics requires a deep understanding of the relationships in which it occurs.

A new longitudinal study that integrates both relationship dynamics and IPV is essential to fully capture and understand these interconnected aspects of intimate relationships.

Comprehensive measure of IPV

As existing studies are not intended to be studies solely of violence and relationships, they do not include detailed questions about the vast range of violent or abusive behaviours in relationships.

One critical gap involves the exploration of economic abuse. While some studies ask about financial control – such as restricting access to money, employment or financial resources – comprehensive questions that assess the subtle and varied forms of economic manipulation, coercion and sabotage are needed.

Similarly, the perpetration of digital abuse warrants greater attention. Although some studies ask about perpetration of harassment via telephone, email or social media, there is limited inquiry into broader forms of technology-facilitated violence, including stalking via digital tracking apps, revenge pornography, and constant digital surveillance. As technology increasingly facilitates domestic violence in new and ever-changing ways, comprehensive assessment of digital abuse perpetration is necessary for accurately understanding and mitigating IPV.

Finally, coercive control that is characterised by systematic intimidation, isolation, humiliation and control is insufficiently examined as a distinct pattern of abuse. Current questions tend to compartmentalise behaviours without assessing the sustained patterns and contexts of perpetration essential to effectively identifying coercive control. More detailed exploration into how violent and abusive behaviours operate within a broader pattern of coercive control is critical. This would involve examining the cumulative effects and intersections between different forms of abuse perpetration and recognising them as integrated strategies used to establish and maintain power and control.

Perpetrators of IPV

A key limitation of existing studies is the lack of data collected about perpetrators of IPV. As the recent DFSV Commission annual report noted:¹⁸⁹

Information on perpetrators is lacking, with limited longitudinal evidence to understand patterns of offending or engagement with the justice system.

Ten to Men is the only longitudinal study that collects data about the perpetration of IPV. This provides important information about men who perpetrate violence and abuse against a partner. A 2025 report by the Australian Institute of Family Studies (AIFS) provided data on the prevalence of perpetration and the characteristics of men who had perpetrated violence compared to men who had not, showing, for example, that perpetrators were more likely to have experienced depressive symptoms.¹⁹⁰ It also showed that men who reported using

189 Commonwealth of Australia (Domestic, Family and Sexual Violence Commission). (2025). *Yearly report to parliament*, p. 35.

190 O'Donnell, et al. (2025). The use of intimate partner violence among Australian men, pp. 11–12.

violence for the first time between 2012–13 and 2022 had lower levels of social support and were less likely to have received affection from a father or father figure.¹⁹¹

However, as perpetration of violence is not a major focus of the Ten to Men study, the perpetration questions offer a broad overview of violence, rather than granular information. It does not include sufficient detail to develop a comprehensive understanding of the drivers of perpetration. Data on physical abuse behaviours are focused on hitting, slapping and kicking behaviours. The question about economic abuse only references controlling how a partner spends money and does not capture the many forms of economic abuse.¹⁹²

Ten to Men is focused on lifetime prevalence (for example, ‘Have you ever forced a partner to have sex or made them engage in any sexual activity they did not want?’).¹⁹³ This makes it difficult to track changes over time, as an affirmative answer does not provide further information on whether the behaviour has continued, stopped, improved, worsened or otherwise changed.

In contrast, a dedicated IPV longitudinal study would centre the experiences and trajectories of perpetrators as a key priority. It would enable researchers to explore critical questions about onset, escalation, desistance and relapse – questions that cannot be answered through cross-sectional snapshots or existing datasets that are not designed for this purpose. Such a study would not only fill an important data gap but would shift the analytical focus from victim-survivors to an understanding of the people who are responsible for the violence.

Service use

Given the importance of strengthening services that support people experiencing violence, or that help perpetrators to change their behaviours, this is a critical area on which to collect comprehensive information. These services range from crisis and legal services for victim-survivors to therapeutic and behavioural interventions for perpetrators. Existing longitudinal studies do not collect sufficiently detailed data to understand how people access these services, what the barriers to access are, and how people are impacted by using the services.

LSAC asks respondents whether they have stayed in a refuge or women’s shelter in the last year, but not about accessing other IPV-related services such as men’s behaviour change programs, legal aid, police support, counselling or therapy.¹⁹⁴ ALSWH, LSAC, and Ten to Men ask questions about accessing health services generally, but not any services that are specifically related to violence or abuse in relationships.

191 O’Donnell, et al. (2025). The use of intimate partner violence among Australian men, p. 12.

192 Volpe, et al. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – data dictionary*, Release 5.0, Australian Institute of Family Studies, variable 4527. For an overview of other forms of economic abuse, see footnote 58.

193 O’Donnell, et al. (2025). The use of intimate partner violence among Australian men, p. 5.

194 LSAC. (2025). *The Longitudinal Study of Australian Children wave 10 study questionnaire*, SC CAI G2.1.6.

There are some more detailed questions about service access in cross-sectional studies. The ABS 2021–22 Personal Safety Survey (PSS) asks about access to services and about barriers to service access, including issues with reporting violence to police, whether support was sought, whether the respondent went to court, and whether a formal service (for example, a GP) was told about the violence.¹⁹⁵ The ABS advised that the next PSS will ask victim-survivors of IPV about whether the violent partner ever sought advice or support for their violent behaviour (for example, from friends, family, a GP, a specialist, legal services, domestic violence services, behaviour change programs, etc.). The ABS will also ask if the respondent thought that the advice or support helped to change the partner's behaviour. However, as the data are not longitudinal, they do not provide information about how these barriers change over time, or about the impacts of accessing these services on people's lives over time.

A longitudinal study that is purpose-built to collect regular and detailed information on service use would be uniquely positioned to provide this evidence. It would allow researchers to trace how service engagement intersects with life events, changing relationships, and patterns of violence or recovery. This would help answer critical questions about which services are most effective, when in a person's life they are most impactful, and how service engagement changes as circumstances evolve. It would also allow for analysis of the barriers that prevent individuals from accessing services in the first place, such as fear of retribution, geographic isolation, financial dependency, lack of culturally safe services, or negative past experiences with police or legal systems – and how these barriers change or are overcome over time.

Some data on service access can be collected through linked administrative data as well as through self-reporting in a survey. For example, Ten to Men and LSAC link respondents' data from Medicare, the Pharmaceutical Benefits Scheme and Centrelink.¹⁹⁶ This provides rich information on how and when these services are used by respondents who consent to data linkage. However, the availability of linked administrative data does not remove the need for a longitudinal study that collects dedicated information on service use. It only covers people who consent to linkage of their administrative data; it is confined to a limited range of services and excludes specialist IPV services and some critical general services, such as the courts or police; and it omits people who do not access any services, as well as their reasons for non-access.

Geographic representativeness

Current longitudinal studies have limited coverage of people living in remote areas. HILDA does not include people living in remote and sparsely populated areas.¹⁹⁷ LSAC is also not

195 ABS. (2023). *Personal Safety Survey 2021–22*, Questionnaire, PV_Q16A-Q16B; ABS. (2023). *Personal Safety Survey: User Guide 2021–22*, Partner violence, www.abs.gov.au/statistics/detailed-methodology-information/concepts-sources-methods/personal-safety-survey-user-guide/2021-22/partner-violence

196 AIFS. (2025). *Data linkages*, www.aifs.gov.au/growing-australia/data-users/data-linkages; AIFS. (2025). *Ten to Men: Your data*, www.aifs.gov.au/tentomen/participants/data

197 N. Watson, & M. Wooden. (2002). *HILDA Project Technical Paper Series*, no. 1/02, p. 22.

representative of people living in remote areas.¹⁹⁸ The most recent top-up sample for Ten to Men (including specific oversampling in remote areas) will assist in providing nationally representative estimates for remote areas. ALSWH oversamples for people living in remote areas.¹⁹⁹ Given the disproportionately high rates of violence in remote communities (people who live in remote or very remote areas are twenty-four times more likely to be hospitalised for family or domestic abuse than people in major cities), it is essential to ensure that a longitudinal study captures the unique experiences of people in remote areas.²⁰⁰

Modifying current longitudinal studies

A new longitudinal study dedicated to relationships is essential to address current data gaps. While modifying existing longitudinal studies to collect more detailed information on relationships will provide useful data, such changes are not sufficient to answer the critical research questions that IRINA is designed to address.

Indeed, there have already been changes to existing studies to capture more information about the violent aspect of relationships. The fifth wave of Ten to Men includes an additional question about lifetime perpetration or experience of economic abuse.²⁰¹ The eleventh wave of LSAC will include additional questions about violence in relationships. These are important additions to these studies, but they are relatively small-scale additions compared to the amount of content that would be addressed in a dedicated study on relationships.

Current longitudinal studies have existing nationally important research objectives that are distinct from the study of relationships. Over many years and iterations, these studies have been designed – including their survey length and the types of questions they ask – to collect information specifically aligned with those priorities. Incorporating the full suite of in-depth and sensitive questions about relationships and IPV would require significant modules on relationship histories, multiple forms of violence, timing, context, and service use.

As outlined in Chapter 4, there are many domains that are essential to include in order to answer the key research questions. This includes relationship status; experience of IPV, including forms of IPV, frequency, severity, patterns of violence and abuse, and the context for IPV; characteristics of the perpetrators of violence; contact with mainstream and specialist services; and targeted risk and protective factors. Collecting sufficient data across these areas would either considerably increase respondent burden or require the removal of existing content.

198 C. Soloff, D. Lawrence, & R. Johnstone. (2005). *LSAC technical paper no. 1: Sample design*, Australian Institute of Family Studies, p. 28, www.aifs.gov.au/sites/default/files/2024-10/tp1.pdf

199 ALSWH. (2013). *Technical report*, no. 36, pp. 107–108, www.alswh.org.au/wp-content/uploads/2022/03/2013-Technical-Report_36.pdf

200 AIHW. (2019). *Family, domestic and sexual violence in Australia: Continuing the national story 2019*, Cat. no. FDV 3, p. ix.

201 Volpe, et al. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health – Data dictionary*, variable 4527.

Further, most of the existing cohort studies collect data only every two to three years. This frequency means that many changes in relationships, experiences of violence, or the use of support services are not captured. Understanding the dynamics of relationships or of IPV (particularly its onset, escalation and desistance) requires more frequent data collection than these studies are designed to provide, as discussed in Chapter 6.

An additional consideration is the need to ensure that the study includes sufficiently large numbers of victim-survivors and perpetrators, as well as people in satisfying and unsatisfying relationships, to support detailed analysis, particularly for specific subgroups. Existing longitudinal studies were not originally designed with this specific objective in mind. This means that the available samples will be less well suited to producing statistically significant results about subgroups of victim-survivors and perpetrators (for example, those who have experienced certain forms of violence or abuse, who live in certain areas, or who are in certain income brackets). In contrast, a purpose-designed study such as IRINA can plan its sampling approach from the outset to maximise the likelihood that these subgroups are represented in sufficient numbers to be examined as distinct groups.

Current longitudinal studies often draw from selective or demographically narrow populations. For example, Ten to Men focuses exclusively on men, the ALSWH focuses on women born in particular birth cohorts, and LSAC on people born in certain years. Although these studies examine similar topics, such as health and wellbeing, they employ different questions and methodologies for their different populations. To develop a comprehensive understanding of modern relationships, a single, purpose-designed study that includes both men and women and uses consistent measures would make it easier to produce insights about both men and women of all ages.

Including respondents across a broad age range is important in research on IPV. Research into intimate partner homicide has found that the risk of committing homicide increases for some men in later life after retirement, due to a loss of identity and purpose contributing to behaviours that in turn increase the risk of severe violence.²⁰² In the most recent wave of Ten to Men, the oldest respondents were aged sixty-seven, which constrains the capacity to examine these potential trajectories of violence in later stages of the life course, such as post-retirement.²⁰³

Adding relationship questions to existing longitudinal studies may seem like a fast-track solution by leveraging already established cohorts and previously collected data to accelerate insights. However, this perceived advantage is likely minimal when it comes to understanding the causes, patterns and consequences of relationships and IPV. While existing studies may hold extensive prior data (for example, on employment, mental health or substance use), they were not gathered in conjunction with detailed information on violence and relationship issues. This means any insights drawn after

202 H. Boxall, L. Doherty, S. Lawler, C. Franks, & S. Bricknell. (2022). *The 'Pathways to intimate partner homicide' project: Key stages and events in male-perpetrated intimate partner homicide in Australia*, ANROWS Research Report, no. 4, Australian Institute of Criminology.

203 AIFS. (2025). *Ten to Men: The Australian Longitudinal Study on Male Health wave 5 data book*, p. 4.

introducing relationship questions will be limited to simple correlations rather than meaningful trajectories. For instance, knowing that someone experienced mental health decline over the first three waves of a survey and then reported poor communication with their partner when these questions were introduced for the first time in the fourth wave is insufficient to determine whether the communication issues preceded, coincided with or followed the mental health issues.

Using existing studies does offer a time advantage, as these studies already have existing cohorts and will not need to go through the same process of study development, testing and sample recruitment as a new study would. However, when considering the overall period these studies will be running for, it is worth having an initial delay to ensure that the survey is purpose-built for collecting critical data about relationships.

Administrative data

Administrative data provides detailed and accurate information about the people who use government services and how they interact with those systems. Over the past decade, the availability of linked administrative data, where multiple different government databases are linked together via an individual identifier, has expanded dramatically. This offers new opportunities to study topics that are covered by administrative datasets.

However, administrative data have clear limitations when it comes to studying the private aspects of people's lives that fall outside government records. Indeed, few aspects of life are as private as intimate relationships: how people's relationships function, how satisfying they are, and whether they are violent. While administrative data can shed light on certain structural aspects of relationships, it cannot replace a purpose-built longitudinal study designed to capture the complexity of intimate relationships.

Current administrative data sources

Administrative data sources can provide some basic information about relationship status. Different administrative data sources collect information on marital status. For example, the Australian Taxation Office (ATO) collects information about whether someone has a spouse or a de facto partner during the most recent financial year, and their number of dependent children.²⁰⁴ This is used to identify relationships and the family composition of individuals who file a tax return. The Department of Social Services (DSS) also manages the Data Over Multiple Individual Occurrences (DOMINO) database, which collects information on people who have accessed a DSS payment.²⁰⁵ This has been used to identify relationships

204 Australian Tax Office. (2025). *myTax 2025 Spouse details*, www.ato.gov.au/individuals-and-families/your-tax-return/instructions-to-complete-your-tax-return/mytax-instructions/2025/other-mytax-instructions-including-spouse-details-and-income-tests/spouse-details

205 K. Saxby, T. Shortridge, & K. Sobeck. (2025). *Identifying domestic violence victim-survivors and perpetrators using administrative data: International approaches and possibilities with Australian administrative data*, pp. 18–19, www.uts.edu.au/globalassets/shared-media/documents/business/dfvi/identifying-domestic-violence-victim-survivors-and-perpetrators-using-administrative-data.pdf

between people and their household family structure for individuals who are in receipt of a government income support payment.²⁰⁶

Significant work has been undertaken to develop new methods for identifying people who have experienced IPV in administrative data sources. The AIHW is working to develop a new FDSV Integrated Data system to identify victim-survivors of IPV across its existing National Health Data Hub (NHDH) linkage system.²⁰⁷ Healthcare data can be used to identify victim-survivors based on diagnostic codes for people presenting to hospital.²⁰⁸ Similarly, confirmed or suspected incidences of IPV for both victim-survivors and perpetrators are also recorded in police and courts data.²⁰⁹ There are at least two potential indicators in DSS payments data captured in the department's data: those who have accessed a crisis payment after experiencing IPV, and those who seek an exemption from mutual obligations on the basis of experiencing IPV.²¹⁰ These approaches are explored in more detail in the accompanying paper by Saxby, Shortridge and Sobeck.²¹¹

Once people have been identified as confirmed or likely victim-survivors of IPV in administrative data, other (anonymised) information about them is available to researchers through linked data assets. There are several linked data assets that have been developed in Australia. The most common data assets include the Personal Level Integrated Data Asset (PLIDA), the NHDH, the National Disability Data Asset (NDDA) and the forthcoming Criminal Justice Data Asset (CJDA). Both PLIDA and NHDH are relatively mature linked data assets managed by the ABS and AIHW respectively.²¹² The NDDA is relatively new and is managed by the Department of Health, Disability and Ageing. The CJDA is undergoing development and is managed by the ABS.

Limitations with using administrative data to study relationships

A common limitation of using administrative data is the population coverage. Administrative data only capture segments of the population that come into contact with a particular government department. For example, AIFS compared DOMINO to the Census to assess how accurately it represented relationship status and household composition of Australian families. They found that the resulting dataset had some gaps in terms of representation of

206 M. Budinski, M. Gorniak, & J. Baxter. (2025). *Constructing family households with administrative data*, AIFS Report, p. 21.

207 AIHW. 2025, *Health Services*, www.aihw.gov.au/family-domestic-and-sexual-violence/responses-and-outcomes/health-services.

208 Saxby, et al. (2025). *Identifying domestic violence victim-survivors and perpetrators using administrative data*, pp. 7–12.

209 Saxby, et al. (2025). *Identifying domestic violence victim-survivors and perpetrators using administrative data*, pp. 13–17.

210 Saxby, et al. (2025). *Identifying domestic violence victim-survivors and perpetrators using administrative data*, pp. 18–19.

211 Saxby, et al. (2025). *Identifying domestic violence victim-survivors and perpetrators using administrative data*.

212 Saxby, et al. (2025). *Identifying domestic violence victim-survivors and perpetrators using administrative data*, p. 20.

both the Australian population and family households.²¹³ In general, administrative records usually exclude informal, non-cohabiting or unregistered partnerships.

This challenge is even greater when using administrative data to identify victim-survivors. Inclusion in administrative datasets requires some formal engagement with a government service about the violence, which is uncommon. According to the PSS, among women who have experienced violence by a current partner, only 19 per cent have ever contacted police.²¹⁴ This means that more than four out of five cases of violence by a current partner go unreported (and are therefore excluded in justice administrative datasets). The rate of reporting is higher for violence by a previous partner, with 31.9 per cent of women having the police contacted about the violence, but still leaves most cases unreported.²¹⁵ These figures also apply only to physical or sexual violence. We have little data on reporting rates for other forms of abuse such as emotional or economic abuse.

Hospital data provide another limited lens. The AIHW National Hospital Morbidity Database (NHMD) recorded 4,416 women aged fifteen years and over hospitalised by a spouse or domestic partner in 2021–22.²¹⁶ This represents only 2.9 per cent of the estimated 147,600 women aged eighteen and over who experienced physical or sexual violence by an intimate partner in the previous year.²¹⁷ Similarly, only a small proportion of women report violence to any health professional. The PSS found that just 20.5 per cent of women who experienced violence by a current partner sought help from a GP or other health professional, and only some of these encounters would be recorded formally.²¹⁸

Data from Centrelink crisis payments or domestic violence–related mutual obligations exemptions similarly reflect only those who engage with these services and whose service use changes because of violence. While these datasets are valuable for understanding the circumstances of victim-survivors who are using these supports, they cannot represent the broader population of people affected by violence.

The subset of people captured in administrative data is not only smaller than the total number of individuals who experience domestic violence, but also likely to be systematically different from the wider population of victim-survivors. Those who appear in administrative records are more likely to represent those who experience the most severe forms of violence that have led to hospitalisation or police involvement. Indeed, the PSS shows that women whose partner violence was reported to police differ markedly from those whose violence

213 Budinski, M et al. (2025). *Constructing family households with administrative data*, AIFS Report.

214 ABS. (2023). *Personal Safety Survey 2021–22*, Partner violence, Table 7.1, ‘Women who experienced violence by their current partner since the age of 15(a), Police contact: Estimates and proportions’.

215 ABS. (2023). *Personal Safety Survey 2021–22*, Partner violence, Table 14.1, ‘Women who experienced violence by a previous partner since the age of 15(a), Police contact: Estimates and proportions’.

216 AIHW. (2025). *National Hospital Monitoring Database*, ‘Family and domestic violence hospitalisations, by relationship to perpetrator and age group, 2019–20 to 2023–24’.

217 ABS. (2023). *Personal Safety Survey 2021–22*, Table 2.1, ‘Persons aged 18 years and over, Experiences in the last 12 months: Estimate’.

218 ABS. (2023). *Personal Safety Survey 2021–22*, Partner violence, Table 9.1, ‘Women who experienced violence by their current partner since the age of 15(a), Support-seeking: Estimates and proportions’.

was not.²¹⁹ Analyses based solely on administrative data are therefore likely to produce biased findings about the prevalence, causes and impacts of IPV.

Even where victim-survivors can be identified within administrative data, little is known about the violence. For example, while administrative data can identify if someone has been hospitalised for violence, they do not reveal when and how the violence began, how frequent it is, or whether the violence is becoming more or less severe over time.

Administrative data offer a valuable but fundamentally incomplete view of people's lives. These systems are designed to capture structural indicators (for example, income, employment, education, household composition and use of government services), but they provide little information about how relationships function on a day-to-day basis. Major life events like marriage, separation or childbirth are often recorded because they have legal or service implications. However, the subtle, gradual and often decisive shifts that occur within relationships (such as declining satisfaction, rising stress, or changes in communication and intimacy) are invisible to these systems. Administrative data do not capture how relationships function, how couples make decisions, support each other, or express beliefs about gender and parenting. The cumulative actions and behaviours that contribute to patterns of coercive control unfold over time in ways that administrative data are not equipped to detect in isolation.

Equally important, administrative data omit many of the key risk and protective factors that shape relationship dynamics and the likelihood of violence. They do not record private behaviours that can increase risk, such as illegal substance use, gambling, or pornography consumption, nor do they capture the influence of social isolation, informal support networks, or unrecognised mental health challenges. These omissions leave large gaps in the understanding of the conditions that sustain or undermine healthy relationships.

Administrative data do not provide a window into people's subjective experience. They cannot reveal how individuals feel about their circumstances or the pressures they face. Two households with identical incomes may experience entirely different levels of financial stress, with profound implications for relationship stability and risk.

Finally, using administrative data to study Indigenous people raises potential ethical, cultural and practical concerns. Administrative datasets are typically collected, stored and controlled by government agencies, which conflicts with IDS principles that assert Indigenous people's right to govern how data about them is gathered, used and interpreted. The lack of Indigenous involvement in data governance can lead to misinterpretation or harmful consequences. Administrative data also suffer from identification issues, as some Indigenous people may choose not to disclose their identity in certain contexts due to stigma or mistrust, leading to inconsistent or inaccurate records. As a result, such data can be unreliable and culturally inappropriate for understanding Indigenous experiences, or informing policy.

219 ABS. (2017). *Personal Safety Survey 2016*, Tablebuilder.

One way to reduce some of the limitations of administrative data is to use a dual approach by linking survey responses with administrative records. This can be done by asking survey participants for consent to link their responses with the data about them held in existing administrative datasets. For example, if cross-sectional surveys such as the PSS were linked to PLIDA, this linkage would allow researchers to identify victim-survivors of violence and analyse their administrative records before and after they reported experiencing IPV (based on PSS data). This could include examining changes in employment or income following domestic violence incidents.

However, this approach still has several limitations.

First, cross-sectional surveys capture experiences of violence at a single point in time. Many respondents may have been experiencing violence long before they disclose it in the survey, which makes it difficult to identify when violence began or to establish a reliable baseline for measuring change. This limits the ability to detect early risk indicators or to track how violence progresses, for example changes in frequency, severity and type of abuse. Although surveys may include retrospective questions, these rely on memory and may be affected by inaccuracy or underreporting. Even where cross-sectional surveys are repeated several times, the people across each of these surveys change, meaning that each individual person is still observed only at a single point in time in the survey.

Second, linked datasets often lack the qualitative and contextual information that is important for understanding violence. Relationship dynamics, patterns of coercive behaviour, social support systems and cultural context all influence how violence occurs and how people respond. The changes in these factors over time cannot be understood by using a point-in-time cross-sectional study and are not captured in the linked administrative data.

Third, there are methodological issues associated with data linkage. Linkage depends on participants giving explicit consent, which can reduce participation and introduce self-selection bias. Non-consent to administrative data linkage has been shown to be non-random and based on demographic and economic characteristics, meaning that certain groups of people are less likely to consent than others, which potentially biases results based on linked administrative data.²²⁰

220 J. Sakshaug. (2021). Measuring and controlling for non-consent bias in linked survey and administrative data, in A. Chun, M. Larsen, G. Durrant, & J. Reiter (eds), *Administrative Records for Survey Methodology*, pp. 181–183.

Appendix 4: Membership and meeting dates of advisory groups

Meeting dates

	Meeting 1	Meeting 2	Meeting 3	Meeting 4	Meeting 5	Meeting 6	Meeting 7
Working Group	8 Oct 2024	22 Oct 2024	23 Jan 2025	1 May 2025	11 Jun 2025	23 Jul 2025	3 Dec 2025
Technical Group	14 Nov 2024	12 Dec 2024	13 Feb 2025	21 May 2025	2 Jul 2025	27 Aug 2025	
Indigenous Expert Group	21 Nov 2024	9 Apr 2025					
Women's Safety Subcommittee	18 Mar 2025						

Working group membership

Member	Position	Organisation
Dr Anne Summers (Chair)	Professor of Domestic and Family Violence	UTS
Professor Gawaiian Bodkin-Andrews	Director of Indigenous Research	Western Sydney University
Dr Hayley Boxall	Research Fellow, College of Arts and Social Sciences	ANU
Dr Tessa Boyd-Caine	CEO	ANROWS
Professor Bruce Chapman	Emeritus Professor, College of Business and Economics	ANU
Professor Kyllie Cripps	Director, Monash Indigenous Studies Centre	Monash University
Annabelle Daniel	CEO	Women's Community Shelters
Wynetta Dewis	CEO	Queensland Indigenous Family Violence Legal Service
Kayelle Drinkwater (from 18 July 2025)	Acting Chief Data Officer	Department of Social Services
Professor Ben Edwards	Professor of Child and Youth Development and Longitudinal Studies, College of Arts and Social Sciences	ANU
Professor Kelsey Hegarty	Joint Chair in Family Violence Prevention, University of Melbourne and Royal Women's Hospital	University of Melbourne

Member	Position	Organisation
Dr Sarah Hinde	Program Manager, Education and Crime Statistics Branch	Australian Bureau of Statistics
Associate Professor Marlene Longbottom (until 28 August 2025)	Associate Professor, Indigenous Education and Research Centre	James Cook University
Professor Deborah Loxton	Director, Centre for Women's Health Research	University of Newcastle
Angela Lynch	Executive Officer	Queensland Sexual Assault Network
Professor Ben Mathews	Research Professor, School of Law	Queensland University of Technology
Gayle Milnes	National Data Commissioner	Office of the National Data Commissioner
Mary Ann O'Loughlin	Domestic and Family Violence Senior Policy Strategist	UTS
Liz Neville	Director	Australian Institute of Family Studies
Padma Raman	Executive Director	Office for Women, Department of Prime Minister and Cabinet
Jenna Roberts	Assistant Commissioner	Domestic, Family and Sexual Violence Commission
Gemma Van Halderen (until 18 July 2025)	Chief Data Officer	Department of Social Services
Professor Maggie Walter	Emeritus Professor, Office of the School of Social Sciences	University of Tasmania
Dr Jananie William	Senior Lecturer in Actuarial Studies, Research School of Finance	ANU
Professor Mark Wooden	Emeritus Professor, Melbourne Institute of Applied Economic and Social Research	University of Melbourne
Louise York	Group Head, Community Service Group	Australian Institute of Health and Welfare

Technical group membership

Member	Position	Organisation
Mary Ann O’Loughlin (Co-chair)	Domestic and Family Violence Senior Policy Strategist	UTS
Professor Bruce Chapman (Co-chair)	Emeritus Professor, College of Business and Economics	ANU
Catherine Andersson	Research Director, Data and Lifecourse Studies	Australian Institute of Family Studies
Dr Hayley Boxall	Research Fellow, College of Arts and Social Sciences	ANU
Professor Kyllie Cripps	Director, Monash Indigenous Studies Centre	Monash University
Professor Ben Edwards	Professor of Child and Youth Development and Longitudinal Studies, College of Arts and Social Sciences	ANU
Nicholas Egan	Senior Statistician, Centre for Women’s Health Research	University of Newcastle
Professor Kelsey Hegarty	Joint Chair in Family Violence Prevention at University of Melbourne and Royal Women’s Hospital	University of Melbourne
Julie Lee (from 19 November 2025)	Acting Branch Manager, Data Governance and Use	Department of Social Services
Professor Ben Mathews	Research Professor, School of Law	Queensland University of Technology
William Milne	Director, Crime and Justice Statistics	Australian Bureau of Statistics
Anthea Saflekos	Assistant Director, Crime and Justice Statistics	Australian Bureau of Statistics
Sharon Stuart (until 19 Nov 2025)	Branch Manager, Data Governance and Use	Department of Social Services
Natalie Townsend	Research Executive Manager for the Australian Longitudinal Study on Women’s Health, Centre for Women’s Health Research	University of Newcastle
Professor Maggie Walter	Emeritus Professor, Office of the School of Social Sciences	University of Tasmania
Professor Mark Wooden	Emeritus Professor, Melbourne Institute of Applied Economic and Social Research	University of Melbourne

Indigenous expert group membership

Member	Position	Organisation
Professor Maggie Walter (Co-chair)	Emeritus Professor, Office of the School of Social Sciences	University of Tasmania
Professor Kyllie Cripps (Co-chair)	Director, Monash Indigenous Studies Centre	Monash University
Professor Gawaian Bodkin-Andrews	Director of Indigenous Research	Western Sydney University
Wynetta Dewis	CEO	Queensland Indigenous Family Violence Legal Service
Associate Professor Marlene Longbottom	Associate Professor, Indigenous Education and Research Centre	James Cook University
Jenna Roberts	Assistant Commissioner	Domestic, Family and Sexual Violence Commission

Women's Safety Subcommittee membership

Member	Position	Organisation
Dr Anne Summers (Chair)	Professor of Domestic and Family Violence	UTS
Annabelle Daniel	CEO	Women's Community Shelters
Professor Kelsey Hegarty	Joint Chair in Family Violence Prevention at University of Melbourne and Royal Women's Hospital	University of Melbourne
Angela Lynch	Executive Officer	Queensland Sexual Assault Network
Anthea Saflekos	Assistant Director, Crime and Justice Statistics	Australian Bureau of Statistics

List of experts consulted

Round 1 Consultations

Member	Position	Organisation
Karen Bentley	CEO	WESNET
Sarah Biordi	Technology Safety Specialist	WESNET
Lauren Callaway	Assistant Commissioner, Family Violence Command	Victoria Police
Professor Kyllie Cripps	Director, Indigenous Studies Centre	Monash University
Dr Claudia García-Moreno	Head, Department of Sexual and Reproductive Health and Research	World Health Organisation
Julie Inman Grant	eSafety Commissioner	eSafety Commission
Dr Diarmaid Harkin	Associate Professor, Criminology	Deakin University
Dr Marlene Longbottom	Associate Professor, Indigenous Education and Research Centre	James Cook University
William Milne	Director, National Centre for Crime and Justice Statistics	Australian Bureau of Statistics
Sian Milton-McGurk	Assistant Director, National Centre for Crime and Justice Statistics	Australian Bureau of Statistics
Anthea Saflekos	Assistant Director, National Centre for Crime and Justice Statistics	Australian Bureau of Statistics
Professor Michael Salter	Professor, School of Social Sciences	University of NSW
Dr Chelsea Tobin	CEO	Safe Steps
NSW Coercive Control Reference Group	Lived Experience Advisory Group	
The WEAVERS	Lived Experience Advisory Group	

List of experts consulted

Round 2 Consultations

Member	Position	Organisation
Kim Chandler McDonald	CEO and Co-Founder	3 Steps Data
Michael McDonald	Co-Founder	3 Steps Data
Dr Kristin Diemer	Head of Research	ANROWS
Laura Doherty	Senior Research Analyst	Australian Institute of Criminology
Professor Heather Douglas	Professor	University of Melbourne
Chris Dowling	Research Manager	Australian Institute of Criminology
Julie Edwards	CEO	Jesuit Social Services
Josephine Foti	CEO	Wallis Social Research
Nikki Honey	Executive Director, Research and Insights	Social Research Centre
Dorina Kalkum	Research Director, LSAC	Roy Morgan
Ros Lording	Senior Account Director	Wallis Social Research
Georgia Naldrett	Manager, Stop It Now!	Jesuit Social Services
Catherine Plunkett	Director, SafetyNet	WESNET
Matt Tyler	Executive Director, The Men's Project	Jesuit Social Services

Appendix 5: Abbreviations and acronyms

ABS	Australian Bureau of Statistics
ACCO	Aboriginal Community-Controlled Organisation
AIFS	Australian Institute of Family Studies
AIHW	Australian Institute of Health and Welfare
ALSWH	Australian Longitudinal Study on Women's Health
ANROWS	Australian National Research Organisation for Women's Safety
APPs	Australian Privacy Principles
ATO	Australian Taxation Office
CAPI	computer-assisted personal interview
CASI	computer-assisted self-interview
CCAS	Community Composite Abuse Scale
CJDA	Criminal Justice Data Asset
COHSAR	Comparing Heterosexual and Same Sex Abuse in Relationships
DFAT	Department of Foreign Affairs and Trade
DFSV	domestic, family and sexual violence
DFV	domestic and family violence
DOMINO	Data Over Multiple Individual Occurrences
DSS	Department of Social Services
DV	domestic violence
FaCtS	Family and Community Safety
GP	general practitioner
HILDA	Household, Income and Labour Dynamics in Australia
HREC	Human Research Ethics Committee
IDS	Indigenous Data Sovereignty
IPV	intimate partner violence
IRINA	Intimate Relationships in Australia
LAT	living-apart-together
LSAC	Longitudinal Study of Australian Children
LSIC	Longitudinal Study of Indigenous Children
NHDH	National Health Data Hub

NHMD	National Hospital Morbidity Database
NDDA	National Disability Data Asset
PIA	privacy impact assessment
PLIDA	Personal Level Integrated Data Asset
PSS	Personal Safety Survey
QMI	Quality of Marriage Index
RAO	Research Administration Officers
RAS	Relationship Assessment Scale
WHO	World Health Organization