

COERCIVE CONTROL

Coercive control is a pattern of behaviours, aimed at making the victim survivor subordinate, diminishing the victim survivor's sense of agency, autonomy, sense of self and self-worth. It invokes fear and can result in the victim survivor feeling trapped or unable to escape a relationship. Statistically coercive control is perpetrated by men against women.

Physical violence does not need to be present for a relationship to be violent or abusive. Behaviours that are controlling, and that comprise of non-physical and physical tactics in order for the person using violence to dominate and control many aspects of the victim's life, constitute coercive control. This can include isolating a person, so they are no longer connected to any support networks, intimidating, and disempowering them, humiliating, degrading, and monitoring or stalking them.

This coercive and controlling behaviour is designed to make the victim survivor dependent on the person using violence, by depriving them of their independence and regulating their behaviour.

Coercive controlling behaviours create invisible chains and a sense of fear that impacts every aspect of a victim survivors' life.

(Reference Otter C and Bosanko M, Parliament of Victoria Research Paper, What is Coercive Control, March 2022.)

- Coercive control can be difficult to identify because it does not always involve physical violence.
- Often victim survivors may not recognise they are in an unhealthy or abusive relationship because there is no physical violence.
- Coercive control deprives victim survivors experiencing it of a means for independence, it isolates them from their resources, and removes their capacity for growth and personal gain.
- A person who uses violence often begins the relationship by trying to gain power and control in subtle ways, which can escalate over time.
- Research undertaken by (Monkton Smith 2019) has shown that coercive controlling behaviours are associated with intimate partner homicides. Coercive control may place a victim survivor at higher risk of intimate partner homicide.
- It is important for professionals working with victim survivors and/or people who use violence to listen closely to unique experiences and to identify warning signs early.

HUMILIATING

Bullying the victim survivor in public and private.

CONTROLLING

The victim survivor's access to finances, what they can/cannot wear, how they have their hair, controlling their food intake, where they go and with whom.

ERODING

The victim survivors' sense of self-efficacy, choice, and voice, causing a sense of disempowerment.

THREATS

To kill or physically harm the victim survivor, children, family members, children or pets is another tactic used to have power and control in the relationship. Also threatening to commit suicide allows the person using violence to maintain their sense of control.

SEXUAL COERCION

Involves manipulating or forcing the victim survivor to engage in unwanted or non-consensual sexual activity, by using threats, lies, guilt trips, control, and power.

JEALOUSY/ OBSESSION

In relation to the victim survivor can create elevated risk, if the person using violence believes that their partner or ex-partner is having an affair, or spending time with other men or people he has not allowed her to spend time with.

MONITORING

All communication either in person or via technology, such as phone calls, social media, text messages and emails.

GASLIGHTING

Forcing the victim survivor to question their ability to make decisions, inciting a sense of confusion in the victim survivor and leaving them questioning their memory of events. This can also include telling lies about the victim survivor to police, child protection etc.

ISOLATING

The victim survivor either geographically or by interfering in their relationships with their family, friends, and support networks.

SUBSTANCE USE COERCION

Refers to coercive tactics that target a victims survivors use of substances, forcing a victim survivor to use substances, sexually exploiting their partner to obtain substances as a broader pattern of abuse and control.

REPRODUCTIVE COERCION

Sees the person using violence pressuring or manipulating the victim survivor into becoming pregnant or terminating a pregnancy.

MENTAL HEALTH COERCION

A victim survivor's experience of mental health can be used to gain power and instill fear. This may look like withholding medications, sabotaging treatment and to gaslight the victim survivor.

As an AOD/MH professional if you identify that your client is a victim survivor of coercive control, or you are engaged with a person using violence, you can respond to risk, and help to create safety by following the MARAM (Multi-Agency Risk Assessment and Management) Framework.

The Framework includes tools and resources to support AOD/MH professionals in identifying, assessing the level of risk, and safety planning with the victim survivor. You can also seek advice from your regional Specialist AOD/MH Family Violence Advisors.

Referral Pathways

Safe Steps 1800 015 188

Men's Referral Service 1300 766 491

The Orange Door [orangedoor.vic.gov.au](https://www.orangedoor.vic.gov.au)

1800 RESPECT 1800 737 732

Rainbow Door (LGBTIQA+) 1800 729 367

In Touch (CALD) 1800 755 988

Seniors Rights 1300 368 821

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SCHS
Sunraysia Community
Health Services

Scan the QR code to access your regional Specialist AOD/MH Family Violence Advisor if you have any questions, or visit: <https://bitly.ws/32L2t>

