

# Policy Statement 2.12 - Abuse and Violence Victims and Dentistry

## Position Summary

Dental Practitioners should attempt to provide a safe and compassionate environment for patients in their role in the detection, intervention and provision of advice to those suffering the consequences of abuse and violence and must be aware of the mandatory requirements with respect to family violence.

## 1. Background

- 1.1. Violence is one of Australia's largest social, legal and health issues and is widespread across all cultures, ages and socio-economic groups in Australia.
- 1.2. The Australian Bureau of Statistics' (ABS) 2016 Personal Safety Survey reports that:
  - women were nearly three times more likely to have experienced partner violence than men, with approximately one in six women (17% or 1.6 million) and one in sixteen men (6.1% or 547,600) having experienced partner violence since the age of 15;
  - one in six women (16% or 1.5 million) and one in seventeen men (5.9% or 528,800) experienced physical violence by a partner; and
  - women were eight times more likely to experience sexual violence by a partner than men (5.1% or 480,200 women compared to 0.6% or 53,000 men).
- 1.3. Crimes Statistics Australia state that while decreasing since 2011/2, victims of physical assault in 2016/7 were 2,429 per 100,000 for males and 2,325 per 100,000 for females.
- 1.4. The most recent national figures from the Australian Institute of Health and Welfare (AIHW) indicate that during 2015-16, there were 225,487 Australian children suspected of being harmed or at risk of harm from abuse and/or neglect. This resulted in 355,925 notifications being issued by State and Territory authorities (a rate of 42.0 notifications per 1,000 Australian children). The total number of notifications represents an increase of 11.2% from the 320,169 reports made in the previous year.
- 1.5. The Royal Children's Hospital Melbourne's Australian Child Health poll rated family and domestic violence seventh among child health problems in 2015.
- 1.6. States and territories have mandated that evidence of child abuse must be reported to the relevant authorities.
- 1.7. Elder abuse is an issue both at home and within aged care facilities.
- 1.8. The victims of violence are not alone in needing assistance and support. All family members and carers can be affected by violence.
- 1.9. Patients may present to dental clinics for treatment of, or with signs of, the results of violence perpetrated to them.
- 1.10. Patients may present to dental clinics accompanied by the abuser who may attempt to maintain intimidation and control.
- 1.11. Clinical signs of violence include:
  - extra and intra oral bruising and lacerations, torn frenum;
  - hard and soft palate bruising caused by implements of penetration (may indicate sexual acts);
  - patterned bruising on the neck from attempted strangulation such as thumb marks, ligature marks, scratching or petechiae bruising to the face, mouth or neck from attempted strangulation;

*This Policy Statement is linked to other Policy Statements: 2.2.5 Prevention and Management of Oral Injuries, 2.3.1 Delivery of Oral Health Care Special Groups Children, 2.3.3 Oral Health Care Special Groups Aged Persons & 2.3.8 Oral Health Care Special Groups Infants and Pre-School Children*

- fractured, non-vital or abscessed teeth caused by trauma;
- fractured facial bones or signs of healing bones on radiographs;
- bitemarks and burns;
- bruising and lacerations to the head, black eyes and hair loss from pulling;
- excessive anxiety and nervousness;
- oral aversion;
- other injuries to the body such as injuries to the arms and legs; and
- dental neglect which may be due to the abuser preventing the victim having regular dental and medical care.

1.12. There are several well-established agencies including 1800RESPECT (1800 737 732) to provide support and assistance to those suffering from the effects of violence.

## Definitions

- 1.13. DOMESTIC VIOLENCE<sup>1</sup> is violent, threatening or other behaviour by a person that coerces or controls a member of the person's family, or causes the family member to be fearful.
- 1.14. ELDER ABUSE is a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person. Elder abuse can take various forms such as physical, psychological or emotional, sexual and financial abuse.
- 1.15. VIOLENCE<sup>2</sup> is the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, which either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation.
- 1.16. CHILD ABUSE<sup>3</sup> is all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

## 2. Position

- 2.1. Abuse and violent behaviour is unacceptable in all circumstances.
- 2.2. Dental Practitioners should play a role in the detection, intervention and provision of advice to those suffering the consequences of abuse and violence.
- 2.3. Dental Practitioners must be aware of state and territory laws with respect to the reporting requirements of family and domestic abuse and violence.
- 2.4. Dental Practitioners should attempt to provide a safe and compassionate environment for patients to discuss issues of abuse and violence with them, and have appropriate referral pathways in place to assist patients affected by abuse and violence.

### Policy Statement 2.12

Adopted by ADA Federal Council, November 22, 2019

<sup>1</sup> Family Law Act 1975 (Cth)

<sup>2</sup> WHO definition

<sup>3</sup> WHO definition