

Thanks, Sue.

I wanted to take a minute or two to explain HOW and WHY Brain Injury Australia came at making the link between family violence and brain injury.

(There are over 700,000 Australians with a brain injury. They're probably THE most disparate and diverse of ANY DISABILITY TYPE. Brain Injury Australia represents EVERYONE from the "shaken baby" to the "young stroke" to the 85-year-old who falls off a stepladder while changing a light bulb, and all points in between.)

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FIRSTLY, since 2009 Brain Injury Australia has been engaged in public education and policy work for the Australian Government on the leading cause of death and disability in children who have been abused - inflicted traumatic brain injury, sometimes called "shaken baby syndrome". Over just the last EIGHT years, 25 children have been admitted to The Children's Hospital at Westmead, ALONE, with inflicted brain injury. And their numbers are increasing. Their average age was 13 months. And international survey evidence suggests that for every child HOSPITALISED, another 150 may be shaken or hit by their caregivers, sustaining brain damage that goes undetected.

SECONDLY, 2017's national Brain Injury Awareness Week was dedicated to traumatic brain injury in the military, referred to as the – QUOTE - "signature injury" of the wars in Iraq and Afghanistan, often the result of improvised explosive devices. Over 300,000 United States Armed Forces veterans - and 1 in every 10 Australian Defence Force personnel - have sustained a brain injury from service in the Middle East.

THIRDLY, in partnership with Sports Medicine Australia, Brain Injury Australia campaigns for public awareness about concussion - specifically the emerging evidence of an association between repeat concussions and cognitive disability, including the progressive degenerative neurological disease known as chronic traumatic encephalopathy, or "CTE".

On the face of it, these three pieces of work don't appear to obviously...TRIANGULATE brain injuries in women the result of family violence. Where they line up, though - like the stories of the two women you are about to meet – is that HOSPITALISATIONS for brain injuries the result of family violence are bound to be the tip of a very large iceberg. A survey conducted last year of 100 clients of five domestic violence shelters in the United States found 9 in every 10 reported being hit in the head by their abuser and losing consciousness as a result. And, of those, again 9 IN EVERY 10 reported QUOTE "too many head injuries to quantify". Yet, only 1 in every 5 ever sought medical attention.

Apart from the potential CUMULATIVE effects of repeated damage to their brain, victims of SERIAL family violence have next-to-nothing in common with the chronically concussed sportsperson, for example. Nowadays, BEST PRACTICE return to SPORT only takes place after all the symptoms of a concussion have resolved. Victims of family violence seldom have the luxury of choosing when to return...HOME.

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None of this IS, SHOULD BE, news. It's as old, at least, as the "battered woman syndrome" legal defence in circumstances where she kills a serially abusive partner. Neither should it come as a SURPRISE, as soon as you consider how instinctive it is – whether in a boxing ring, a pub or a

playground – how instinctive it is to “go for the head” in pursuit of violent advantage.

(Brain Injury Australia’s message is ultimately and everywhere the same; that while all the modish buzz is around the brain's PLASTICITY – around NEUROplasticity - there needs to be equal appreciation of the brain’s almost ...CERAMIC fragility. And that, OFTEN, it cannot be...put together again.)

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What IS new, is NEWS, is that the Victorian Government - in response to a recommendation of its Royal Commission into Family Violence – is funding Australia’s first prevalence study into the rates of brain injury among BOTH victims AND perpetrators of family violence. Brain Injury Australia leads a research consortium comprising Monash University, Domestic Violence Victoria, No To Violence and the Centre for Excellence in Child and Family Welfare, and will report to the Victorian Government by year’s end.

Some of the early findings from research include: HALF of all Victorians admitted to hospital over the last 10 years with major trauma the result of family violence had sustained a SEVERE traumatic brain injury as a result; and while serious trauma admissions for OTHER kinds of violence have declined significantly over the same period, hospitalisations for FAMILY VIOLENCE-related trauma remain unchanged.

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As important as this research is, it can’t just be a numbers game. It can’t just count victims, yet offer them nothing in the way of services and

supports with PURCHASE on the injury to their brain – services and supports EQUIVALENT, at least, to those available to concussion from sport or brain injury from military service. Brain Injury Australia is already peering over the horizon of the current research for any prospects of funding trials for such services and supports. And I would certainly welcome ANY HELP FROM ANYBODY IN THIS ROOM in prosecuting the case – with governments, PLURAL – for making that funding available. Please do not hesitate to contact me.

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Now, it's an honour to introduce two women who've privileged me - and now YOU - by sharing their experience of violence and recovery. Would you please welcome Rebecca Gentz and Rosanna Robertson...