FACT SHEET:
YOUNG PEOPLE LIVING WITH DOMESTIC AND FAMILY VIOLENCE (DFV)

WHO ARE WE AND WHAT DO WE DO?

Since 1997 Community Connections has partnered with schools in north east Brisbane. We walk alongside young people aged 12 to 18 who are doing it tough—whether at risk of homelessness, recently disconnected from family, or struggling to stay engaged with school and community.

We are a Child Safe Organisation.

We can:

- Hold peer support groups
- Outreach to young people's schools, homes and/or communities
- Mentor independent living skills
- Provide information, support and referrals regarding Centrelink, housing providers, legal information etc.
- Offer family mediation and support
- Build capacity of schools for early identification of youth homelessness risk factors

Please note: we do not provide accomodation.

DFV AND SCHOOL

DFV is a child safety and wellbeing issue. Young people can be harmed by direct abuse, coercive control, threats, fear, instability or being used in adult conflict.

School can be a protective place. Predictable routines, trusted adults and confidential support can help young people stay connected to education and support.

Q. WHAT MIGHT SCHOOLS NOTICE IF A YOUNG PERSON IS LIVING WITH DFV?

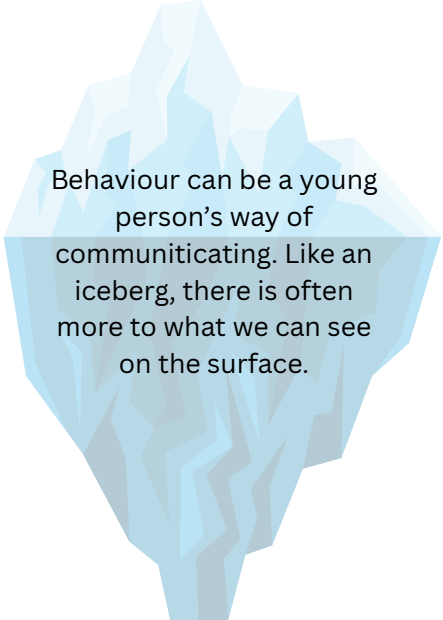
Young people impacted by DFV don't always present the same way. Possible signs are:

Attendance and learning challenges: Absences, lateness, school refusal, falling behind, incomplete work or missed assessments, fatigue, gaps in or frequent enrollment changes, sleeping in class, limited access to devices, and difficulty concentrating or completing work.

Behaviour and regulation: Hypervigilence, shutdown, withdrawal, irritability, conflict, impulsive or confrontational responses, leaving class, freezing, people-pleasing, sensitivity to loud noise or sudden movements, and disengagement or sleeping in class.

Relationships and safety: Difficulty trusting others, social isolation, conflict with peers, declining the sharing information or withdrawing information, protective of siblings or a parent/carer, taking on a caring role, fear or anxiety of calls home or going home after school.

Material and wellbeing needs: Unkept or incorrect uniforms, lack of food, poor sleep, low mood, device access limited, poor mental, emotional and physical health.



Behaviour can be a young person's way of communiticating. Like an iceberg, there is often more to what we can see on the surface.

Q. WHAT DO YOUNG PEOPLE LIVING WITH DFV TELL US ABOUT BARRIERS TO GETTING SUPPORT?

In our work, young people describe four barriers that can make support hard to access and disclosure feel unsafe. These include;

Parent Permission: permission for referrals may be accepted when the young person is framed as the 'problem', but withdrawn when the family context is explored. Waiting for parent consent can make support inaccessible & entrench problems. Assessing the young person's capacity to consent to receiving external support at school (e.g. Gillick Competence) can aid early intervention. Harm minimisation requires access to safe & reliable information to inform safety plans.

Not being believed or being shamed: accepting a parent's explanation over the young person's, or publicly correcting lateness, uniforms, fatigue or disengagement, can increase shame and shut down help-seeking.

Loss of control: young people may fear reports, calls home or information shared between adults. If previous intervention increased risk or did not help, uncertainty can reduce openness. Young people may share 'snippets' of information to test trust.

Monitoring and surveillance: location tracking, parental controls, monitored phones or removed devices can make private contact with external supports unsafe. Confidential pathways during school hours may be the safest way to access support

Timely, relationship-based support helps protect school as a safe, trusted place for young people. A place to feel "normal", connected, and keeps support pathways open.

Q. WHAT DO YOUNG PEOPLE LIVING WITH DFV TELL US IS HELPFUL?

Relationships are often the pathway into safety, school connection and future opportunities.

Young people are more likely to seek help when adults are calm, consistent, non-judgemental and clear about what they can and cannot do. Helpful responses you can give are:

Believe and validate: Respond calmly, believe their experience of the situation, and reassure them they are not in trouble. E.g. "I'm glad you're here and I believe you". Remind them they are not alone - 1 in 4 young people experience DFV in Australia.

Use a strengths-based lens: look for courage, care of siblings & self, persistence, regulation strategies & connection to school.

Ask & Do only what is needed: avoid "investigating", asking for proof or making the student retell their story. Avoid advice giving. The young person understands the situation best & what they can and cannot do.

Notice effort: arriving late, sitting in class, using a time-out card or accessing a breakout space may show commitment and survival skills.

Provide flexibility: safe communication pathways, check-ins, predictable routines, flexible deadlines/timetables, uniform/food support, safe spaces and transport planning.

Be transparent: Explain confidentiality and provide choice for disclosure, e.g. "Before we keep talking, I want to explain what I can keep private and what I may need to share to help keep you safe."

It's helpful for everyone to remember: The person is not the problem, the problem is the problem

Community Connections
CASEWORK | COUNSELLING | GROUP FACILITATION

40 Station Street, Nundah 4012
07 3266 5199
www.communityliving.org.au