



Intimate Partner Violence

An avoidable burden on the health of women and their children



Intimate partner violence is common.



1 in 4 Australian women have experienced physical or sexual violence by an intimate partner since age 15.¹



1 in 3 Australian women have experienced physical or sexual violence and/or emotional abuse by an intimate partner since age 15.²



This includes violence or abuse by a partner they currently or have previously lived with, as well as violence perpetrated by a non-cohabiting partner.

¹ Cox, P. (2015). Violence against women in Australia: Additional analysis of the Australian Bureau of Statistics' Personal Safety Survey, 2012. Sydney: ANROWS.

² Australian Bureau of Statistics, Personal Safety Survey, Customised Report, 2016. Does not include emotional violence in non-cohabiting relationships since this data is not available.

It has **serious** impacts on women's health.³



This includes injuries and homicide, poor mental health, reproductive health problems and problems with alcohol and drug use.

³ Lum On, M., Ayre, J., Webster, K., & Moon, L. (2016). Examination of the health outcomes of intimate partner violence against women: State of knowledge paper. Sydney: ANROWS.



Partner physical and sexual violence and emotional abuse in cohabiting and non-cohabiting relationships

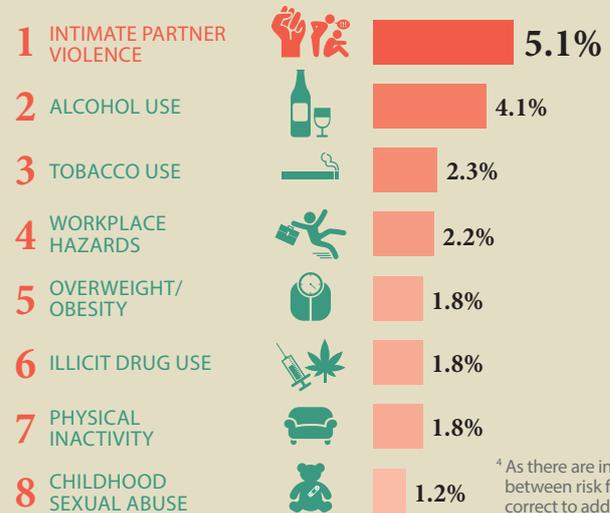
It contributes an estimated **5.1%** of the burden in women aged 18-44 years.

This is more than any other risk factor.



Among all women it contributes an estimated 2.2% to the burden and is the seventh largest risk factor.

Top 8 risk factors contributing to disease burden in Australian women aged 18-44 years⁴ (% estimate)



⁴ As there are interactions between risk factors, it is not correct to add them together.

Intimate partner violence has other negative consequences.



It violates the human rights of women and their children.



Affects access to housing and employment and increases gender inequality.



Is costly to women and the economy.



Impairs children's health and development now and in future generations.



Increases social and economic inequalities.

Intimate partner violence is preventable.

Preventing it should be a high priority for preventing poor health among Australian women.

The best way to reduce the health burden is to stop violence occurring in the first place.



Many factors contribute to intimate partner violence and we all have a part to play in addressing them. All sectors of society need to work together to create an environment in which women and their children are valued, respected and can live free from violence.

Primary prevention – stopping violence before it starts by tackling root causes

Early intervention with individuals and groups at high risk of perpetrating violence

Response – preventing recurring violence

Supporting recovery

Preventing health consequences

Minimising health consequences

Commonwealth, state and territory governments have developed policies, plans and conducted commissions and inquires to identify the actions to achieve this. A coordinated national approach is also supported through:

The National Plan to Reduce Violence Against Women and Their Children 2010-2022. A plan of all Australian governments to support and coordinate prevention and early detection of violence as well as responses to it.

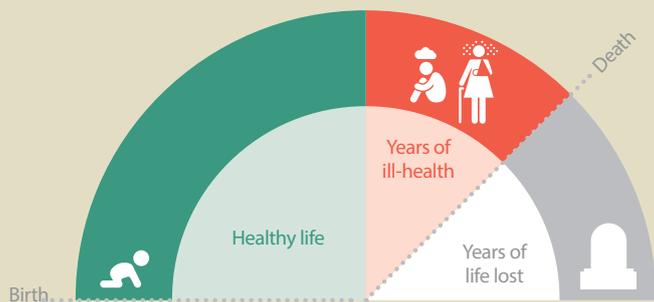
Change the Story. A Shared Framework for the Primary Prevention of Violence Against Women and Their Children in Australia, focusing on preventing violence from occurring in the first place.



The Burden of Disease

of intimate partner violence in more detail

Estimating the overall disease burden among Australian women



The estimated impact of 200 diseases among women across Australia are measured by:



Years of ill-health that women live with as a result of suffering those diseases; and



The numbers of years lost among women who die earlier than they would have if they had not suffered from those diseases.

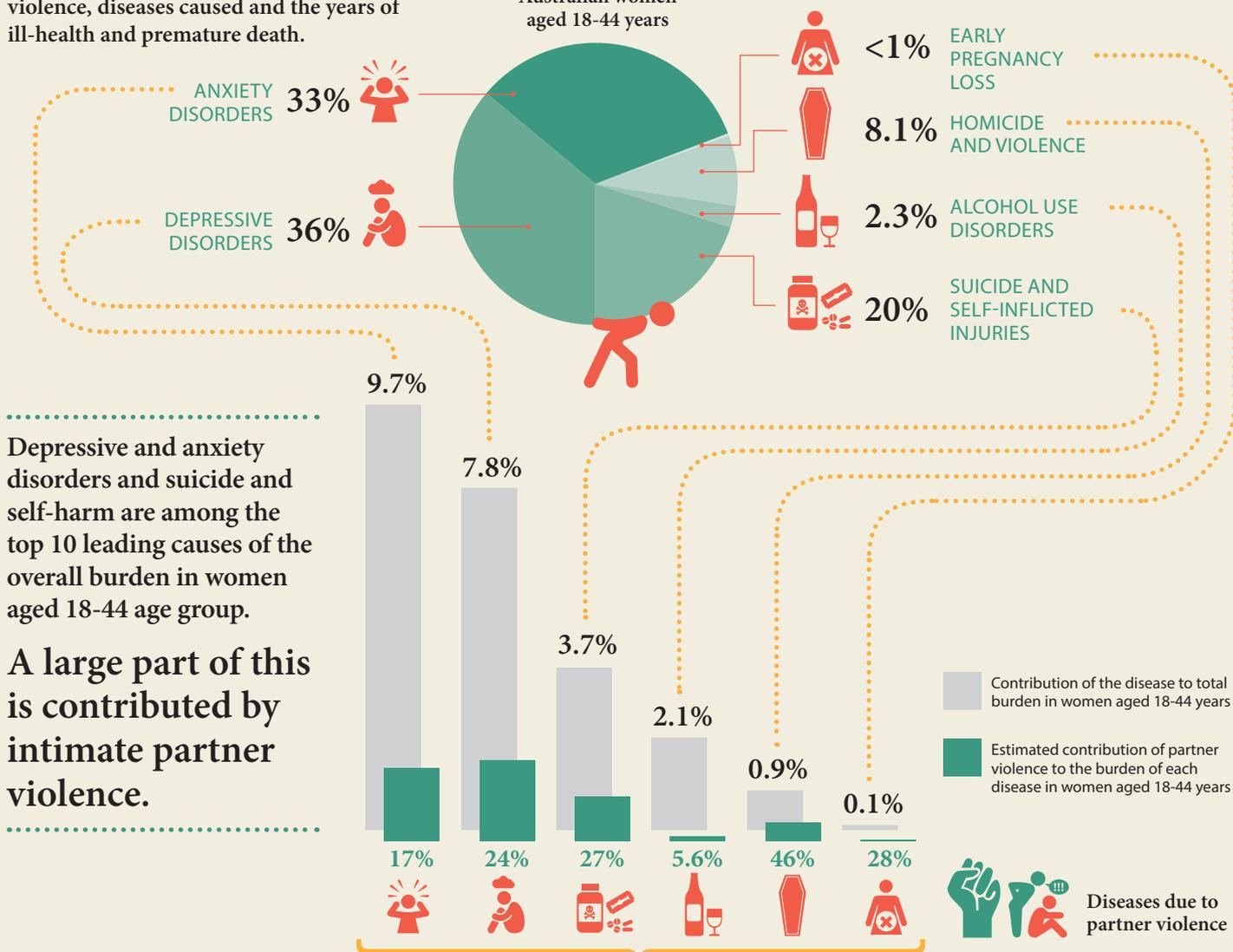


Together these are called the "total disease burden".

Estimating the disease burden of intimate partner violence

This takes into account the prevalence of violence, diseases caused and the years of ill-health and premature death.

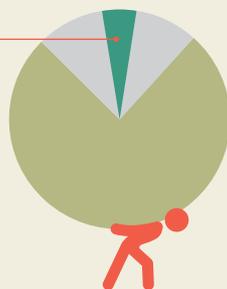
Australian women aged 18-44 years



Total disease burden women aged 18-44 years

ESTIMATED CONTRIBUTION OF INTIMATE PARTNER VIOLENCE

5.1%



Reducing intimate partner violence will help to reduce the burden of disease among Australian women.

The contribution of intimate partner violence to the gap between Indigenous and non-Indigenous women

Intimate partner violence is common.



An estimated **3 in 5** Indigenous women have experienced physical or sexual violence by an intimate partner since age 15.¹



This includes violence or abuse by a partner they currently or have previously lived with, as well as violence perpetrated by a non-cohabiting partner.

¹ Includes physical and sexual violence only. Data on emotional abuse is not available for Indigenous women.

It contributes an estimated 10.9% to disease burden in Indigenous women aged 18-44 years. This is more than any other risk factor.

Top 8 risk factors contributing to disease burden²



Among all Indigenous women it contributes 6.4% to the burden and is the third largest risk factor.

² As there are interactions between risk factors, it is not correct to add them together. * A risk factor for diabetes and other chronic diseases.

There is a gap in the burden between Indigenous and non-Indigenous women.

Among Indigenous women aged 18-44 years rates of burden:



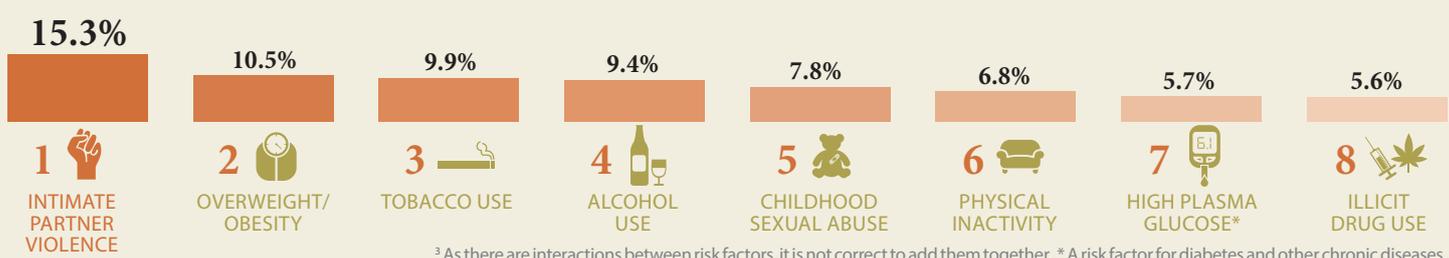
Estimated rates of burden for each disease due to intimate partner violence are higher among Indigenous women aged 18-44 years than non-Indigenous women of the same age.



Intimate partner violence contributes more than any other risk factor to the gap between Indigenous and non-Indigenous women aged 18-44 years.

Estimated contribution made by the top 8 risk factors to the gap in rate of total burden of disease between Indigenous and non-Indigenous women³

It is the sixth largest contributor to the gap among women of all ages.



³ As there are interactions between risk factors, it is not correct to add them together. * A risk factor for diabetes and other chronic diseases.

Eliminating intimate partner violence will help to close the health gap between Indigenous and non-Indigenous Australians.