The 'Health Costs of Violence'

Intimate partner violence is responsible for more ill-health and premature death in Victorian women under the age of 45 than any other of the well-known risk factors, including high blood pressure, obesity and smoking VicHealth 2004

The Health Costs of Violence: Measuring the burden of disease of Intimate Partner Violence

The Victorian Health Promotion Foundation (VicHealth)

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The 'Health Costs of Violence' study

Commissioned by VicHealth

- Supported by a national Panel of experts
 (from a range of disciplines and sectors Police, Judiciary, Universities, Dept of Human Services)
- Conducted by a team of data and intimate partner violence researchers

The Research Team

- Dr Associate Professor Theo Voss, University of Queensland
- Melanie Heenan, Australian Centre the Study of Sexual Assault, Institute of Family Studies
- Associate Professor Jill Astbury, Key Centre for Women's Health in Society
- Sunil Piers and Anne Magnus, Department of Human Services

Data and analysis contributed by:

- University of Queensland and University of Newcastle from the Australian Longitudinal Study on Women's Health
- Australian Bureau of Statistics, Women's Safety Survey

The Aim of the Study

To assess the health impact of intimate partner violence by measuring:

- Prevalence
- Health problems
- Contribution to the total disease burden in Victorian women (using burden of disease methodology).

What is Intimate Partner Violence?

Sometimes referred to as:

- Family violence
- Relationship violence
- Domestic violence

What is Intimate Partner Violence?

Occurs between people who are, or were formerly, in an intimate relationship

Can occur on a continuum of economic, psychological and emotional abuse through to physical and sexual violence

What is Intimate Partner Violence?

Vast majority of victims are women

Women more vulnerable to its impacts

Occurs across cultural and socio-economic groups

Why Study Intimate Partner Violence?

Mental health problems:

- Large contribution to total disease burden & increasing in prevalence
- Major social & economic impact
- Identified as priority by governments & health bodies
- Violence a risk factor & intimate partner violence a particular risk for women identified by women's activists, practitioners & researchers.

The purpose of the 'Health Costs of Violence' study

Raise awareness of seriousness

Enhance understanding

Provide data and evidence

What is Burden of Disease methodology?

 A standard statistical approach to measuring the impact of health problems developed by the Harvard School of Public Health, the World Health Organisation and the World Bank.

What is Burden of Disease methodology

 First estimates developed for Victoria for 176 diseases and 10 risk factors in 1996.

 This study is the first globally to develop an estimate for intimate partner violence

What is Burden of Disease methodology?

Estimates the impact of diseases and risk factors across a population

The 'burden' measured in terms of:

- Years of healthy life lost due to disability caused by a disease/risk factor
- Lost years of life due to premature death

Why are Burden of Disease Estimates Useful?

- Internationally credible and widely used
- Help to make a problem visible

Can be used:

- By governments/service providers to compare health problems and determine priorities
- By advocates for lobbying/awareness raising
- In research and evaluation

Study findings: How prevalent is intimate partner violence?

Finding:

• 1 in 5 women have been subjected to physical or sexual violence by their intimate partner at some point in their adult lives

Analysed data from the Women's Safety Survey (Australian Bureau of Statistics)

Study findings: What health problems are caused by intimate partner violence?

Findings

Violence has serious, persistent, wide ranging and long lasting effects on women's health.

Reviewed Australian and relevant international studies

Study findings: What health problems are caused by intimate partner violence?

Fatal impacts (eg femicide, suicide)

Non-fatal impacts:

- Physical injuries (eg fractures)
- Reproductive health (eg STDs, complications of pregnancy)
- Mental health (eg suicide, depression)
- Risk behaviours (eg smoking)
- Other (eg chronic pain, sleep problems)

Study findings: How much does intimate partner violence contribute to the burden of disease?

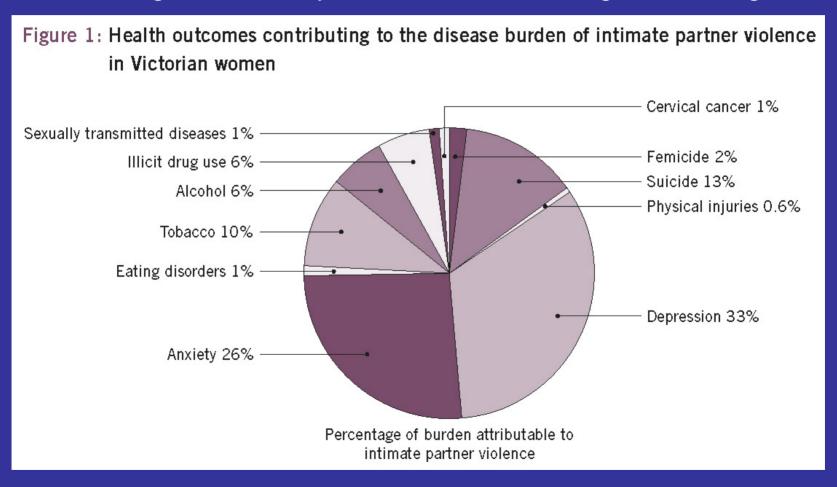
Findings

Intimate partner violence contributes:

- 9% of the total disease burden in Victorian women aged 15-44
 60% of this burden attributed to mental ill health
- 3% of the disease burden in all Victorian women

Health problems contributing to the burden

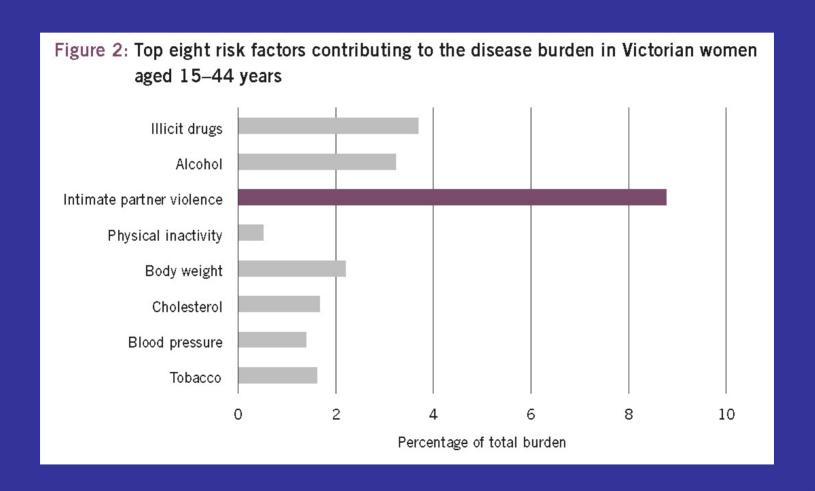
Greatest proportion contributed by mental health problems (60%)
Suicide, drug use and risky levels of alcohol & drug use also significant



How does Intimate Partner Violence compare with other risk factors?

- Top ranking cause of preventable disease and premature death among Victorian women aged 15-44
- Burden is greater than many other well known risk factors (eg obesity, high cholesterol, high blood pressure and illicit drug use)

How does Intimate Partner Violence compare with other risk factors?



Study Limitations

Findings are under-estimates:

- Non-disclosure of violence in surveys
- Some groups of women are under represented (eg CALD women)
- Emotional abuse not included
- Burden of disease estimates only for main problems

What do the study findings mean?

Intimate Partner Violence:

- Is prevalent and serious
- Is an important issue for the health sector
- Needs to be a high priority for governments, service providers and communities - preventable

What do the study findings mean?

 Addressing the problem will lead to improvements in other health areas, such as smoking and mental health

 Violence needs to be considered in designing other health policies and programs (eg tobacco control)

Addressing Intimate Partner Violence

- Complex causal factors
- Cultural, social and economic factors play a large part
- Gender inequality an underlying factor
- These factors can be modified to prevent violence
- Best addressed in the context of human rights, legal and health framework

The health sector's role

Crisis support for individuals effected by violence important

 However, since violence is preventable, there is a greater need to focus on modifiable causes through a public health approach

Violence prevention: A public health approach?

Public Health approach has been applied successfully to address other health issues:

- Overweight and inactivity
- Tobacco use
- Motor vehicle accidents

What is a public health approach?

- Works at the population level to build changes in environments and behaviours that promote health
- Involves partnerships between sectors (eg health, legal, education), recognising that causes of poor health lie outside of the health sector
- Uses multiple strategies

Violence prevention: A Public Health Approach

- Campaigns to raise awareness of violence and prevention strategies
- Professional development to build capacity in key work forces in violence prevention
- Supporting communities to develop local responses (eg local women's/men's groups)
- Advocating for reform of legislation and programs
- Evaluation & research for violence prevention

Resources for planning prevention activity

Specific prevention strategies documented in:

- Women's Safety Strategy (Office of Women's Policy 2002)http://www.women.vic.gov.au
- Partnerships Against Domestic Violence <u>http://www.padv.dpmc.gov.au/01/index.html</u>
- Handbook for the documentation of interpersonal violence prevention programmes (World Health Organization; 2004) http://www.who.int/violence_injury_prevention/resources/publications/en/VPweb.pdf
- VictorianCouncil Against Violence <u>www.vccav.vic.gov.au</u> (identifying & responding to family violence: a guide for general practitioners)

The health sector's challenge

Major health gains have been achieved in addressing a number of other health issues using public health approaches

The challenge will be to apply the approaches and lessons we have learned to address intimate partner violence