PACTS Intimate Partner Violence.

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Outline of Lecture

- ▶ What is IPV?
- ▶ IPV: Who is at risk?
- ► Why does it occur?
- ▶ Take home message

Family Violence

- Cuts across all social economic and racial backgrounds;
- Most family violence victim/survivors are women;
- Most violence to women is perpetrated by their current of former partner, followed by male family members and friends;

What is IPV

- We talked about definitions in the first lecture;
- Intimate partner past or present;
- Occurs in heterosexual and homosexual relationships; married, de facto and teenage relationships;
- ▶ So who is at risk?

Who is at risk

- ▶ Women > men;
- Pregnant women > non-pregnant women;
- Young women > older women;
- Indigenous > non-indigenous populations;
- Culturally and linguistically diverse groups > non-CALD groups;
- Women with intellectual or physical disabilities > women without disabilities;
- Lesbian women > gay men;
- Women separating from their partners > Non separated women.

Intimate Partner Violence

- Globally 1:3 women who have been in a relationship have experienced physical and/or sexual violence from their partner;
- Globally 38% of all murders of women are committed by intimate partners;
- In Australia, 1:3 women in a relationship have experienced physical and/or sexual violence from their partner;
- ▶ In Australian 60% of all murders of women are committed by male intimate partners.

IPV In Australia

- Women are 3 X more likely to suffer from physical violence;
- Women are 10 x more likely to get a serious injury requiring emergency care;
- ▶ IPV in women aged 18-44 years, accounts for the greatest burden of disease for young women in Australia

Things that make you think of IPV

- Recurrent presentations of herself or with her children
- Anxious
- Ashamed or evasive
- Mentions in passing partner out of sorts or a bit angry sometimes
- Often drop cues to see if GP willing to listen "I've had a bad week"

Why don't women tell their health care provider?

- Less than 10% disclose to their health care professional;
- The Reason
- "Because Health Professionals don't ask."

What clinical conditions are associated with IPV?

- Depression, anxiety, PTSD and sleep disorders
- Suicidality and self harm
- Alcohol and substance abuse
- Chronic pain (unexplained)
- Unexplained genitourinary and gastrointestinal symptoms
- Adverse reproductive outcomes
- Repeated vaginal bleeding and STIs
- Traumatic injury
- Repeated health visits without clear diagnosis
- Intrusive partner in consultations

Pathways to care: What do you do?

No
Are there clinical symptoms or concerns?

NO Provide information on IPV in private areas

YES
Give information on services
Do not pressure to disclose
Offer information about children and health
Offer follow up appointment

Identification IPV

Offer first line support

Interview in private

Ensure confidentiality

Be supportive, non-judgmental &validating

Give practical care and support

Ask about history of violence

Help her access information & services

assist with safety

Mobilise social support

Refer for treatment

Psychological therapy

IPV Advocacy

Child witnesses to psychological therapy

The Take Home Message

▶ IPV makes women sick

- Women are more severely effected by IPV than men;
- ▶ Be Prepared to ASK ABOUT VIOLENCE;
- ▶ If there are indicators of possible IPV: give information;
- Be prepared to offer first line support and make referrals;
- ▶ IPV is high in your age group and you may have personal experiences that need to be addressed.