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Intimate partner violence against women in Australia: related factors and help-seeking behaviours

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Aim: To determine which factors were associated with (1) female experiences of intimate partner violence (IPV), (2) female reporting of physical or sexual assault by an intimate partner to the police and (3) females seeking help and support after experiencing IPV.

Method: Women who experienced violence from an intimate partner in the two years prior to participating in the ABS Personal Safety Survey 2012 (PSS) were compared with women who reported never having experienced any violence. Multivariate logistic regression was used to examine which factors including socio-demographic, financial stress, social connectedness, abuse before the age of 15 and emotional abuse by a partner were related to experiences of IPV. In order to ascertain which factors were related to help-seeking behaviours, multilevel regression models were used on a subsample of females whose most recent incident of violence in the last two years was perpetrated by an intimate partner.

Results: The risk of IPV varies greatly across the community. Factors associated with a higher risk of IPV included being younger, Australian-born, having a long-term health condition, lacking social support, experiencing financial stress, having previously been a victim of child abuse and having experienced emotional abuse by an intimate partner.

Where the most recent incident of physical or sexual assault in the last two years was perpetrated by an intimate partner, less than one in three assaults were reported to the police. Intimate partner assaults were less likely to be reported to the police if the perpetrator was still a current partner of the victim at the time of the interview, the assault was sexual (not physical) and if the victim perceived the assault was "not a crime" or "not serious enough". Having a physical injury after the incident was associated with an increased likelihood of reporting the assault to the police. Where the most recent incident of violence (assaults and threats) was perpetrated by an intimate partner, a counsellor or social worker was consulted after 30% of all incidents.

Conclusion: Efforts to prevent IPV and improve services and supports for IPV victims should focus on women who experienced emotional abuse by a current or previous partner, sole parents, women who lack social supports, women experiencing financial stress, women who have experienced abuse as a child and women with a disability or long-term health condition.

Keywords: Intimate Partner Violence, emotional abuse, social support, financial stress, help seeking, reporting to police

INTRODUCTION

According to the latest Australian Bureau of Statistics (ABS) Personal Safety Survey (PSS), 132,000 Australian women (1.5%) experienced violence (defined as any incident involving the occurrence, attempt or threat of either physical or sexual assault (ABS, 2012)) in the last 12 months from their current or previous partner. The same survey revealed that one in four women in Australia have experienced at least one intimate partner violence (IPV) incident (an assault or threat) since the

age of 15, with 16% of these women reporting that their most recent incident of IPV had occurred within the previous two years (for a more extensive discussion of PSS results see (Cox, 2015)). Intimate partner violence may be defined as the experience of violence by a boyfriend / girlfriend / date, current or former intimate partner. A partner is defined as a person the respondent currently lives with, or previously lived with, in a married or de facto relationship. IPV is a problem with severe health, social and economic consequences for women, their families and the community (Johnson, Ollus, & Nevala, 2010).

There are no published estimates of the cost of IPV in Australia, but the total annual cost of domestic violence (including child abuse and other types of domestic violence) was estimated in 2002-03 at \$8.1 billion (Access Economics, 2004).

There are three key questions surrounding IPV: (1) Who is most at risk? (2) What factors influence willingness to report IPV to police? and (3) What factors influence the willingness of victims to seek advice and or support? The first question is important in developing tools that allow the identification of women at high risk of IPV or other forms of domestic violence.1 It is also important because information on the risk profile of different groups in the community is crucial in targeting domestic violence services and educational/prevention programs. The second guestion is important because one of the main ways in which authorities seek to prevent domestic violence is to apprehend and prosecute offenders. Violence that remains undetected or unsupported remains undeterred. The third question is important for helping those who provide practical and emotional support to victims to have a better understanding of the practical and emotional impediments to accessing those services.

The associations with domestic violence have been the subject of extensive research. The available evidence strongly suggests that women are more likely to be subjected to assaults if they experienced violence as a child, if they are sole parents, if they live in a relationship where alcohol is a problem, if they have a current partner who is domineering or controlling, or if their partner witnessed IPV perpetrated by their fathers (ABS, 2006; Coumarelos & Allen, 1998; Ferrante, Morgan, Indermaur, & Harding, 1996; Johnson, 2006; Johnson et al., 2010; Mouzos & Makkai, 2004). A number of studies have also found that the risk of physical and sexual violence is higher among women experiencing economic and personal stress (Benson, Fox, DeMaris, & Van Wyk, 2003; Cunradi, Caetano, & Schafer, 2002; Lauritsen & Schaum, 2004; Smith & Weatherburn, 2013; Van Wyk, Benson, Fox, & DeMaris, 2003; Weatherburn, 2011) and lower among women who can call on others for practical and emotional support (Smith & Weatherburn, 2013; Van Wyk et al. 2003; Weatherburn, 2011).

One of the limitations of past research is that studies have not always distinguished between IPV and other forms of domestic violence (e.g. violence committed by children against their parents). This is true of Coumarelos and Allen (1998); Weatherburn (2011); and Smith and Weatherburn (2013). Since IPV accounts for around 40% of violence against women since the age of 15 (ABS, 2012), it is unclear whether and to what extent the associations of violence against women in general are the same associations of IPV in particular. Another problem is that up until recently, it was quite difficult in Australia to examine "controlling behaviour", "coercive control" or what is more commonly referred to as "emotional abuse". Weatherburn

(2011) relied on a question in the ABS General Social Survey which asked respondents whether they "feel able to have a say with family and friends on important issues" but this question on its own does not capture the full spectrum of emotional abuse, which is generally understood to include behaviours such as limiting contact with family and friends, control of spending, insults and verbal abuse.

Another related limitation of past IPV research is that we still know comparatively little about the factors that influence willingness to report IPV to police and/or to seek help to deal with the consequences of IPV. Some studies have only examined a limited range of correlates (Birdsey & Snowball, 2013; Grech & Burgess, 2011; Mouzos & Makkai, 2004). A comprehensive examination of help seeking behaviour after general violence was carried out by Coumarelos and Allen (1998) more than fifteen years ago. They found that women were more likely to report being a victim of general violence to police if they were older, born overseas, or if their assailant was a former partner, other known person or a stranger. They also found that women were more likely to seek professional help after becoming a victim of violence if they were younger, better educated, on a higher income and/or injured. They were not able, however, to explore factors such as the attitude of the victim to the offence, financial stress, past experience of emotional abuse, social connectedness or isolation, or geographical location.

The 2012 PSS represents a considerable advance on earlier personal violence surveys carried out by the ABS. As with earlier ABS surveys on experiences of violence it is a large nationally representative sample survey administered with particular care to ensure respondents were free to answer questions honestly. As well as containing detailed information on victim and offender relationship, it contains a wealth of information relevant to an understanding of the correlates of IPV (and violence more generally), willingness to report violence to police and willingness to seek help and support. It contains measures of financial stress, social connectedness (or support), victim attitudes toward violence, physical injury, level of education, remoteness of residency, and whether the respondent had a disability or longterm health condition. Importantly, it also contains a measure of emotional abuse by a current and/or previous partner;3 a factor shown in other studies to be a key association of general physical violence.

The current study utilises the 2012 PSS (ABS, 2012) to build on earlier work carried out using the ABS Women's Safety Survey by Coumarelos and Allen (1998). The specific questions sought to be addressed were:

- What factors are associated with a higher risk of experiencing IPV?
- 2. What factors increase the likelihood that a female will report physical or sexual assaults by an intimate partner to police?

3. What factors increase the likelihood that a person who experienced IPV will seek advice and/or support?

The analysis reported here examines a much wider range of factors than Coumarelos and Allen (1998) were able to examine using the Women's Safety Survey. We also examine, for the first time using the PSS, the role of emotional abuse as a factor associated with IPV.

METHOD

PERSONAL SAFETY SURVEY

As with the 2005 PSS survey, the 2012 (PSS) was designed to measure all interpersonal violence experienced by men and women in Australia, including experiences of IPV, with information collected on the nature and extent of violence experienced since the age of 15. The PSS was implemented using robust sampling frame methods and standardised face-to-face interviews of community households undertaken by experienced female interviewers. A process of weighting was used to adjust results from the sample to infer estimates for the total in-scope population.

Persons aged 18 years and older were asked details about their experience of each type of violence (both physical and sexual; assault and/or threat) and who the perpetrator was (e.g. current partner, previous partner, boyfriend/girlfriend or date, stranger, someone else known to them) for each incident type. Further information was obtained about the most recent incident including alcohol involvement in the incident, whether or not the incident was perceived as a crime, and whether advice or support was sought (and source of support) after the incident. Further, if the most recent incident was an assault, the victim was asked whether or not an injury occurred and whether or not the police were contacted (and, where relevant, the reasons why the police were not contacted).⁴

Unit record data from the PSS were accessed through an expanded Main Unit Record File (MURF).

SAMPLE

Three subsamples from the 2012 PSS were used to conduct this analysis. The first subsample included females who reported having experienced violence (physical or sexual assault or threat) by an intimate partner (defined as boyfriend/ girlfriend or date; current partner; previous partner) in the two years prior to the survey (n=490) and the comparison group of all female respondents who reported never having experienced any form of violence (n=7,390). This sample was used to analyse the risk factors associated with experiencing IPV. In order to minimise potential contamination bias to the "no violence" group, women who had experienced a different form of violence (e.g. from a stranger) were excluded from the comparison group.

The second subsample included all female respondents in the 2012 PSS whose most recent incident of assault (physical or sexual) in the last two years was perpetrated by an intimate partner (n=469). This sample was used to analyse the factors associated with reporting physical or sexual assault by an intimate partner to police.

The third subsample included all female respondents whose most recent incident of violence (physical or sexual assault or threat) in the last two years was perpetrated by an intimate partner (n=605). This sample was used to analyse the factors associated with women seeking advice or support after an incident of IPV.

OUTCOMES

Hence, our primary outcome for this study was a whether a female respondent reported having experienced IPV in the previous two years or reported never having experienced any form of violence.⁵ Amongst the subsample of women who did experience IPV in the previous two years, two additional outcomes were examined (1) Whether the most recent physical or sexual assault was reported to the police and (2) Whether advice / support was sought for the most recent incident (assault or threat) of IPV.

EXPLANATORY VARIABLES

The following respondent variables were examined as potential explanatory variables:

Socio-demographic variables at time of interview

- Age: 18-19 years; 20-29 years; 30-39 years; 40-49 years; 50-59 years; 60 years and over.
- Country of birth: Born in Australia; Main English-speaking countries (including Canada, Republic of Ireland, New Zealand, South Africa, United Kingdom and United States of America); Born in other country.
- 3. Main language spoken at home: English; Other language.6
- 4. Social marital status: Married in a registered marriage; Married in a de-facto marriage; Not married.
- Household type: Couple family with dependent children with/ without other persons; One parent family with dependent children with/without other persons; Couple only; Multiple family households (with and without dependent children); Lone person household; Group home; Other.
- Highest level of education attained: Year 10 or below; Year
 or 12; Certificate/Diploma; Bachelor degree; Graduate
 Certificate/Diploma or Postgraduate degree; unknown.
- Remoteness of residency: Major city, Inner regional, Outer regional, Remote.

- 8. Disability or long-term health condition: whether the respondent indicated that they had a disability or long-term health condition.⁷
- Main source of household income: Employee income;
 Unincorporated business income; Government pensions and allowances; Other income; Unknown.

Household Financial Stress at time of interview

Whether the respondent could raise \$2,000 within a week;
 Yes/No

If in the last 12 months the respondent:

- 11. Could pay the electricity, gas or telephone bill on time; Yes/No
- 12. Could pay rent or mortgage payments on time; Yes/No
- 13. Pawned or sold something because cash was needed; Yes/No
- 14. Went without meals; Yes/No

Social connectedness of respondent at time of interview

- Ability to get support in a time of crisis from outside the household: Yes / No
- Ability to ask for small favours from someone outside the household: Yes / No

Abuse before the age of 15

17. Whether experienced physical and / or sexual abuse as a child: Yes / No (or refused to answer)

Emotional abuse

18. Whether experienced emotional abuse by a current / previous partner since the age of 15: Yes / No (or refused to answer).

Incident-related variables

- 19. Type of perpetrator: Boyfriend, girlfriend or date; Current partner; Previous partner
- 20. Gender of perpetrator: Male; Female
- 21. Type of violence: Physical assault; Sexual assault; Physical threat; Sexual threat (note: details around injuries and police reporting are only collected for physical and sexual assault).
- 22. Whether alcohol or drugs contributed to the incident: Alcohol or drugs contributed; Alcohol or drugs did not contribute; Don't know / refused to answer:
- 23. Whether the respondent perceived the incident as a crime: Incident perceived as a crime; Incident perceived as wrong but not a crime; Incident perceived as something that just happens; Don't know / refused to answer.

24. Whether the respondent had been physically injured in the physical or sexual assault: Yes / No / Not applicable.

STATISTICAL ANALYSES

Three sets of analyses were conducted; the first investigated factors associated with IPV, the second examined reporting of IPV assaults to the police and the third explored help-seeking behaviour by those who experienced IPV.

The associations between each of the explanatory variables listed above and the experience of IPV were first examined using bivariate analyses (Chi-Square Likelihood ratio). Interaction effects between relevant explanatory variables (e.g. ability to raise emergency money and cash flow variables, main source of household income; country of birth and main language spoken at home) were also explored and included in subsequent models if significant. Multivariate logistic regression was then conducted using a stepwise selection method of covariates significant at the bivariate level in order to achieve the best model fit.8 Adjusted Odds Ratios (aOR) and 95 per cent confidence intervals (95% CI) were reported for the final model. The conditional probability of being a victim of IPV was also calculated for each individual from the final logistic regression model and included as a covariate in both the help seeking and reporting models (in order to reduce any potential bias in being a victim of IPV). Median propensity scores (and inter-quartile ranges) were not significantly different between victims who did / did not report their assault to the police or those who sought / did not seek support after the incident; indicating similar levels of victimisation between the groups.

The second analysis examined factors associated with reporting intimate partner assaults to the police. This analysis only included the subsample of PSS respondents who reported that their most recent incident of physical or sexual assault in the last two years was perpetrated by an intimate partner.

The third analysis examined factors associated with women seeking advice or support after experiencing IPV. This analysis was only relevant to the subsample of PSS respondents who reported that their most recent incident of any type of violence (physical or sexual assaults or threats) in the last two years was committed by an intimate partner. The unit of analysis here was the incident (i.e. the lower level), with some victims reporting more than one violent incident from an intimate partner within the relevant reporting period (e.g. one physical assault, one sexual assault). For this reason, multilevel modelling was conducted (using generalised linear mixed models with random intercepts), where each individual was treated as the higher level. All covariates significant at the bivariate level were considered for inclusion in the multilevel models, however only those which were significant at p<.05 level are reported here.

RESULTS

FACTORS ASSOCIATED WITH IPV AGAINST WOMEN

The bivariate associations of females who experienced IPV in the previous two years (6.2%) are displayed in Table 1. All factors were significantly related to the risk of IPV. Women were more likely to have experienced IPV in the past two years if they were younger; born in Australia; spoke English at home; had a certificate/diploma as their highest level of qualification; had a disability or long-term health condition; lived in a group or sole parent household; lived in a defacto relationship; were

either not married or living in a de facto relationship; received a Government allowance as their main source of income; were unable to raise \$2,000 in an emergency; could not pay the mortgage on time (in the last 12 months); pawned or sold something because they needed cash (in the last 12 months); went without meals (in the last 12 months); felt unable to get support in a time of crisis from persons outside the household; felt unable to ask for small favours from persons outside the household; experienced emotional abuse by a current and/ or previous partner; experienced child abuse; or lived in the Northern Territory.

Table 1. Bivariate analysis of factors related to women's risk of experiencing IPV in the last two years (n=7,880) (continued)

| | Experienced no violence | Experienced IPV |
|---|-------------------------|---------------------|
| Characteristic | n=7,390 (N, row %) | n=490 (N, row %) |
| | (N, 10W 70) | (N, IOW 70) |
| Age group | 400 (04.7) | 25 (45.2) |
| 18-19 (n=163) | 138 (84.7) | 25 (15.3) |
| 20-29 (n=1,218) | 1,072 (88.0) | 146 (12.0) |
| 30-39 (n=1,494) | 1,342 (89.8) | 152 (10.2) |
| 40-49 (n=1,374) | 1,278 (93.0) | 96 (7.0) |
| 50-59 (n=1,260) | 1,205 (95.6) | 55 (4.4) |
| 60 and above (n=2,371) | 2,355 (99.3) | 16 (0.7 |
| Country of birth | 5.445 (00.0) | |
| Australia (n=5,537) | 5,145 (92.9) | 392 (7.1) |
| Main English speaking ^a (n=926) | 883 (95.4) | 43 (4.6) |
| Other country (n=1,415) | 1,360 (96.1) | 55 (3.9 |
| Main language spoken at home | | ** |
| English (n=7,210) | 6,739 (93.5) | 471 (6.5 |
| Other (n=668) | 649 (97.2) | 19 (2.8 |
| Highest level of education | | ** |
| Year 10 (n=1,981) | 1,896 (95.7) | 85 (4.3) |
| Year 11, 12 (n=1,545) | 1,434 (92.8) | 111 (7.2) |
| Certificate (n=1,932) | 1,761 (91.1) | 171 (8.9) |
| Bachelor (n=1,610) | 1,529 (95.0) | 81 (5.0 |
| Grad Dip / Post grad (n=704) | 664 (94.3) | 40 (5.2) |
| Unknown (n=108) | 106 (98.1) | 2 (1.9) |
| Has disability / long-term health condition | | **: |
| Yes (n=2,200) | 2,010 (91.4) | 190 (8.6) |
| No (n=5,680) | 5,380 (94.7) | 300 (5.3) |
| Household configuration | | ** |
| Couple only (n=2,729) | 2,656 (97.3) | 73 (2.7) |
| Couple with child/ren (n=2,465) | 2,356 (95.6) | 109 (4.4 |
| Group house (n=181) | 152 (84.0) | 29 (16.0 |
| Lone person (n=1,163) | 1,108 (95.3) | 55 (4.7 |
| Multi-family (n=119) | 108 (90.8) | 11 (9.2 |
| One parent with child/ren (n=440) | 270 (61.4) | 170 (38.6 |
| Other (n=783) | 740 (94.5) | 43 (5.5 |

Table 1. Bivariate analysis of factors related to women's risk of experiencing IPV in the last two years (n=7,880) (continued)

| | | Experienced no violence n=7,390 | Experienced IPV n=490 |
|--|-------------------|---------------------------------|-----------------------|
| Characteristic | | (N, row %) | (N, row %) |
| Social marital status | | | *** |
| 1 | Married (n=4,789) | 4,678 (97.7) | 111 (2.3) |
| | De facto (n=546) | 493 (90.3) | 53 (9.7) |
| | Neither (n=2,545) | 2,219 (87.2) | 326 (12.8) |
| Main source of household income | | | *** |
| Employee | income (n=4,988) | 4,659 (93.4) | 329 (6.6) |
| Government allo | owance (n=1,719) | 1,581 (92.0) | 138 (8.0) |
| | Other (n=1,134) | 1,111 (98.0) | 23 (2.0) |
| | Unknown (n=39) | 39 (100.0) | 0 (0.0) |
| Able to raise \$2,000 in an emergency | | | *** |
| | Yes (n=6,744) | 6,420 (95.2) | 324 (4.8) |
| | No (n=910) | 764 (84.0) | 146 (16.0) |
| | Jnknown (n=226) | 206 (91.2) | 20 (8.8) |
| Could pay mortgage/rent on time | | | *** |
| | Yes (n=7,626) | 7,214 (94.6) | 412 (5.4) |
| | No (n=254) | 176 (69.3) | 78 (30.7) |
| Pawned or sold something because cash required | | | *** |
| | Yes (n=114) | 65 (57.0) | 49 (43.0) |
| | No (n=7,766) | 7,325 (94.3) | 441 (5.7) |
| Went without meals | , , , | , , , | *** |
| | Yes (n=80) | 32 (40.0) | 48 (60.0) |
| | No (n=7,800) | 7,358 (94.3) | 442 (5.7) |
| Able to get support in a time of crisis | 140 (11–1,000) | 7,550 (54.5) | * |
| from persons out of household | Voc (n=7.610) | 7 146 (02 0) | 464 (6.1) |
| • | Yes (n=7,610) | 7,146 (93.9) | 464 (6.1) |
| Firm and an efficient above to | No (n=270) | 244 (90.4) | 26 (9.6) |
| Ever experienced emotional abuse by a current/previous partner | V (- 4.000) | 004 (04.5) | |
| a current previous parties | Yes (n=1,029) | 664 (64.5) | 365 (35.5) |
| | No (n=6,851) | 6,726 (98.2) | 125 (1.8) |
| Experienced abuse before the age of 15 (physical or sexual) |), (000) | 200 (20 0) | *** |
| (physical of sexual) | Yes (n=980) | 809 (82.6) | 171 (17.4) |
| | No (n=6,883) | 6,564 (95.4) | 319 (4.6) |
| State of residence | | | * |
| | NSW (n=1,104) | 1,048 (94.9) | 56 (5.1) |
| | VIC (n=984) | 929 (94.4) | 55 (5.6) |
| | QLD (n=1,019) | 951 (93.3) | 68 (6.7) |
| | SA (n=1,031) | 967 (93.8) | 64 (6.2) |
| | WA (n=945) | 889 (94.1) | 56 (5.9) |
| | Tas (n=1,016) | 962 (94.7) | 54 (5.3) |
| | NT (n=831) | 754 (90.7) | 77 (9.3) |
| | ACT (n=950) | 890 (93.7) | 60 (6.3) |

Note. 11 perpetrators of IPV were female.

^a Includes Canada, Republic of Ireland, New Zealand, South Africa, United Kingdom and United States of America.

^{*} p < .05, ** p < .01, *** p < .001.

Table 2. Factors associated with females experiencing IPV in the last two years: Multivariate analysis (n=7,880)

| Characteristic | Category | Parameter estimate | aOR (95% CI) |
|---|---------------------------|--------------------|------------------|
| Intercept | | -2.710 | |
| Age group | 18-19 ¹ | | 1.00 |
| | 20-29 | 0.213 | 1.24 (0.68, 2.24 |
| | 30-39 | 0.056 | 1.06 (0.56, 1.99 |
| | 40-49 | -0.624 | 0.54 (0.28, 1.03 |
| | 50-59 | -0.948 ** | 0.39 (0.19, 0.78 |
| | 60+ | -2.390 *** | 0.09 (0.04, 0.21 |
| Highest level of education | Year 10 ¹ | | 1.00 |
| | Year 11, 12 | 0.257 | 1.29 (0.84, 1.99 |
| | Certificate | 0.634 ** | 1.89 (1.27, 2.80 |
| | Bachelor | 0.258 | 1.30 (0.83, 2.02 |
| | PG, Grad Dip | 0.391 | 1.48 (0.85, 2.58 |
| | Unknown | -0.875 | 0.42 (0.05, 3.43 |
| Country of Birth | Australia ¹ | | 1.00 |
| | Main English speaking | 0.009 | 1.01 (0.66, 1.56 |
| | Other | -0.672 *** | 0.51 (0.36, 0.72 |
| Has a disability /long-term health condition | No ¹ | | 1.00 |
| | Yes | 0.429 ** | 1.54 (1.16, 2.04 |
| Social marital status | Defacto ¹ | | 1.00 |
| | Registered marriage | -0.413 | 0.66 (0.42, 1.04 |
| | Not married | 0.432 | 1.54 (0.95, 2.49 |
| Household configuration | Couple only ¹ | | 1.00 |
| | Couple with child/ren | -0.286 | 0.75 (0.50, 1.13 |
| | Multifamily | 0.405 | 1.50 (0.75, 2.99 |
| | One parent with child/ren | 0.538 * | 1.71 (1.04, 2.82 |
| | Lone person | -0.095 | 0.91 (0.52, 1.59 |
| | Group home | 0.259 | 1.30 (0.70, 2.4 |
| | Other | 0.351 | 1.42 (0.90, 2.25 |
| Able to get support in a time of crisis | Yes ¹ | | 1.00 |
| | No | 0.823 ** | 2.28 (1.38, 3.76 |
| Ever experienced abuse before the age 15 | No ¹ | | 1.00 |
| (physical or sexual) | Yes | 0.831 *** | 2.30 (1.70, 3.10 |
| Ever experienced emotional abuse by a current / | No ¹ | | 1.00 |
| previous partner as an adult | Yes | 2.970 *** | 19.4 (14.9, 25.2 |
| Could not pay mortgage or rent payments on time | No ¹ | | 1.00 |
| | Yes | 0.960 *** | 2.63 (1.72, 4.02 |
| Pawned / sold item as cash required | No ¹ | | 1.00 |
| · | Yes | 0.911 ** | 2.45 (1.29, 4.80 |
| Went without meals | No ¹ | | 1.00 |
| | Yes | 1.160 ** | 3.18 (1.47, 6.90 |

Note. No interactions were significant. The AUC of the model was .926

¹ Reference category * p < .05, ** p < .005, *** p < .001

Given all the explanatory variables were significant at the bivariate level, all were considered for inclusion in the multivariate model. Table 2 shows the results of the multivariate logistic analysis. In other words, it shows the effect of each factor on the risk of IPV after controlling for other factors. Significant associations have an asterisk associated with them. An adjusted Odds Ratio (aOR) of more than one means that the person with that characteristic has higher odds of experiencing IPV than a person without that characteristic or (in the case of multicategory variables) than the reference case (indicated by a superscript '1').

After adjusting for the effects of all other factors, the odds of experiencing IPV was found to be significantly lower among women:

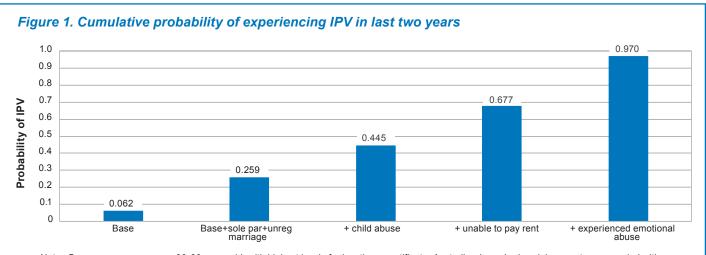
- Over the age of 50 years; and/or
- Who were born in an overseas non-English speaking country.

Higher odds of experiencing IPV were seen among women:

- whose highest level of education was a certificate;
- who reported having a long-term health condition;
- who lived in a one-parent household;
- who were not able to access support outside the family in a time of crisis;
- · who had experienced child abuse;
- who had experienced emotional abuse from a current or previous partner;
- who could not pay rent or mortgage payments on time;
- who had pawned or sold something because cash was needed; and/or
- who had gone without meals.

Among these factors, the most notable was emotional abuse by a current or previous partner; with the odds of experiencing IPV more than 19 times higher for respondents who experienced emotional abuse by a current or previous partner than for those who did not experience such abuse. It should be noted that the emotional abuse and violence may have been perpetrated by different partners. Other strong associations with IPV included not being able to access support outside the family in a time of crisis, having experienced abuse as a child and financial stress (as evidenced by not being able to pay the rent or mortgage on time, having pawned or sold something because cash was needed or having gone without meals).

It is possible to get a clearer picture of the cumulative impact of these factors on the risk of IPV by using the parameter estimates of the model shown in Table 2 to estimate the risk of IPV for different combinations of victim characteristics. For example, taking a base case (as shown in Figure 1) as a woman aged 30-39, whose highest level of education was a certificate, who was born in Australia, who did not have a disability, lived in a couple relationship with children, had a registered marriage, had access to crisis support outside the family, did not experience abuse as a child and had not experienced financial stress in the last 12 months; the probability of such a person experiencing IPV in the last two years is .062 (6.2%).9 If the woman concerned changed to a sole parent who did not have a registered marriage, her risk rose to .259 (25.9%). If in addition to these characteristics, she experienced abuse as a child, her risk rose to .445 (44.5%). If, in addition to these characteristics, she was unable to pay the rent on time over the last 12 months, her risk rose to .677 (67.7%). Finally, if she also experienced partner emotional abuse in the last 12 months, her risk jumped to .970 (97.0%).



Note. Base case was a woman 30-39 years old, with highest level of education a certificate, Australian-born, had social support, was married with children, had not experienced child abuse or emotional abuse and did not have a long-term health condition or financial stress (as indicated by the first column).

Table 3. Bivariate analyses of factors related to (a) reporting an assault (physical and sexual) to the police $(N^1=469)$ and (b) seeking advice or support after the IPV incident (all incidents, $N^2=605$)

| Characteristic | Reported assault to police N=125 n (row ¹ %) | Sought advic or support N=419 n (row ² %) |
|--|--|---|
| Relationship to victim | *** | ** |
| Boyfriend / Girlfriend or Date (n¹=134 ;n²=171) | 27 (20.2) | 118 (69.0) |
| Current Partner (n¹=137; n²=176) | 21 (15.3) | 104 (59.1) |
| Previous Partner (n¹=198; n²=258) | 77 (38.9) | 197 (76.4) |
| Type of violence | *** | *** |
| Physical (n ¹ =361; n ² =476) | 119 (33.0) | 345 (72.5) |
| Sexual (n¹=108; n²=129) | 6 (5.6) | 74 (57.4) |
| Assault or threat | - (/ | (= / |
| Assault (n ^{1&2} =469) | 153 (100) | 333 (71.0) |
| Threat ($n^1=0$; $n^2=136$) | N/A | 86 (63.2) |
| Physically injured | *** | *** |
| Yes (n ¹⁸² =240) | 121 (79.1) | 187 (77.9) |
| No (n ^{1&2} =229) | 32 (20.9) | 146 (63.8) |
| N/A (n ² =136) | N/A | 86 (63.2) |
| Has disability / long-term health condition | | , |
| Yes (n ¹ =185; n ² =242) | 57 (30.8) | 169 (69.8) |
| No (n¹=284; n²=363) | 68 (23.9) | 250 (68.9) |
| Support in a crisis | , , | ** |
| Yes (n ¹ =444; n ² =570) | >115 (>25.0) | 402 (70.5) |
| No $(n^1=25; n^2=35)$ | <10 (<40.0) | 17 (48.6) |
| Remoteness of residency | | |
| Major city (n ¹ =253; n ² =217) | 59 (23.3) | 219 (69.1) |
| Inner regional (n ¹ =86; n ² =110) | 23 (26.7) | 75 (68.2) |
| Outer regional (n^1 =99; n^2 =133) | 29 (29.3) | 94 (70.7) |
| Remote / Very remote (n ¹ =31; n ² =45) | 14 (45.2) | 31 (68.9) |
| Perception of incident | *** | ** |
| A crime (n^1 =187; n^2 =251) | 83 (44.4) | 191 (76.1) |
| Wrong but not a crime (n ¹ =189; n ² =234) | 24 (12.7) | 156 (66.7) |
| Something that happens (n¹=98; n²=113) | 18 (20.4) | 70 (62.0) |
| Alcohol or drugs involved | ** | ** |
| Yes (n¹=246; n²=310) | 79 (32.1) | 233 (75.2) |
| No (n¹=218; n²=284) | 46 (21.1) | 179 (63.0) |
| Able to raise \$2,000 in an emergency | *** | |
| Yes $(n^1=296; n^2=381)$ | 60 (20.3) | 262 (68.8) |
| No (n ¹ =169; n ² =196) | 56 (37.6) | 136 (69.4) |
| Unknown (n¹=24; n²=28) | 9 (37.5) | 7 (25.0) |
| Went without meals | , | , , |
| No (n ¹ =419; n ² =534) | 111 (26.5) | 374 (70.0) |
| Yes $(n^1=50; n^2=71)$ | 14 (28.0) | 45 (63.4) |
| Ever experienced emotional abuse by a current | * | ` ′ |
| / previous partner as adult Yes(n¹=350; n²=465) | 102 (29.1) | 326 (70.1) |
| No (n¹=119; n²=140) | 23 (19.3) | 93 (66.4) |
| Ever experienced child abuse (physical or sexual) | (2 2) | (3.2.) |
| Yes (n ¹ =166; n ² =209) | 45 (27.1) | 148 (70.8) |
| No (n¹=303; n²=396) | 80 (26.4) | 271 (68.4) |

Note. 95% of IPV victims spoke English at home; Only 11 perpetrators were female; Country of birth, age-group, education level, not being able to pay the rent/mortgage and going without meals were not significantly associated at the bivariate level with help seeking behaviour.

* p < .05, *** p < .01, **** p < .001.

REPORTING TO POLICE AND HELP SEEKING BEHAVIOUR

Of women whose most recent incident of physical or sexual assault in the last two years was perpetrated by an intimate partner, just over one-quarter (26.7%) of these assaults were reported to police. For the 73% of assaults that were not reported to the police, the main reason provided for not reporting the incident was that the woman felt that she could deal with it herself (33.0%); the woman did not regard the assault as a serious offence (17.6%); the woman had fear of the perpetrator (12.0%); she did not want the person arrested (9.1%); and she was ashamed or embarrassed (6.7%). Table 3 provides characteristics of the intimate partner assault according to whether or not the incident was reported to police.

Factors at the bivariate level that were associated with a greater likelihood of reporting the assault to the police included: the perpetrator at the time of the interview was a previous partner (not a current partner or boyfriend/date); the incident was physical rather than sexual assault; the respondent was physically injured; the incident was perceived as a crime; drugs or alcohol were involved; could not raise \$2,000 in an emergency; and having experienced emotional abuse by a current or previous partner.

Of women whose most recent incident of violence (i.e. physical or sexual assault or threat) in the last two years was perpetrated by an intimate partner, in 69% of these incidents advice or support was sought after the incident. Common sources of support contacted after the most recent incident took place were a friend or family member (76%), a counsellor or support worker (27%), the police (23%), a GP (21%) or another health professional (7%). The first people to be told of the incident were most commonly friends or family members (66%), the police (16%), a GP (8%) or a counsellor or support worker (4%).

Many of the factors which, at the bivariate level were associated with reporting to police were also associated with seeking advice or support (see Table 3). Thus women who experienced IPV were more likely to seek support if the perpetrator was, at the time of the interview, a previous partner rather than a current partner or boyfriend/girlfriend or date, if the violent incident was physical rather than sexual and if they believed the incident was a crime. Being socially connected was associated with seeking advice or support at the bivariate level but not similarly associated with reporting the assault to police.

Table 4 shows the results of the multilevel analyses of reporting to police and seeking advice or support. After adjusting for other factors, the odds of reporting physical or sexual assault by an intimate partner to police was found to be lower for:

Table 4. Factors related to (a) reporting the most recent assault (physical or sexual) to the police and (b) seeking advice or support after the most recent incident of IPV: Multilevel analysis

| | aOR report to police | aOR seeking advice |
|---------------------------------------|-----------------------|----------------------|
| Characteristic | (95% CI) | (95% CI) |
| Relationship to victim | | |
| Boyfriend / Girlfriend or Date | 0.79 (0.46, 3.42) | 0.89 (0.51, 1.55) |
| Current Partner | 0.46 (0.22, 0.96)** | 0.48 (0.27, 0.87)* |
| Previous partner ¹ | 1.00 | 1.00 |
| Type of violence | | |
| Sexual ¹ | 1.00 | 1.00 |
| Physical | 8.86 (3.25, 24.2)*** | 8.70 (1.56, 46.1) ** |
| Physically injured | | |
| No ¹ | 1.00 | NS |
| Yes | 2.28 (1.36, 4.05) *** | |
| Perception of incident | | |
| A crime ¹ | 1.00 | NS |
| Wrong but not a crime | 0.28 (0.09, 0.87)* | |
| Something that happens | 0.46 (0.21, 0.98)* | |
| Able to raise \$2,000 in an emergency | | |
| Yes¹ | 1.00 | NS |
| No | 2.27 (1.18, 4.24)** | |

Note. The probability of being a victim of IPV was not associated with reporting the assault to the police or seeking support. There were no significant interactions in the models. NS equals not statistically significant.

¹ Referent category

^{*} p < .05, ** p < .01, *** p < .001.

- assaults (physical or sexual) by a current partner;
- incidents perceived as "wrong but not a crime"; and
- incidents perceived as "something that just happens".

The odds of reporting an assault by an intimate partner to police was found to be higher for:

- incidents where the woman was physically injured;
- physical violence rather than sexual assaults;
- women who were not able to raise \$2,000 in an emergency.

Two factors were found to be independently associated with seeking help or support. Incidents of physical violence were much more likely to result in the women seeking help or support than incidents of sexual violence and if the perpetrator was now a previous partner rather than a current partner.

DISCUSSION

This study set out to improve our understanding of the risk factors for female IPV in Australia, as well as the factors associated with reporting physical or sexual assaults by an intimate partner to police and women seeking advice or support after the violence. To achieve this, we analysed the responses from over 7,000 women who participated in the 2012 ABS PSS, of whom 490 (6%) had experienced some form of IPV in the two years preceding the survey. Consistent with other studies (ABS, 2006; Capaldi, Knowble, Shortt, & Kim, 2012; Coumarelos & Allen, 1998; Dillon, Hussain, & Loxton, 2015; Mouzos & Makkai, 2004: Smith & Weatherburn, 2013: Weatherburn, 2011), we found that women were more likely to experience IPV if they lacked support (e.g. lived in a one-parent household; were not able to access support outside the family in a time of crisis); had experienced emotional abuse from a current or previous partner; or were under financial stress (e.g. if in the last 12 months they found they could not pay rent or mortgage payments on time). We also confirmed results from previous studies in showing that women who experienced child abuse were at higher risk of IPV (Capaldi, Knowble, Shortt, & Kim, 2012; Coumarelos & Allen, 1998), as were women with a long-term health condition or disability (Weatherburn, 2011).

By far the strongest association with IPV in the two years prior to the 2012 PSS was having ever experienced emotional abuse by a current or previous partner. The odds of experiencing IPV was nearly 20 times higher for women who had previously experienced emotional abuse from a current or previous partner compared with those with no such history. This is a significant finding as earlier IPV research has conceptualised emotional abuse as a form of intimate partner violence rather than as a risk factor for its occurrence (Capaldi et al., 2012; Coumarelos & Allen, 1998; Mouzos & Makkai, 2004). The cumulative effect

of emotional abuse with other risk factors was substantial. A woman aged 30-39, whose highest level of education was a certificate, who was born in Australia, did not have a disability, lived in a couple relationship with children, had a registered marriage, had access to crisis support outside the family, did not suffer abuse as a child and had not experienced financial stress in the last 12 months had a 6% chance of having experienced IPV in the last 24 months. A sole parent who did not have a registered marriage, experienced abuse as a child, was unable to pay the rent on time and had experienced emotional abuse by a partner in the last 12 months had a 97% chance of experiencing IPV over the last two years.

It is impossible to say on the basis of a cross-sectional study such as this one, which of these factors are causes, which are effects and which are simply associations of IPV. Leaving an abusive intimate relationship may cause increased financial difficulties or social isolation for the victim, but financial stress may also contribute to IPV (for evidence on this see Smith and Weatherburn (2013)). Lack of anyone to turn to outside the family for crisis support may increase the risk of IPV, but it may also signal the level of control being exercised over women by the perpetrators of IPV. Again, emotional abuse and violence may simply co-occur in a relationship, or emotional abuse may be a signal of escalating violence in the relationship. Whether they are causes, effects or simply associations; the factors related to IPV found in this study provide valuable information for those involved in preventing IPV or improving services and supports to victims of IPV. The PSS arguably provides a much more accurate picture of women who experience IPV than can be gleaned from information contained in police or court records. By comparing the profile of women who experience IPV as revealed in the PSS, with that found in police and court records, it is possible to identify groups of women who are not reporting violence to police and/or not seeking advice or support.

Our results on reporting and service use are also useful here too. Of the 469 most recent incidents of physical or sexual assault in the last two years perpetrated by an intimate partner, less than one in three incidents were reported to the police. This is similar to that reported by Cox (2015), and nearly double that reported by Mouzos and Makkai (2004) 10 years earlier. However, it is somewhat lower than a specialised survey of women (of physical, sexual, emotional or verbal abuse, harassment or threats) attending domestic violence services which found approximately 50% reported their most recent domestic violence assault to the police (Birdsey & Snowball, 2013). The main reasons given by women who experienced IPV in this study for not reporting the assault to the police were: (1) that they thought they could deal with the matter themselves; (2) that they did not regard the assault as a serious enough offence; (3) that they were fearful of their partner; (4) that they did not want the partner

arrested; or (5) that they were embarrassed. These findings highlight the very real difficulties facing women experiencing IPV when considering whether or not to report violence to police. They show that decisions concerning whether or not to report an incident of domestic violence to police carry very real risks and costs for women as well as potential benefits. This is especially true of women who experienced sexual assault by an intimate partner who were less likely to report the incident to police than females who experienced physical assault.

While a small proportion (27%) of all intimate partner assaults were reported to the police, it is encouraging to see that after many incidents of IPV (69%), women sought advice or support. This included seeking advice or support from friends or family, GPs or counsellors/support workers after the violent experience. Support was, however, most often sought from friends and family rather than health or helping professionals. Less than one in three women contacted a counsellor or support worker and less than one in five visited a GP for help or advice following the violent incident. In order to prevent further violence occurring and to assist in their physical and emotional well-being, women at risk of IPV victimisation, particularly those who experience emotional abuse by their partner, must be made aware of professional help services which are available, including access to legal support services. IPV is a problem which can have severe health, social and economic consequences for women, their families and the community (Dillon, Hussain, Loxton, & Rahman, 2013; Johnson et al., 2010; Loxton, Schofield, & Hussain, 2006; Posick, Agnich, Policastro, & Hatfield, 2016; Vos et al., 2006). People should be made aware that IPV has longterm consequences for women's physical and mental health and that it is prudent to seek professional support services after an assault.

There are some limitations of this study that should be noted. Firstly, not all women in the PSS who experienced IPV in the last two years were included in the sample to analyse the factors associated with police reporting and help-seeking. This is due to the design of the PSS which collects detailed characteristics of the most recent incident of violence (physical or sexual assault or threat) by a male or female perpetrator. The second limitation is the PSS does not contain any information regarding the Indigenous status of the respondents, thereby precluding its use as a potential covariate in the multivariate models. It would be useful if future surveys included questions on Indigenous status. Thirdly, the survey sample only contained a very small number of women who had been victimised by an intimate partner who was also female. Further research using purposeful sampling should be undertaken to obtain a more representative sample of the LGBTI¹⁰ community so that risk factors of IPV and reporting behaviours amongst this victim group can be examined. Future research should also investigate more broadly why women with a disability/long-term health condition are more likely to experience IPV and what policies could be developed in order to address this. It was also not possible to determine whether emotional abuse towards a victim could be attributed to a current or former partner, as it was possible that a victim may have had more than one partner in the previous two years, one who used emotional abuse and one who did not.

It is increasingly apparent that financial stress and social isolation are associated with increased risk of victimisation. In addition, prior experience of child abuse and current or previous partner emotional abuse are strongly correlated with IPV. Hence, in order to reduce the incidence of IPV, it may be worth developing a risk-assessment tool to identify women who are at high risk of victimisation and use this information to provide social supports to break the "cycle of violence". Awareness and treatment campaigns targeting victims and perpetrators may also be developed to highlight how apparent "trivial" victimisation, including the emotional abuse of a partner, should not be condoned or accepted as normal, and that violence and abuse have long-term adverse consequences on victim's lives. An example of a treatment program for male perpetrators of IPV is the Domestic Violence EQUIPS program run by NSW Corrective Services. This sets out to improve the perpetrator's selfmanagement and to increase their level of accountability with regards to their behaviour and the impact their behaviour has on their partner. It is anticipated that an evaluation of this program will be conducted by the NSW Bureau of Crime Statistics and Research and reported upon in the near future.

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NOTES

- The (NSW) Safer Pathway Program, for example, uses a risk assessment tool known as the 'domestic violence safety assessment tool' (DVSAT) to identify women at serious risk of violence. They are then referred to Safety Action Meetings where Government agencies collaboratively consider what can be done to protect the woman from death, disability or injury as a result of domestic violence (NSW Department of Justice (2014; p. 1))
- The term refers to a pattern of behaviour in which a partner (often the male) seeks to control the other partner's life and activities; for example by limiting their freedom of movement or association, controlling their spending and insulting or degrading them.
- The PSS classifies a respondent as having experienced 'emotional abuse' if they answer yes to any of the following items regarding the behaviour of their current or previous partner(s):
 - Stopped or tried to stop them from contacting family, friends or community
 - Stopped or tried to stop them from using the telephone, Internet or family car
 - Monitored their whereabouts (e.g. constant phone calls)
 - Controlled or tried to control where they went or who they saw
 - Stopped or tried to stop them knowing about or having access to household money
 - Stopped or tried to stop them from working or earning money
 - Stopped or tried to stop them from studying
 - Deprived them of basic needs such as food, shelter, sleep or assistive aids
 - Damaged, destroyed or stole any of their property
 - Constantly insulted them to make them feel ashamed, belittled or humiliated
 - Lied to their child/ren with the intent of turning them against them
 - Lied to other family members or friends with the intent of turning them against them
 - Threatened to take their child/ren away from them
 - Threatened to harm their child/ren
 - Threatened to harm other family members or friends
 - Threatened to harm any of their pets

- Harmed any of their pets
- · Threatened or tried to commit suicide
- 4. Further information could also be obtained for respondents whose violence was perpetrated by a current or previous partner, however this information did not necessarily relate to the most recent IPV experienced by the victim and responses may have referred to any timeframe in the previous 20 years. Characteristics of the partner violence such as whether or not more than one episode had occurred in the previous 12 months, the relationship length, whether or not the victim had previously separated from that partner and whether or not children had ever witnessed the violence could be obtained. Hence, although extra information could be gathered from investigating aspects related specifically to current or previous partner violence, some limitation existed due to the possibility that this information was not related to the most recent incident. Hence these characteristics were not included in the analyses.
- 5. Question loops were asked of each participant to the PSS regarding if they had experienced (1) sexual assault by a male (2) sexual assault by a female (3) sexual threat by a male (4) sexual threat by a female (5) physical assault by a male (6) physical assault by a female (7) physical threat by a male (8) physical threat by a female and what their relationship to the perpetrator was for each loop and when the incident occurred. For example, to ascertain if the participant had experienced sexual assault by a male, the following question was asked "I would now like to ask some questions about any sexual activity you may have been forced into, since the age of 15. This excludes any unwanted sexual touching. Has any man [including your current partner] ever forced you, or tried to force you, into sexual activity against your will?"
- 6. Where a respondent did not speak English, a small number of interviewers with foreign language skills were trained to conduct PSS interviews and were mostly conducted over the phone. Where a respondent did not speak English and an ABS interviewer who spoke their language was not available, interviews were not able to be conducted. Therefore it is possible that the PSS may under represent those from a non-English speaking background.
- 7. A long-term health condition was defined as any of the following which have lasted or likely to last for six months or more: (1) Shortness of breath (2) Chronic or recurring pain (3) A nervous or emotional condition (4) Long term effects as a result of a head injury, stroke or other brain damage (5) Any other long term condition that requires treatment or medication (6) Any other long term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia, etc.

- 8. Sensitivity analyses were conducted by first using simple logistic regression with all available explanatory variables included as covariates, and secondly by adding conceptually similar variables separately into the model. Only minor changes resulted in the parameter estimates and odds ratios for factors significantly associated with IPV victimisation.
- The probability of the example persons experiencing IPV was calculated by summing the estimates of the intercept and the relevant covariates in the model of Table 2 and then using the formula *Probability=exp(sum)/(1+exp(sum))*.
- Lesbian, gay, bisexual, intersex, transgender and gender diverse people.

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