



Women's Health East

Violence against Women

Violence against women is the leading contributor to death, disability and ill-health in Victorian women aged 15–44¹

Violence against women is now widely recognised as one of the most widespread violations of human rights.² Family violence and sexual assault are the most common forms of violence experienced by women in Australia.³

The United Nations⁴ defines violence against women as *'any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life... [It is] a violation of the rights and fundamental freedoms of women.'*

Violence against women is prevalent, serious and preventable.⁵ The impact of violence has profound consequences for women, children, families and whole communities.⁶ Most violence against women occurs within the confines of the home, 'unseen' by others and the community, often by someone known to them, and commonly within intimate partner relationships.⁵ Violence against women encapsulates various forms of violence and recognises the gendered and disproportionate nature of violence that predominately is perpetrated by men against women. For instance, in Australia:

- There were 35,720 family violence incidents reported to police in the 2009–2010 financial years across Victoria.⁷
- Women constitute the overwhelming majority of victims of family and sexual violence – 77% of reported family violence is experienced by women and girls, while the overwhelming majority of perpetrators are men
- Women are five times more likely to be killed by an intimate partner than men – on average, more than one woman is killed every week by a male partner or ex-partner often post separation
- 92% of all reported rape victims are women and girls^{5,8}

While violence mostly occurs in the home, sexual assault can also occur in a range of settings such as workplaces, schools, pubs and clubs - outside of the 'family violence' context.⁶ Girls and young women aged 15–24 are the most likely to experience sexual assault.⁹

The extent of violence against women is difficult to determine. Women experiencing violence are often emotionally involved with, and economically dependent on, those who victimise them, making it difficult to disclose their experiences, let alone seek support. The persisting societal and/or cultural 'silence' on the problem, and fears of being ostracized, re-victimised or disbelieved, can further intensify women's reluctance to seek help.⁵

Research indicates that since the age of 15, 1 in 5 Australian women have experienced sexual violence and 1 in 3 have experienced physical violence.¹⁰ These findings are likely to represent the minimum levels of violence that occur.¹¹

Research conducted in 2005 on Australian women, who had been assaulted in the previous 12 months, reported that:

Physical assault perpetrators included current or previous male partners (38%) and male family members or friends (34%). Strangers represented 18% of perpetrators.

Sexual assault perpetrators included previous partners (21%), current partners (8%) and family members or friends (39%). Strangers represented 22% of perpetrators.¹⁴

While men's violence against women affects all communities, some groups of women may be at increased risk. These include:

- Aboriginal and Torres Strait Islander women
- Women from culturally and linguistically diverse backgrounds
- Women with disabilities
- Women living in rural, regional and remote locations
- Younger women
- Women in mental health in-patient care
- Pregnant women⁶

Determinants of Violence Against Women

Violence against women has its roots in gender and power inequality. Gendered issues of power and control are reinforced through a complex web of cultural and social norms and structures that perpetuate unequal relationships.¹² In order to work towards ending violence against women, we need to understand the underlying determinants of why violence occurs. VicHealth⁶ identifies the key determinants of violence against women as:

- Unequal power relations between women and men
- Adherence to rigid gender stereotypes

Health Impacts

Research indicates the profound and long-term toll that violence takes on women's health, on families, communities and on society in general.¹³ The impact of violence on women's health and wellbeing can result in short and long-term effects, including poor physical and mental health outcomes, gender inequity, social isolation and economic disadvantage.^{2,14}

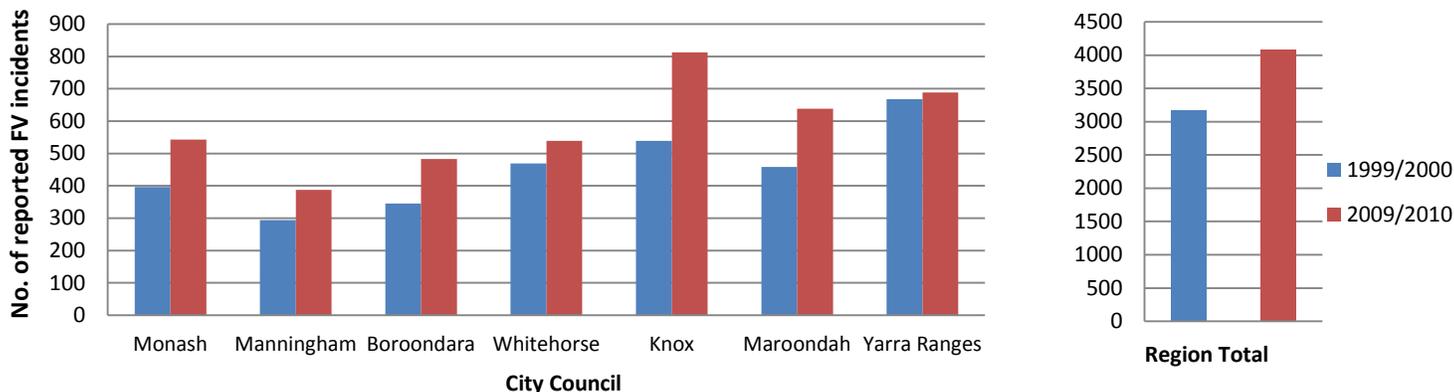
In response to violence, women may develop a range of mental health problems, such as depression, anxiety and stress. They may also be at increased risk of engaging in harmful behaviours including substance use and social withdrawal adversely affecting their physical and mental wellbeing.⁶ The physical health consequences of violence can persist long after violent episodes have occurred and include bruises, welts, fractures, eye damage, chronic pain syndromes, permanent disabilities, gastrointestinal disorders, gynaecological disorders, sexually transmitted infections, HIV and unwanted pregnancies.⁵

Additional social implications can include women suffering social isolation, inability to work, loss of wages, lack of participation in regular activities, and limited ability to care for themselves and their children.¹⁴

Eastern Metropolitan Region

In the financial year 2009/2010, the number of family violence incidents attended by Victorian Police in the EMR was 4,090.¹⁵ Data for the EMR (see graph below) shows a steady increase over the past 11 years in the number of reported family violence (FV) incidents.¹⁶ Changes in reported FV incidents may be influenced by a range of factors including community awareness and education campaigns that encourage reporting, and police vigilance in reporting.

Family Violence (FV) incidents reported to Victorian Police – 11 year Analysis¹⁵



Over 2011- 2012, Eastern Centre Against Sexual Assault (ECASA) provided counselling /advocacy to 789 past and recent survivors of sexual assault of whom 85% (674) were female and 221 were children and young people.¹⁷

The Eastern Domestic Violence Service (EDVOS) sees clients from Monash (8.2%), Manningham (9.6%), Boroondara (5.9%), Whitehorse (13.9%), Knox, (28.4%), Maroondah (11.7%) and Yarra Ranges (15.6%). Although Knox only makes up 15% of the total EMR population, this 2010-2011 data demonstrates that EDVOS sees the highest percentage of clients from this municipality compared to the others.¹⁸ As ECASA and EDVOS's capacity to provide services is capped by funding limitations, the data described above does not indicate the true extent of violence against women in the region.

References

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