

Prevalence and type of partner abuse reported by metropolitan, regional and rural women

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Background

Intimate partner violence (IPV) is a significant public health issue in Australia. IPV been identified as a major contributor to the burden of disease through its association with poor physical and mental health. Studies from Canada and the USA indicate that rural women who experience partner abuse may be subjected to more severe physical abuse and are more often sexually assaulted by their partners compared to their urban counterparts. To date there have been few Australian studies into regional differences in partner abuse, especially with regards to abuse type.

Aim

To investigate prevalence and type of partner abuse in a large population-based sample of Australian women, and to examine differences across metropolitan, regional and rural areas.

Method

This study utilises data from the Australian Longitudinal Study of Women's Health sixth survey (2012) of the 1973-78 birth cohort (n=6429, mean age 36.3yrs). Information about prevalence and type of abuse experienced in the past 12 months was gained from the Community Composite Abuse Scale (CCAS), a 28 item survey instrument that identifies four types of abuse: physical, emotional, sexual and harassment.

Past 12 month prevalence (reporting at least one positive response to a CCAS item) and type of abuse were analysed with respect to area of residence categorised as: major cities, inner regional and rural (outer regional, remote and very remote combined) areas.

Results

Past 12 month prevalence of partner abuse in the cohort as a whole was 13.7%. There was no significant difference ($p \geq 0.05$) in prevalence rates between major cities (13.6%), inner regional (14.0%) and rural (13.5%) areas.

With regards to type of abuse, there were no significant differences in the rates of reporting across regional areas for any abuse category. Emotional abuse was the most common abuse, reported by 12.5% of women in the sample. Regional rates of emotional abuse were: Major cities 12.4%, inner regional 13.0%, rural 12.3%. Physical abuse was reported by 2.5% of women, with regional figures of: major cities 2.7%, inner regional 1.9%, rural areas 3.0%. Harassment was reported by 2.8% of women, with a regional breakdown of: major cities 2.9%, inner regional 2.6% and rural areas 2.4%. Sexual abuse was reported by 0.6% of the sample, with regional comparisons being: major cities 0.4%, inner regional 0.8%, rural areas 0.5%.

Conclusion

This study contributes new knowledge about the prevalence and type of intimate partner abuse experienced by young women across different geographic regions. It reports on data from a large population-based study, and found that the prevalence of partner abuse is consistent for metropolitan, regional and rural women. There were no significant differences in the reported rates of emotional, physical sexual or harassment abuse across regional areas for women of the study cohort.

Presenter

Gina Dillon has recently completed her PhD through the School of Rural Medicine at the University of New England, Armidale. Her PhD research investigated the influence of rural, remote and metropolitan settings on the experiences of intimate partner violence (IPV) for young Australian women. Using data from the Australian Longitudinal Study on Women's Health, Gina has published a number of peer reviewed journal articles investigating geographical differences in prevalence and type of IPV, as well as the influence of IPV on self-reported health, health service use, and domestic relocation in young women from major cities, regional and more remote areas. Gina has a diverse career background spanning research in agricultural entomology, wildlife population monitoring and education in the field of adult literacy and numeracy. Outside of academia, Gina is the Director of Armidale Yoga, and has a particular interest in applying the benefits of yoga and meditation to aid the physical and mental wellbeing of people experiencing anxiety and depression, or in recovery programs for drug and alcohol addiction.