WHO Multi-country Study on Women’s Health and Domestic Violence against Women

New Zealand

1. Introduction
The Multi-country Study on Women’s Health and Domestic Violence against Women, sponsored by the World Health Organization, between 2000 and 2003 collected data from over 24,000 women in Bangladesh, Brazil, Ethiopia, Japan, Namibia, Peru, Samoa, Serbia and Montenegro, Thailand, and the United Republic of Tanzania. The Study assessed women’s experiences of violence using a questionnaire developed and validated for cross-cultural use, with a special focus on violence by intimate partners. It also investigated how such violence is associated with ill-health and injury, and the strategies that women use to cope with the violence.

In New Zealand, a replication of the WHO Multi-Country Study was carried out by staff at the University of Auckland, with the support of an Advisory Group comprising representatives from the National Collective of Independent Women’s Refuges, Preventing Violence in the Home, the Ministry of Health, the Ministry of Justice, Ministry of Social Development, A+ Health Promotion, New Zealand Police, and the Institute for Public Policy at Auckland University of Technology. Funding was provided solely by the Health Research Council of New Zealand. It was the largest population-based survey conducted in New Zealand on this issue. Data collection took place in 2003.

2. Methods
In New Zealand, a total of 1,436 women aged between 18 and 64 years were interviewed in Auckland and 1,419 in north Waikato. 26% of women in Auckland had completed university, as opposed to 16% of women in the Waikato. Women were considered “ever-partnered” if they had ever been married, ever lived with a man, or were currently with a regular sexual partner.

In the Study, the following definitions of violence were used. Physical violence meant the woman had been: slapped, or had something thrown at her; pushed, shoved, or had her hair pulled; hit with a fist or something else that could hurt; kicked, dragged or beaten up; choked or burnt; threatened with or had a weapon used against her. Sexual violence meant the woman had: been physically forced to have sexual intercourse; had sexual intercourse because she was afraid of what her partner might do; been forced to do something sexual she found degrading or humiliating.

3. Main findings
Results on prevalence of partner violence are presented for women aged 18–49 years, for comparability across countries. All other results are for women aged between 18–64 years.

3.1 Prevalence of partner violence
- 30% of ever-partnered women in Auckland and 38% in north Waikato reported physical violence by an intimate partner at some time in their life.
- 14% in Auckland and 22% in north Waikato reported that they had experienced sexual violence by an intimate partner at some time in their life.
- Combining these data, 34% in Auckland and 42% in north Waikato had experienced physical and/or sexual violence by an intimate partner at some time in their life.
3.2 Injuries inflicted by a partner

- Among women who had experienced physical and/or sexual violence by their partners, 48% in Auckland and 53% in North Waikato had ever been injured. Injuries ranged from abrasions and bruises, sprains and dislocations, ear and eye injuries, cuts, and bites to fractures. In Auckland, 24% of women who had been injured were so badly injured that they needed health care. In North Waikato, this percentage was 30%.

3.3 Non-partner physical and sexual violence since the age of 15 years

- 15% of respondents in Auckland and 17% in north Waikato had experienced physical violence by a non-partner since the age of 15 years. Fathers were most commonly mentioned as perpetrators.

- 9% of women in Auckland and 12% in north Waikato had experienced sexual violence by a non-partner since the age of 15 years. Strangers were most commonly identified as perpetrators.

3.4 Impact on women’s health of violence by a partner

- 7% of physically and/or sexually abused women in Auckland rated their health as poor compared to 3% of never-abused women; in North Waikato the rates were 7% versus 2%.

- 42% of women who had experienced physical and/or sexual violence in Auckland and 52% in North Waikato had ever thought of committing suicide compared with 17% (Auckland) and 19% (north Waikato) of non-abused women.

- Lifetime experience of intimate-partner violence was significantly associated with a range of current (within the past 4 weeks) effects on health, including: problems with activities of daily living, and other physical health indicators.

- Compared with women who had not experienced physical violence by a partner, women who experienced physical partner violence were significantly more likely to have visited a health care provider in the previous 4 weeks.

- A “dose-response” effect was noted, with women who reported experiencing severe physical violence by an intimate partner having higher risks of current ill-health than women who experienced moderate physical violence by an intimate partner. However, even the group who had reported experiencing “moderate” physical violence were at a significantly elevated risk of health problems, compared with women who had not experienced physical violence by an intimate partner.

3.5 Help-seeking by women experiencing physical and/or sexual violence by a partner

- 27% of physically and/or sexually abused women in Auckland and 22% in North Waikato never told anyone about the violence they had experienced. If they had told someone, this was usually their friends or family.

- Only 32% of physically and/or sexually abused women in Auckland and 29% in North Waikato had ever turned to formal services (health, police, religious, or local leaders, etc.).

- Women who sought help did so because they could not endure the situation any longer (56% of women who sought help in Auckland and 45% in North Waikato), or because they had been badly injured (18% in Auckland and 15% in North Waikato).