

**CENTER FOR DISEASE PREVENTION & EPIDEMIOLOGY • OREGON HEALTH DIVISION**

**HEALTH CARE PROVIDERS ARE KEY TO HELPING FEMALE DOMESTIC VIOLENCE VICTIMS**

**N**INETY-EIGHT PERCENT of abused Oregon women saw health care providers during 1998, and did so on average more than once per month. However, seventy-five percent of these women did not talk with their providers about the abusive behaviors of their partners. For these women, the health care setting represented a missed opportunity to get help. This *CD Summary* issue presents findings from the 1998 Oregon Domestic Violence Needs Assessment<sup>1</sup> which illustrate that health care providers are key to improving the health and safety of abused women and their children.

**STUDY DESIGN**

Information reported on women, their intimate partners, and their children was obtained through telephone interviews of 1,855 women 18 to 64 years of age. The study was designed to be representative of Oregon women; the women who were interviewed were selected through a stratified, random sampling technique. For the purposes of this assessment, domestic violence was defined as physical abuse only and included the physical assault, sexual coercion, and injury items identified in the Revised Conflict Tactics Scales II.<sup>2</sup>

**PREVALENCE OF PHYSICAL ABUSE**

In 1998, 13.3% or 132,800 women 18 to 64 years of age living in Oregon were physically assaulted, sexually coerced, or injured by their intimate partners. The number of acts of physical abuse experienced by women during the year ranged from one to 373. Three of every four female victims experienced more than 12 acts of abuse. These findings are consistent with three national studies that are similar in methodology to the Oregon study.<sup>3,4,5</sup>

**WOMEN WHO EXPERIENCE PHYSICAL ABUSE**

Domestic violence affects women in all regions of Oregon, and women of all social and economic groups. In 1998, ninety percent of victims were white and non-Hispanic, 63% were employed, nearly one

**1998 Prevalance and popluation estimates of domestic violence among women in Oregon**

| Type of Abuse         | Prevalence Estimate   | Population Estimate |
|-----------------------|-----------------------|---------------------|
| <b>PHYSICAL ABUSE</b> | <b>13.3% (1 IN 8)</b> | <b>132,800</b>      |
| Physical Assault      | 9.9% (1 in 10)        | 98,800              |
| Sexual Coercion       | 7.5% (1 in 14)        | 74,900              |
| Injury                | 5.0% (1 in 20)        | 49,900              |

half had at least some college education, and 43% had household incomes of at least \$35,000. However, when victims were compared with women having no history of abuse, certain characteristics were associated with a higher risk. Young and single women, women with a high school or less education, as well as women in need of financial assistance were significantly over-represented among victims of domestic violence.

The prevalence of physical abuse was highest among women 18 to 24 years of age. An estimated 25.4% of women in this age group experienced physical abuse in 1998. Prevalence decreased more than twelve-fold between ages 18 to 24 years and 55 to 64 years.

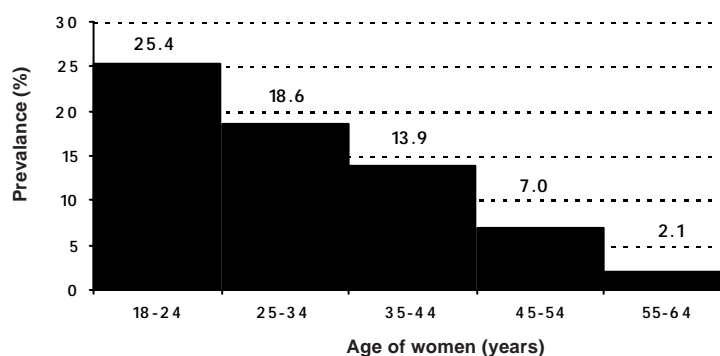
Although the risk of physical abuse was significantly higher among women 18 to 24 years of age than among older

to 24 years, 40,100 for ages 25 to 34 years, and 37,400 for ages 35 to 44 years. These population estimates suggest a similar level of actual need for services for abused women 18 to 44 years of age.

**HEALTH-RELATED PROBLEMS AND USE OF HEALTH CARE**

Physically abused women revealed more health-related problems and greater use of health care services than women who had never been abused. Physically abused women were three times more likely to have self-reported histories of alcohol use problems (16% versus 5%), and more than nine times more likely to have histories of drug use problems (19% versus 2%) than women who had never been abused. Substance use problems increased with the severity of the physical abuse, as 28% of severely abused women had self-reported histories of alcohol use problems, and 26% had histories of drug use problems. Physically abused women also reported twice as many of the past 30 days of being sad or depressed (8 days versus 4 days), being nervous or anxious (13 days versus 6 days), and of having pain limit their daily activities (4 days versus 2 days) as women who had never been abused.

**1998 Estimated prevalence of physical abuse of women by age**



women, the larger populations of women 25 to 34 years of age and 35 to 44 years of age resulted in similar numbers of abused women in these three age groups. Estimated numbers of women physically abused in 1998 were 36,400 for ages 18

Not surprisingly then, physically abused women saw health care providers about twice as often during the year as women who had never been abused (16 times versus 9 times). Moreover, physically abused women used emergency rooms

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three times as often, alternative health care nearly twice as often, mental health care more than three times as often, and alcohol and drug treatment more than five times as often as women who had never been abused.

**HELP SEEKING BEHAVIOR**

The overwhelming majority of women physically abused during the past ten years sought help, but only 21% turned to health care providers for help with the abuse. They most often turned to friends and family (80%), but also turned to police (35%), mental health care providers (34%), supervisors or coworkers (32%), clergy (23%), legal services agencies (22%), crisis telephone lines (12%), and victims' programs/shelters (11%).

Eighty-nine percent of the women who did talk to their health care providers about the abuse reported that their providers responded in a respectful manner, sixty-five percent reported that their providers offered information on services, and 34% reported that their providers offered immediate help.

**INCREASING IDENTIFICATION, TREATMENT, AND REFERRAL**

Women's advocates and professionals who encounter victims have worked hard to increase awareness of the impact of domestic violence in communities and among the helping professions. Their work has contributed to significant improvements in health care education related to domestic violence. Health care providers are unique among professionals in having contact with nearly all victims of physical abuse. These providers are key to improving the health and safety of physically abused women and their children. To this

end, health care providers must increase their identification, treatment, and referral of female patients who are abused by their intimate partners.

Health care professionals routinely screen for many conditions that are less prevalent than domestic violence, but a recent study revealed that less than ten percent of primary care physicians routinely screened patients for domestic violence during office visits.<sup>6</sup> Providers can be effective in helping victims of domestic violence by openly discussing the problem, offering help, and linking them to related services.<sup>7</sup> A 24-hour information and referral resource for providers, victims and perpetrators is 800/799-SAFE.

Providers who would like information on how to ask patients about domestic violence and refer victims are also encouraged to contact the Family Violence Prevention Fund's National Health Resource Center on Domestic Violence at 800/537-2238, or visit their website at <http://www.fvpf.org>, for cop-

ies of both *Preventing Domestic Violence: Clinical Guidelines on Routine Screening, and Improving the Health Care Response to Domestic Violence: A Resource Manual for Health Care Providers.*

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**Sources of help sought by abused women and responses of individuals and agencies**

| Women Who Sought Help From (%) | Responses of Individuals and Agencies |                                      |                            |
|--------------------------------|---------------------------------------|--------------------------------------|----------------------------|
|                                | Acted Supportive/ Respectful (%)      | Provided Information on Services (%) | Offered Immediate Help (%) |
| Friends or Family (80)         | 93                                    | 24                                   | 30                         |
| Police (35)                    | 63                                    | 35                                   | 26                         |
| Mental Health Provider (34)    | 93                                    | 55                                   | 19                         |
| Supervisor or Co-worker (32)   | 87                                    | 34                                   | 20                         |
| Clergy (23)                    | 89                                    | 35                                   | 23                         |
| Legal Services Agency (22)     | 82                                    | 35                                   | 25                         |
| Health Care Provider (21)      | 89                                    | 65                                   | 34                         |
| Crisis Telephone Line (12)     | 99                                    | 90                                   | 36                         |
| Victims' Program/Shelter (11)  | 92                                    | 85                                   | 76                         |

Data represent past 10 years.  
 Shading represents top three most favorable responses