

# Data Points

RESULTS FROM THE CALIFORNIA WOMEN'S HEALTH SURVEY

Intimate partner violence (IPV), often called domestic violence (DV), adversely affects both the individual and her family. Women who experience IPV are burdened by its impact on their safety, relationships, families, finances, and mental and physical health.<sup>1</sup>

In the 2003-2004 California Women's Health Survey (CWHS), 7,735 women responded to questions about IPV in the past year. Intimate partner physical violence (physical IPV) was defined as a "yes" response to any question about whether an intimate partner threw something at the respondent, pushed, kicked, beat, or used a knife/gun on her. Psychological-only IPV was defined as a "yes" response to any question about whether the respondent was frightened, controlled, or followed by an intimate partner, excluding respondents who also reported physical IPV. The few cases reporting forced sex but no physical IPV were dropped from analysis.<sup>2</sup>

The survey also asked respondents about the number of days in the past month that their mental health was not good, desire for profes-

sional help for mental health issues in the past year, and, for those who wanted mental health help, whether they got it. For comparisons between mental health measures and the various categories of IPV, responses of women who did not answer all eight DV questions were dropped.<sup>3</sup>

Of the women who responded to the physical IPV questions, approximately 4.3 percent reported physical IPV in the past year, and an additional 4.5 percent reported psychological-only IPV. About 13.6 percent of all respondents reported frequent mental distress (FMD), and 21.6 percent reported wanting help for mental health issues in the past year.<sup>4,5</sup>

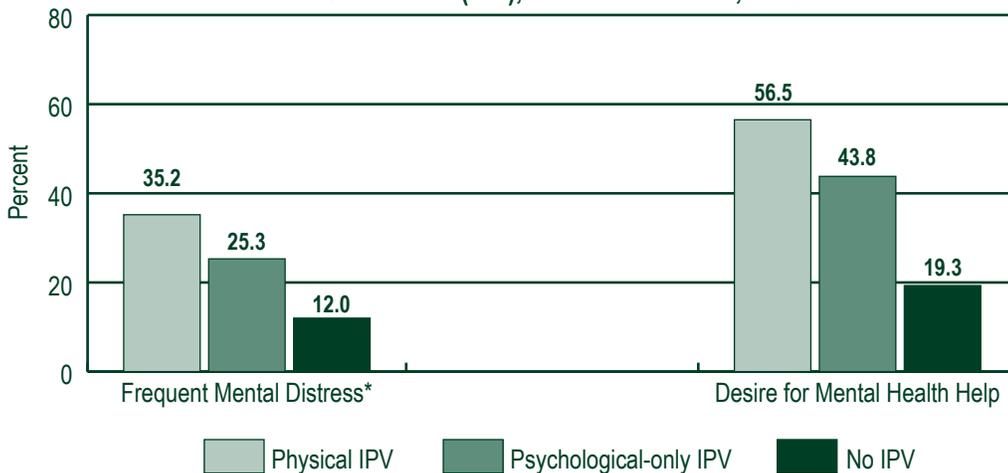
Both FMD and the desire for mental health help varied significantly among the IPV categories (see graph).<sup>6</sup> More than one-third of women with physical IPV had FMD, and more than half wanted mental health help. Of the women who had both physical IPV and FMD, almost three-quarters (71.5 percent) wanted mental health help, but less than half of this group (46.5 percent) said they got help.

## Frequent Mental Distress and Desire for Help Among California Women Experiencing Intimate Partner Violence, 2003-2004

California Department of Health Services  
Maternal, Child and Adolescent Health/Office of Family Planning Branch  
Office of Women's Health

**Public Health Message:**  
*About one-third of California women experiencing physical intimate partner violence (physical IPV) had frequent mental distress (FMD). Most women who experienced both IPV and FMD wanted mental health help but less than half of those received it. The IPV population would benefit from provider awareness and attention to their mental health issues.*

**Proportion of Frequent Mental Distress\* and Desire for Mental Health Help by Type of Intimate Partner Violence (IPV), California Women, 2003-2004**



Source: California Women's Health Survey

\* 14 or more days with not good mental health in the past month

***Frequent Mental Distress and Desire for Help Among California Women Experiencing Intimate Partner Violence, 2003-2004***

- 1 National Center for Injury Prevention and Control. Costs of intimate partner violence against women in the United States. Atlanta: Centers for Disease Control and Prevention, 2003.
- 2 n=25 (0.3 percent).
- 3 n=38 (0.4 percent).
- 4 Defined as 14 days or more of poor mental health in the past month.
- 5 Centers for Disease Control. Self-reported frequent mental distress among adults – United States, 1993-1996. MMWR. 1998,47(16):325-331.
- 6 p<0.001.

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