Abstract to be submitted for the 4th Rural Health and Research Congress

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**Congress Stream:** No 3: Social determinants of health – the changing landscape

**Abstract Title:** Intimate partner violence and self-reported health: A comparison of women living in metropolitan, regional and rural areas.

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**Background** – Intimate partner violence (IPV) is recognized as a major public health concern. IPV has been identified as a significant contributor to the burden of disease through its association with physical and mental ill-health. Regional and rural areas of Australia have reduced health and IPV related services but, to date, most Australian IPV research has focused on metropolitan areas, and the impact of reduced service access on the health of regional and rural IPV victims remains unexplored.

**Approach** – This study used data from the Australian Longitudinal Study on Women’s Health (ALSWH) to investigate self-reported physical and mental health for a cohort of over 14,000 women. The health of women with a history of IPV was compared to women without a history of IPV. Additionally, amongst IPV affected women, comparisons were made between the self-reported health of women living in metropolitan, regional and rural areas.

**Outcomes/results** – A history of IPV was associated with significantly lower self-reported health. Amongst women with a history of IPV, there was no significant difference in the mean self-reported general health scores of women from major cities compared to inner regional or rural areas after accounting for socio-demographic variables. Women from rural areas with a history of IPV had marginally higher mean self-reported mental health scores than their counterparts from major cities and regional areas.

**Take Home Message** – IPV had a significant negative impact on health for the women in the study. Despite having reduced access to health and IPV related services, victims of IPV living in non-metropolitan areas did not report worse health than those living in metropolitan centres. However, the limited support services in rural areas for victims of IPV deserves action in its own right.