



Why do family violence policies and programs focus on violence against women?

Most family violence policies and programs focus on violence against women because more women are affected¹, the impacts are more severe, and specific tailored responses are required.

- Intimate partner (or ex-partner) violence is the greatest health risk factor for Australian women under 45²
- Women who experience intimate partner violence are at higher risk of serious physical injury or death³ than men
- Violence against women is more likely to be part of an ongoing pattern of violence and control⁴
- Contributing factors to violence against women include gender inequality and community attitudes⁵.

Men experience partner violence and women can be perpetrators, although men are more likely to experience physical violence from a stranger⁶.

A focus on addressing family violence against women does not minimise the seriousness of other forms of violence which have different causes and require different interventions⁷.

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¹ "Approximately one in four women (23% or 2.2 million) experienced violence by an intimate partner, compared to one in thirteen men (7.8% or 703,700)." ABS 2016, Personal Safety Survey.

² "Intimate Partner violence has a greater impact on the health of Victorian women under the age of 45 than any other risk factor." (page 27, Victorian Health Promotion Foundation c2004, [The health costs of violence – Measuring the burden of disease caused by intimate partner violence – Summary of Findings](#))

³ [Family, Domestic and Sexual Violence in Australia, Australian Institute of Health and Welfare, 2018](#)

⁴ Michael P. Johnson (2006), 'Conflict and control: gender symmetry and asymmetry in domestic violence', Violence Against Women, Vol 12, No 11, 1003-1018

⁵ RCFV Terms of Reference

⁶ [ABS 2016, Personal Safety Survey.](#)

⁷ For example, 'one punch' attacks.