

Intimate partner violence among a cohort of homeless adults with mental illness: Prevalence and gendered patterns of risk

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Introduction

Purpose: To contribute to sparse knowledge about the relationship between intimate partner violence (IPV) and homelessness, and explore the implications for services and prevention.

Violence and abuse by intimate partners has been identified as a significant contributing factor to the origins of homelessness among women

(Canada, 2006; Netto, Pawson, & Sharp, 2009) .

In Vancouver, the number of homeless women has risen disproportionately to homeless men since 2005:

➔ women now represent 30% of the homeless population
(Metro Vancouver, 2012).

Paucity of research investigating violence perpetrated by intimates vs. strangers against homeless individuals:

➔ empirical studies examining IPV amongst the homeless mentally ill are virtually non-existent at present.

Objective: To examine gender differences in the prevalence, severity and frequency of intimate partner violence among a cohort of homeless, mentally ill adults.

Exposure to IPV has been linked to:

- repeated episodes of homelessness, revictimisation and trauma (Netto et al., 2009);
- a range of mental, physical and psychosocial outcomes (e.g., anxiety, substance misuse, sexually transmitted diseases, chronic pain, depression, PTSD);
- among mentally ill persons specifically, victimisation experiences can exasperate existing illness and have implications for service use and hospitalisation (Teplin et al., 2005).



Methods

The Vancouver At Home/Chez Soi study is investigating 'Housing First' interventions for people who are homeless and living with mental illness.

Participants were recruited between October 2009 and June 2011, and completed assessments at 3-month intervals for 2-years.

Questions adapted from the Conflict Tactics Scale-2 subscales related to IPV in intimate relationships (since age 18) were administered:

- ➔ physical assault
- ➔ sexual coercion
- ➔ injury

Pearson's chi-square tests were performed.

Total sample: 388 participants

- ➔ 105 self-identified as **female** (26.8%)
- ➔ 283 self-identified as **male** (72.2%)

Inclusion Criteria

- Legal adults (≥ 19 years)
- Absolutely homeless / precariously housed
- Current mental disorder (with or without SUD)



IPV Prevalence



Vancouver At Home Study		
61.9%	37.2%	27.6%
57.1%¹	32.1%¹	22.6%¹
General Population ²		
23.1%	22.4%	19.3%

Figures in **BOLD** indicate significant differences between women and men: $p < 0.001$

¹ Denotes multiple violent events (≥ 2 events)

² Denotes pooled prevalence of any IPV. Desmarais SL, Reeves KA, Nicholls TL et al., (2012)

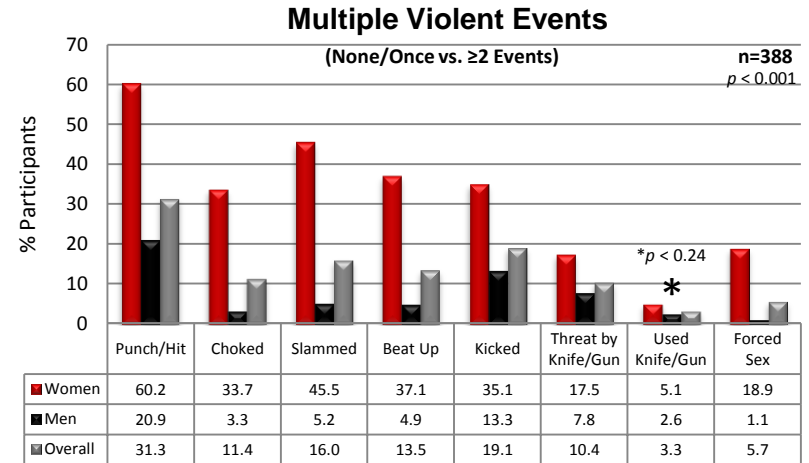
A significant gender difference in the prevalence of **any** IPV is indicated: 61.9% women vs 27.6% men.

Results

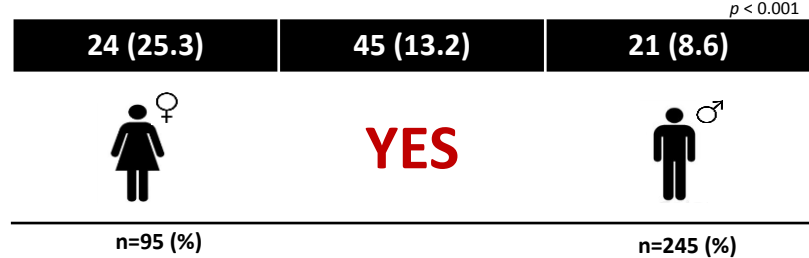
Women were significantly more likely to report physical, sexual and violent victimisation by partners; to suffer multiple events; and to report violent experience(s) as directly related to becoming homeless.

Women n=105 (%)	IPV	Men n=283 (%)
Physical Violence		
63 (64.3)	Punched or Hit	72 (26.4)
42 (42.9)	Choked	12 (4.9)
50 (50.5)	Slammed against a wall	19 (7.0)
45 (46.4)	Beat up	16 (6.0)
7 (7.1)	Burned or scalded*	6 (2.2)
39 (40.2)	Kicked	40 (14.8)
23 (23.7)	Threatened by knife or gun*	33 (12.2)
9 (9.1)	Used a knife or gun on you	19 (7.1)
Sexual Violence		
22 (23.2)	Forced into any unwanted sexual activity	4 (1.5)
Injury		
15 (15.3)	Passed out from hit on head	8 (3.0)
32 (33.0)	Went to doctor	8 (3.0)
32 (32.7)	Needed to see a doctor, but didn't	18 (6.7)
21 (21.4)	Sustained a broken bone	7 (2.6)

Highlighted figures in **BOLD** indicate significant differences between women and men: $p < 0.001$
* $p < 0.02$



Was this experience(s) relevant to you becoming homeless?



Conclusions

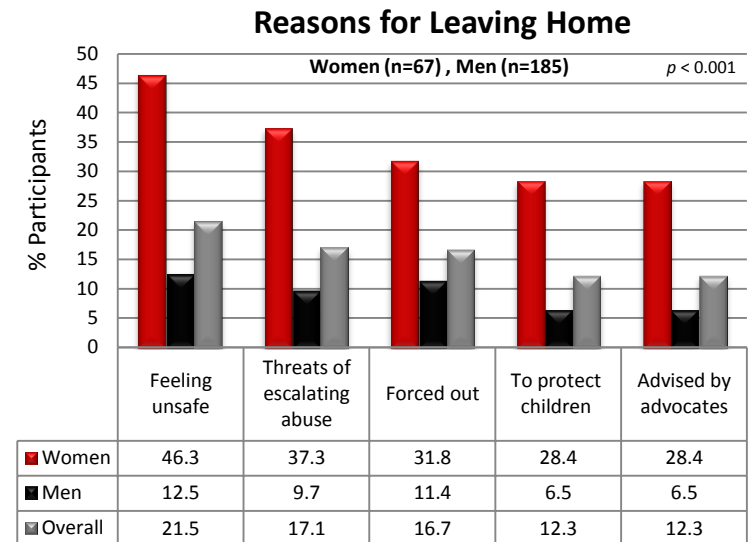
Results reveal an alarmingly high prevalence and severity of IPV among homeless, mentally ill women with implications for women's safety, housing stability, and mental health and recovery.

Findings suggest the urgency for improved access to safe and affordable housing for women.

To effectively engage women agencies should endeavour to provide trauma-informed and gender-sensitive interventions.

Future research can examine:

- ➔ the impact of IPV on the trajectories of homeless women's mental health and recovery, and effective sources of support.
- ➔ key components of housing interventions and service models that meet the safety and family needs of women who are impacted by, or at risk of, IPV.



Thank You!

Acknowledgements



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Please visit: www.mentalhealthcommission.ca

Further Information



Here at Home a webdocumentary about the At Home study produced by the NFB in collaboration with the MHCC.

Please visit: <http://athome.nfb.ca>

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