Fact Sheet: Intimate Partner Violence

**Intimate partner violence (IPV)** is a pattern of behavior in an intimate relationship – often within marriage, but also in dating relationships, or between ex-partners- where one person exerts power and control over the other person. Intimate partner violence (also referred to as domestic violence, or partner abuse) can include physical, sexual, emotional, spiritual, reproductive, economic, or psychological abuse.

**Impact of Intimate Partner Violence**

Intimate partner violence, even when it does not involve physical violence, can be extremely harmful. It includes behaviors that frighten, intimidate, humiliate, manipulate, and isolate survivors. Intimate partner violence has a range of short- and long-term consequences for survivors and negatively impacts families, communities, and the wider society.

**Do women also abuse their partners?**

Both males and females can experience IPV, but the great majority of IPV is perpetrated by men. Intimate partner violence is the exploitation of power, and men are afforded more power in society and in families. Men are also less likely to be sanctioned for abusing power.

**Will community leaders respond to IPV in contexts where it is common or expected?**

Some types and degrees of IPV are rooted in social norms and gender roles and expectations. In many communities, it is acceptable for men to punish their wives, to control their access to resources and services, to exert control over their sexuality and reproductive choices, and even to beat them for perceived transgressions. Even where IPV is normative, community leaders and others will recognize IPV as a problem when men beat their wives “too much”- that is, when the degree of violence surpasses social expectations, or when the abuse is not considered justified. Intervening in such cases is often an understood part of a community leader’s responsibilities.

**Cycle of Violence**

Severe and escalating IPV is characterized by a cycle of violence, with periods of calm that may last weeks or even years, that then escalate into episodes of violence. This cycle can be compared to weather patterns, where the calm period is sunny, then pressure builds up in the form of clouds, until the storm. Understanding the cycle of violence is important, because community leaders and others may think a situation of IPV has been “resolved” during a calm period, when really the survivor remains at risk.

**Individual Consequences**

- **Death and injury** – 42% of women who have experienced physical or sexual violence at the hands of a partner had experienced injuries as a result. These can include bruises and welts, lacerations, abdominal injuries, head injuries, fractures and broken bones or teeth, burns, etc. Severe injuries can result in death.
- **Chronic health** – Stress of prolonged IPV can cause and exacerbate ailments that may be difficult to identify or diagnose. IPV is a risk factor for many diseases and conditions, where health consequences can persist long after the violence has stopped.
- **Mental health and suicide** – Women who have experienced IPV are almost twice as likely to experience depression. IPV is linked to PTSD. Women experiencing IPV are much more likely to attempt suicide.
• **Social isolation** – Women experiencing IPV may be restricted from friends and family. Poor self-esteem and depression related to IPV also contribute to women’s loss of participation in social life.

• **Alcohol and drug problems** – Women experiencing IPV are almost twice as likely as other women to have alcohol-use problems.

• **Sexually transmitted infections** – Women who experience physical and/or sexual partner violence are 1.5 times more likely to acquire syphilis infection, chlamydia, or gonorrhea. In some regions (including sub-Saharan Africa), they are 1.5 times more likely to acquire HIV.

• **Unwanted pregnancy and abortion** – IPV is associated with unwanted pregnancy, abortion, and unsafe abortion.

**Family Consequences**

• **Violence during pregnancy** – IPV during pregnancy is linked to miscarriage, delayed prenatal care, stillbirth, premature labor and birth, fetal injury, and low birth-weight babies.

• **Children’s health** – Women who experience IPV have a 16% greater chance of having a low birth-weight baby; Studies have found children born to women experiencing IPV are 40% more likely to suffer from stunting, are less likely to be immunized, have higher rates of diarrheal disease, and are at greater risk of dying before the age of five.

• **Children’s mental health** – Many studies have found an association between IPV against women and consequences for children, including anxiety, depression, and poor school performance.

• **Children’s safety** – IPV is associated with child abuse in the same household.

• **Children’s future relationships** – Children will mirror behaviors they witness. Significant evidence indicates that boys exposed to IPV are more likely to perpetrate IPV later in life; girls exposed to IPV are more likely to be in abusive relationships later in life.

**Community/Societal Consequences**

• Social and economic costs of IPV are enormous, across all societies. Countries with lower prevalence of IPV are largely more prosperous.

• IPV contributes to poverty by limiting women’s mobility and ability to work.

• IPV contributes to family disputes and separations.

• Women who experience IPV can face varied consequences and housing insecurity; may require community/social support.

• IPV affects children and future generations, where consequences are compounded and repeat.