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Publication Date

2011-07-15



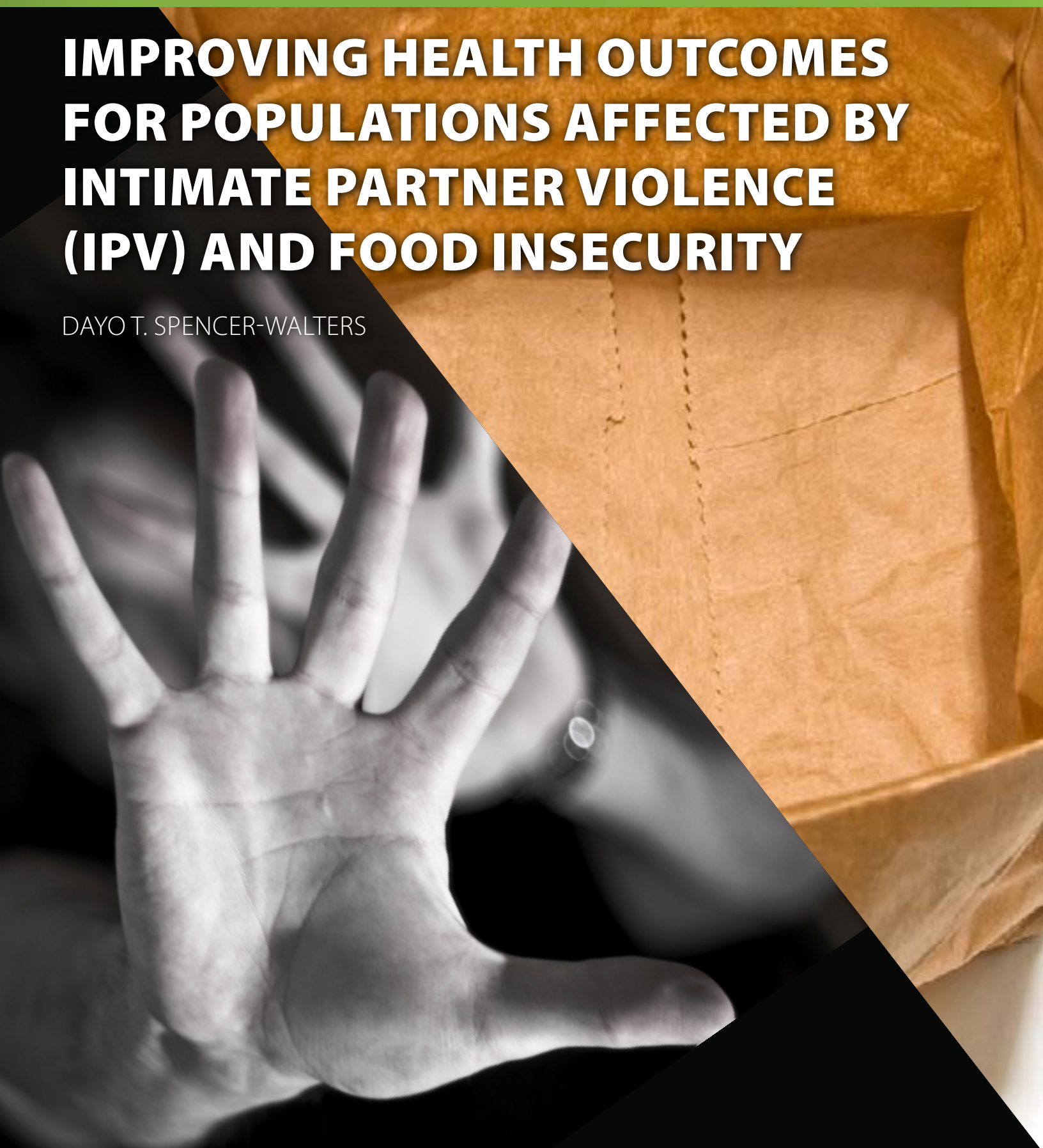
September 2011

Policy Brief 5

RETHINKING POLICY ON GENDER, SEXUALITY, AND WOMEN'S ISSUES

IMPROVING HEALTH OUTCOMES FOR POPULATIONS AFFECTED BY INTIMATE PARTNER VIOLENCE (IPV) AND FOOD INSECURITY

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IMPROVING HEALTH OUTCOMES FOR HOUSEHOLDS AFFECTED BY IPV AND FOOD INSECURITY

Reducing food insecurity and intimate partner violence (IPV) are both objectives of Healthy People 2020, a national plan put forth by the Department of Health and Human Services to improve the health of Americans. Monitoring populations who are at risk for both is a first step toward addressing a pressing public health and social justice issue.

STUDIES have shown that both food insecurity and intimate partner violence (IPV) are correlated with increased reports of poor health among sample populations throughout the U.S. Among those who experience food insecurity, the rates of IPV experience are significantly higher. Although IPV and food insecurity are experienced across all genders, races, ethnicities, and families, they are manifested differently across these populations and, perhaps, reflect a structural violence that maintains oppressive social, economic, and political constructions.¹

Data from the California Health Interview Survey (CHIS)² and California Women's Health Survey (CWHHS) indicate that populations at high risk for both IPV and food insecurity include women, racial and ethnic minorities, and single women with children.

Women: The rates of food insecurity among men and women who have experienced IPV since the age of 18 are roughly the same: 62.7% and 58.5% respectively and are proportionally higher than rates of food insecurity among those who had not experienced IPV. Because women are twice as likely to experience IPV as men, however, the absolute number for women who have experienced IPV and are food insecure is twice that for men.

Racial/Ethnic Minorities: CHIS and CWHHS data shows that 74.7% of African-American women who had experienced IPV within the last 12 months were also food insecure. Additionally, levels of food insecurity and instances of

IPV vary by racial/ethnic group. For instance, in 2005, the level of food insecurity among Latinas in California at or below 200% of the FPL was 59.2% and for African American women in the same category the level of food insecurity was 54.7%. For white women in the same category the level of food insecurity was 37.1% and amongst Asian women the level of food insecurity was 32.6%. Data from 2007 showed that instances of IPV were more likely in African American and Latina populations. Racial and ethnic populations that experience IPV at higher rates also have higher rates of food insecurity.

Single Women with Children: Single women who had experienced IPV and had children in their households were more likely to be food insecure (67.3%) than married women with children who had experienced IPV (41.6%). Again, these rates differ across racial/ethnic populations: 74% of African-American single women who had ever experienced IPV were also food insecure, and 67% of Latina single women and 93.7% of "other/mixed" single women who had ever experienced IPV were food insecure.

RECOMMENDATION

A first step toward reducing the rates of both IPV and food insecurity and thereby improving health outcomes for at risk populations is financial and structural support for surveys and research to monitor IPV, food insecurity, and the relationship between them. Maintaining accurate and

up-to-date data is the first step in creating comprehensive resources for service providers and for the communities most affected.

Dayo T. Spencer-Walters recently earned an M.P.H. in the Department of Community Health Science in the UCLA School of Public Health and was a graduate student researcher at the Center for the Study of Women at UCLA. Photo credits: WendellandCarolyn and Roob/iStockphoto.com

NOTES

1. Domestic Violence in the Lives of Women Receiving Welfare: Mental Health, Substance Dependence, and Economic Well-Being, R. Tolman et al., *Violence Against Women*, volume 7 issue 2, pages 141-158, 2001; and Food Insufficiency and Material Hardship in Post-TANF Welfare Families, M.E. Corcoran et al., *Ohio State Law Journal*, volume 60, issue 4, pages 1395-1422, 1999; Food Insufficiency and the Physical and Mental Health of Low-Income Women, K. Siefert et al., *Women & Health*, volume 32 issue 1, page 159, 2001

2. *California Health Interview Survey (CHIS)*, UCLA Center for Health Policy Research, 2009. <<http://www.chis.ucla.edu/default.asp>> URL accessed July, 2011; *Nearly Four Million California Adults Are Victims of Intimate Partner Violence*, California Health Interview Survey (CHIS), UCLA Center for Health Policy Research, 2007. <<http://www.healthpolicy.ucla.edu/pubs/Publication.aspx?pubID=402>> URL accessed July, 2011.

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