The Costs of Intimate Partner Violence in California

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1. INTRODUCTION AND MOTIVATION

Violence, including gender-based violence, community violence and policing, and gun violence, remains at epidemic proportions in the United States (US) and in California, as highlighted in a recent report by the Center on Gender Equity and Health at the University of California San Diego and Newcomb Institute of Tulane University (Raj et al., 2023). The California Violence Experiences (CalVEX) Survey data suggest that nearly half of all women in California will experience intimate partner violence (i.e., emotional, physical, or sexual violence from a current or former romantic or sexual partner) in their lifetime. One in 16 Californians experienced intimate partner violence (IPV) in 2023 alone.

In this report, we explicate the costs of IPV against women in California to provide evidence for policy debates and to build support to address the scourge of IPV in the state.

Both the U.S. and California have legislation supporting women's freedom from violence, recognizing it as both harmful and costly (D'Inverno et al., 2018). Preventing IPV not only advances our commitment to human rights for victims and their children, it also benefits human development, economic growth, and business (Duvvury et al., 2013).

The 2019 Justice for Women report (UN Women et al., 2018) makes the case that investments in violence prevention can help states avoid the major costs associated with such violence. Globally, it is estimated that violence against women can cost up $1.5 trillion annually, which corresponds to 2% of the worlds GDP (UN Women, 2016). Despite these astronomical estimates, we found no published work in the past decade quantifying the costs per IPV incident in the United States.

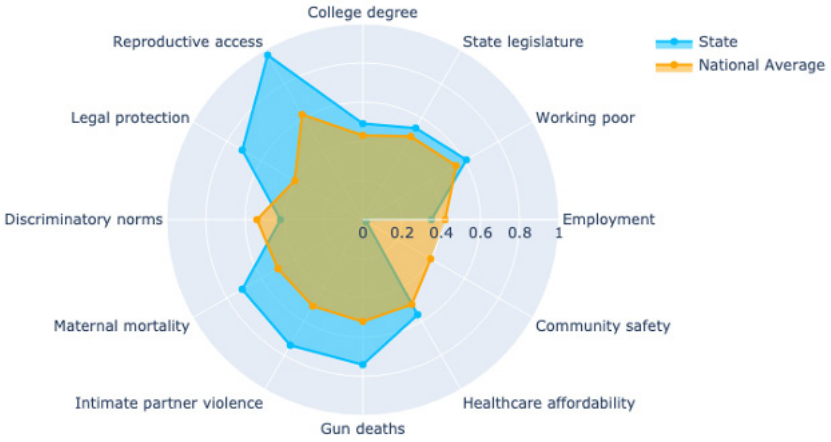
It is widely accepted that survivors of violence encounter health costs, economic costs from lost earnings, productivity loss, and lost opportunities, causing them severe financial hardship (Duvvury et al., 2013). These costs affect women and families, particularly children who witness violence (Hoeffler and Fearon, 2018). States also incur service provision costs related to violence.

This report leverages novel data and the best available methods to generate a comprehensive quantification of the costs of IPV in California. The primary data come from the 2023 CalVEX survey data, the only California state representative study of its kind, with a focus specifically on violence including IPV (Raj et al., 2023). These data surveyed California adults between March and May 2023 to garner an estimate of the prevalence of past-year violence from a current or former romantic or sexual partner. Based on the CalVEX prevalence data, we estimate that IPV cost the State of California approximately 73.7 billion in 2022, which works out to about $88,019 per victim.

The structure of the report is as follows. We describe the context of California in terms of value and treatment of women, as captured by the US Women Peace and Security Index (GIWPS, 2020) and the CalVEX Study (Raj et al., 2023). We then provide a brief overview of the costing findings followed by the methods, detailed results, and study limitations. We conclude this report with discussion of the high-level findings from this work and implications for policy.

2. THE CALIFORNIA STATE CONTEXT FOR WOMEN

Figure 1: How California scores on key elements of women's inclusion, justice, and security



Source: GIWPS (2020).

Well-being is multidimensional: incomes are important, but so is political voice, education, and access to sexual and reproductive rights, as well as security at home and in the community. The US Women Peace and Security Index, a comprehensive measure of women's wellbeing, rights and opportunities across 50 states and Washington DC, recently ranked California 15th of all the US states; it earned a score of 0.564 on a 0–1 scale (GIWPS, 2020).

California performed above the national average (0.486) overall. The state ranked better on all indicators included in the index, except full-time employment, discriminatory norms and community safety. Overall, California performed well on the justice dimension with a sub-index score of 0.702, while its sub-index scores for inclusion and security are 0.498 and 0.514, respectively; US sub-index scores were 0.471 for inclusion and 0.484 for security.

California has done well in extending protections and expanding opportunities, and individual attitudes and norms are generally supportive of gender equality. It is among the 33 states that have ratified the Equal Rights Amendment, signaling support for women's rights and equality. It is also one of only 17 states that have passed laws protecting workers from sexual harassment regardless of company size. California even takes it further with laws requiring employers with at least five employees to conduct workplace training on sexual harassment. The share of working women in poverty in California is around the national average, of 12 percent. California has state minimum wage of $15.5 hourly, or about $32,240 based on full-time work.

Women in California have relatively good access to reproductive healthcare, particularly given the current political climate allowing for state control over abortion access. California, with three other states (Connecticut, Hawaii, and the District of Columbia), have the highest access rates: 19 in 20 women live in a county with an abortion provider.

Despite these gains, California maintains stark gender gaps in areas like employment, the state legislature, discriminatory norms, and community safety. The gender gap in full-time paid employment is marked: 40.5 percent of California

women are fully employed, compared to 58.4 percent of men. The share of seats held by women in both chambers of the state legislature, known as the state assembly, is also less than half that of men (31.7 percent women and 68.3 percent men). Discriminatory norms also limit women's progress. One third of men in California and 22.2 percent of women in California believe it's best for men to be the breadwinner while women stay home.

California is one of the most racially diverse states in the US, second only to Hawaii (US Census 2021). However, data from 2020 US Women Peace and Security Index sill revealed significant racial/ethnic disparities. While the maternal mortality rate is low by US standards, there is a relatively large racial gap, with maternal mortality rates at 64 deaths per 100,000 live births among Black women, compared to 17 deaths per 100,000 live births among white women. Finally, community safety affects women's mobility and opportunities outside the home, as about 59 percent of women reported being afraid to walk alone at night within a mile of their neighborhood, compared with 34 percent of men.

Data from the 2023 CalVEX Survey (Raj et al., 2023), the statewide survey on violence in California described earlier, document that IPV is a major concern in the state, with one in 30 California women (3 percent) reporting physical and/or sexual IPV in the past year. This amounts to more than 450,000 California affected women. Around 4 percent of women reported past year emotional intimate partner violence. Almost 37 percent of women reported a history of physical and/or sexual IPV ever.

Current rates of IPV vary across different demographic groups:

- Past-year IPV is double the state average among young adult Californians aged 18–24 years (6 percent).
- Californians identifying as lesbian, gay, bisexual, or other self-described sexual identity were twice as likely to report past-year IPV (7 percent) relative to straight respondents (3 percent).
- Latinx Californians (4 percent) were twice as likely as Black (2 percent), white (2 percent), and Asian (2 percent) Californians to report past-year IPV.
- Past-year IPV rates were highest among those with less than a high school diploma (7 percent), while rates were similar among those with a high school diploma or GED (3 percent), college attendees (2 percent), and those with a graduate degree (2 percent).

IPV rates were similar across location (metropolitan vs non-metropolitan) and household income.

These data also show that socially and economically vulnerable Californians—including people with a history of homelessness or incarceration and people living with a disability—face disproportionate levels of IPV.

- Californians with a disability were three times more likely than those without disabilities to report past-year IPV (7 percent vs 2 percent).
- Californians with a history of homelessness were four times more likely compared to those without this history to report a history of past-year IPV (9 percent vs 2 percent).
- Californians with a history of incarceration were five times more likely as those without this history to report past-year IPV (11 percent vs 2 percent).

3. THE COSTS OF INTIMATE PARTNER VIOLENCE: A REVIEW OF THE EVIDENCE

Governments spend large amounts of public money to prevent and respond to violence. The costs of violence are also borne by individuals and families, in terms of health care, loss of income, and pain and suffering (IWPR, 2017). A better understanding of the costs of societal ills—in this case, IPV—can attract the interest of the public and policymakers and inform the prioritisation of budget allocations. Costing exercises have been conducted to assess the cost of gun violence in the US. Everytown, The Trace and others have attracted media and policy interest, and they have contributed significant knowledge about the costs of gun violence in the US for survivors, families, and taxpayers, without denying the massive human tragedy inherent in these numbers.

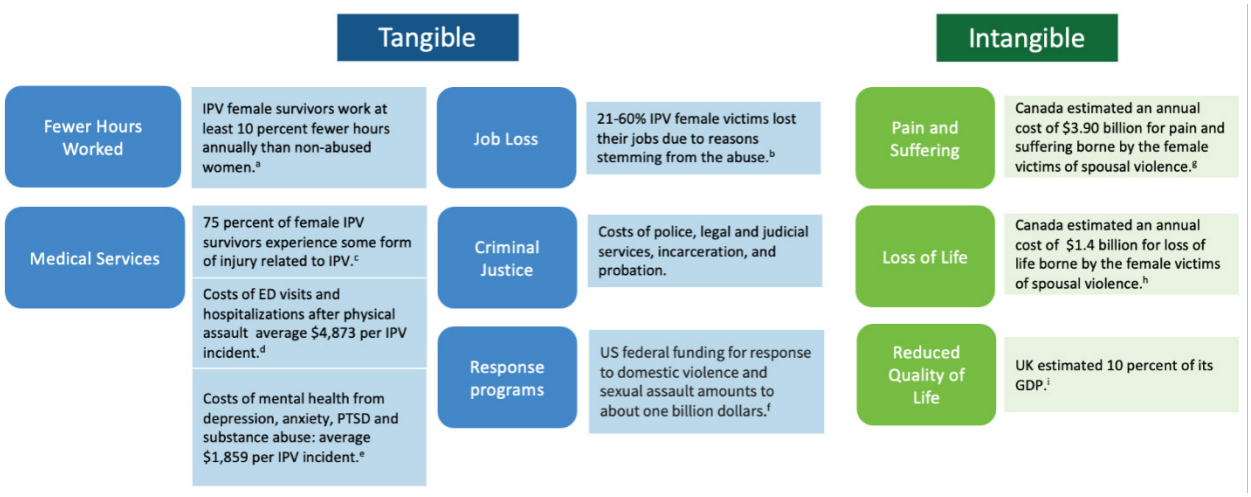
Investigations into the economic costs of intimate partner violence have been undertaken by the IMF (Quedrogo and Stenzel, 2021), the World Bank (Klugman et al., 2014; Duvvry et al., 2013), the United Nations, national governments, and academic researchers (Klugman et el., 2014). The World Bank has estimated the tangible costs of IPV—which can include income loss, medical costs, costs of policing, costs associated with the broader criminal justice system—at around 1.5 percent of GDP, which is equivalent to what many countries spend on primary education. Estimates for Vietnam, Bangladesh, and Uganda range between one and two percent of GDP (Klugman et al., 2014), using survey data to establish the costs of domestic violence, focusing on the number of workdays lost from the type of violence, as well as the costs of medical treatment, police costs, legal support, counseling, and judicial services (Duvvury, Carney, and Nguyen, 2012). Estimates by the UK Home Office—limited to tangible costs—figure the cost for a single victim of domestic abuse at £34,015, totaling £66 billion pounds (about $85 billion) or about 3 percent of GDP in 2017 (Oliver, Alexander, Roe, and Wlasny, 2019). Hence, IPV costs nations about 1.5–3 percent of their GDP.

A report commissioned by the Canadian government estimated the total economic impact of spousal violence to be approximately $7.4 billion, amounting to $220 annually per Canadian. About 7.3 percent ($545.2 million) of these costs were incurred by the judicial and criminal justice system, including policing services, courts, and legal aid. The bulk—$6 billion—was borne by the primary victims. Intangible costs of pain and suffering and loss of life accounted for over 91 percent of that number. Tangible costs—due to medical care, hospitalizations, lost wages, missed school days, and stolen/damaged property—amounted to $525 million (Zhang et al., 2012).

Figure 2 outlines the major costs of IPV, distinguishing between tangible and intangible costs. On the tangible side, the key channels are the reductions in hours worked and in productivity per hour worked, lower longer-term labor supply and lowered investments in physical capital due to higher current costs of health and judicial services. The timeframe of one year is appropriate for many types of injury, but overlooks the long-term physical and mental health consequences, which could be large (Peterson et al., 2021).

In conceptualizing and measuring the costs of violence, an important basic distinction is between tangible and intangible costs. Tangible costs include loss of income, medical costs arising from injuries, and the costs of policing and the criminal justice system. Spending for health services associated with IPV can include emergency department visits, hospitalizations and outpatient visits, services of physicians, dentists, physical therapists, mental health

Figure 2: What we know about the costs of IPV: a snapshot of U.S. and global evidence



Sources and notes: Authors, based on [a] Tolman and Wang (2005); [b] Rothman et. al. (2007); [c] CDC (2022); [d, e] National Center for Injury Prevention and Control (2003) and US Inflation Calculator. Costs are adjusted to 2022 dollars using healthcare inflation rates; [f] FVPSA American Rescue Plan Program (2021); [g, h] Zhang et. al. (2009) and Bank of Canada Inflation Calculator. Costs are adjusted to 2022 dollars; [i] Santos (2013).

professionals, and ambulance transport and paramedic assistance.

In the absence of detailed facility level data, health-related costs can be assumed based on expected costs per incident. For example, a careful and comprehensive study estimated 2015 costs for the US from the individual perspective based on two publicly available data sources—Healthcare Cost and Utilization Project hospital discharge databases and MarketScan medical claims databases—which enabled very large sample sizes (e.g. 818,053 non-fatal injuries, and a much larger control groups) (Peterson et al., 2021). The time horizon for fatal costs was the emergency department visit or hospitalization which ended in death, and the time horizon for non-fatal costs was one year. The mean cost of fatal injuries was $40,650. Table 1 presents the most recent CDC estimates of medical costs of violent-related injuries, showing that much higher costs are incurred in the event of hospitalization, especially in the cases of non-fatal injury.

Lost income or productivity can be quantified using data on the number of days of work missed. These are the number of days where a survivor was unable to perform paid work and/or unpaid domestic labor (including household chores and childcare for women not employed outside the home) because of illness, injury, or disability related to violence. In 2003, the CDC estimated that US survivors of IPV lose a total of eight million days of paid work each year, and between 21–60 percent of survivors of IPV lose their jobs due to reasons stemming from the abuse (CDC, 2003).

Table 1: Average medical cost of fatal and non-fatal injuries in the USA, 2022

Fatal injury due to homicide	
All Medical Costs	$10,960
Non-fatal injury due to assault	
Emergency department	$8,082
Hospitalization	$91,278

Source: CDC (2021) and US Inflation Calculator. Fatal injury medical cost and non-fatal injury medical cost are adjusted by the authors to 2022 dollars using health care inflation rates.

Intangible costs of IPV include pain and suffering, and reduced quality of life. Estimates of intangible costs per violent incident are much larger than tangible costs. For the UK, estimates inclusive of loss of life satisfaction amount to about 10 percent of GDP (Santos, 2013).

Several studies focus on the costs of IPV incurred by individuals in the United States, but these are from the 1980s to the early 2000s. A national study produced by Peterson et al. (2018) estimates the lifetime economic burden of IPV among US adults. Earlier national reviews include work by the Institute for Women's Policy Research (IWPR, 2017) and the Centers for Disease Control and Prevention (CDC, 2003), which use state-level and community data from the 1980s and 1990s to estimate the range of physical and mental health, and economic costs incurred by IPV. The 2003 CDC report presents annual data about IPV and its costs, generalized from data on the incidence of intimate partner violence in 1995 and the costs associated with those victimizations. The IWPR (2017) study incorporates medical expenditures, wage loss resulting from diminished educational attainment, missed work and job loss, debt and poor credit, and costs associated with housing instability. These studies underscore the value of considering the medium- and long-term repercussions of violence (e.g., future educational attainment and future job loss).

4. THE COSTS OF INTIMATE PARTNER VIOLENCE IN CALIFORNIA

Our study is one of the first state-level estimates of the *annual costs of intimate partner violence* (IPV) in the US. Miller et. al, (2018) assessed the cost of sexual violence in California, focusing on violent incidents experienced by both men and women that occurred both inside and outside the home, and including child rape. They rely on 2012 cost data to produce an estimate of per incident costs in the state. By contrast, we produce an estimate of the annual costs of IPV in California using 2022 data on the prevalence of physical, sexual, and emotional violence perpetrated against women aged 18 and over by a current or former intimate partner. Our study differs from existing efforts to quantify the costs of violence against California women in our production of an annual estimate and our inclusion of a range of types of IPV. Importantly, focusing on the annual cost of IPV allows us to compare our estimates directly to annual budget spending.

Costing Findings

The total costs to California, in dollars, approached $73.7 billion in 2022, as shown in Table 2. This is a cost of $88,019 per victim. This annual total cost is calculated for female victims and survivors of IPV, and their associated offenders, based on prevalence rates provided by 2023 CalVEX survey.

We assume for the purposes of calculating costs, that survivors who reported experiencing violence in the past 12 months experienced only one incident. This assumption likely underestimates the true cost of IPV since domestic abuse incidents are rarely isolated; 10–18 percent of arrested perpetrators are detained again within six months for a repeat offence (Flannery, 2022).

Tangible Costs

This calculation encompasses costs incurred within the year 2022, including best estimates of medical costs, police expenses, legal fees and expenditures on related response programs. A one year time frame is appropriate for many types of injury, and allows for comparisons with annual GDP and budget spending, but risks ignoring the long-term physical and mental health consequences, which could be large (Peterson et al., 2021). For costs extending beyond the current year, such as lost earnings for deceased victims and offenders sentenced to jailtime, or corrections expenses for the same group of offenders, we employ the concept of net present value (NPV) to determine their current cost. It is important to note that the total IPV cost will vary over time with changes in the prevalence rate, as well as in the associated health and other costs.

Table 2: The tangible costs of IPV in California, 2022, millions of dollars

	Medical Costs	Lost Earnings	Criminal Justice	Response Programs*	Total Cost
Fatal Injury	$0.85 m	$344.64 m	$254.31 m		$599.80 m
Non-fatal Injury	$46,125.99 m	$13,618.54 m	$13,226.33 m	$157.98 m	$73,128.84 m
Sexual Assaults	$4,802.84 m				
Physical Assaults, excluding gun violence	$39,464.74 m				
Gun violence	$4.06 m				
Emotional violence	$1,854.35 m				
Total	$46,126.84 m	$13,963.18 m	$13,480.64 m	$157.98 m	$73,728.64 m

Note: * This includes state domestic violence funding for fiscal year 2021-2022.
Source: Author estimates based on sources shown in Annex 1.

Table 3: The tangible costs of IPV as a share in California, 2022

	Percent State Budget	Percent State GDP	Per Survivor ($)
Fatal	0.14%	0.02%	$716
Non-fatal	16.54%	2.01%	$87,303
Total	**16.67%**	**2.02%**	**$88,019**

Source: Authors' estimates based on sources shown in Annex 1.

Table 3 presents the cost estimates in terms of the share of the 2022 state budget, state GDP and for each survivor. Figure 3 then offers a comparison of the dollar costs to the amounts being allocated in the California state budget. This picture underlines the enormity of the costs—almost 17 percent of the budget—which is nearly the amount allocated to Kindergarten through Grade 12 education in California (California State Budget 2022–2023). IPV is also more costly than budget allocations to higher education, transportation and the general government spending category combined. As a share of state GDP, the figure is comparable to the World Bank's estimates for the cost of IPV in Vietnam, for example. Per survivor monetary costs are also huge—approaching $88,019 annually—which is about 1.5 times the average wage earned by women in the state.

Most of the costs come from non-fatal injuries caused by IPV. Figure 4 provides a birds-eye view of where these costs arise—showing that the vast bulk of the total tangible costs of IPV in California can be traced to health costs (about 62.6 percent), followed by the criminal justice system (18.2%), and then lost productivity (19.0 percent of total). By comparison, relatively little is earmarked for survivor support.

Methodology

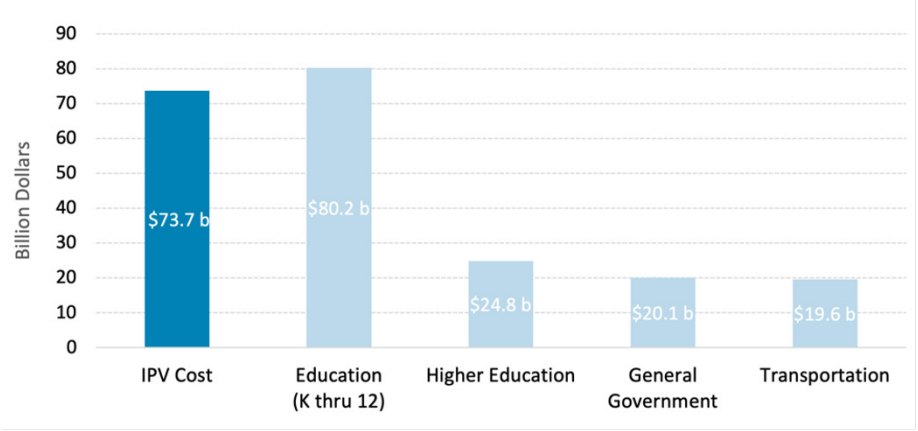
We now turn to explain the approach, data and methods used to arrive at these estimates, beginning with the costs associated with fatal IPV, or femicide, and then turning to non-fatal costs.

Fatal IPV Costs

The total fatal tangible costs arise from our best estimates for medical costs, the loss of income for both the victims and the perpetrators, and the criminal justice costs of incarceration of the perpetrators, their legal fees as well as policing expenses in 2022. Medical costs and criminal justice costs are considered direct costs, while the loss of income is counted as an indirect cost.

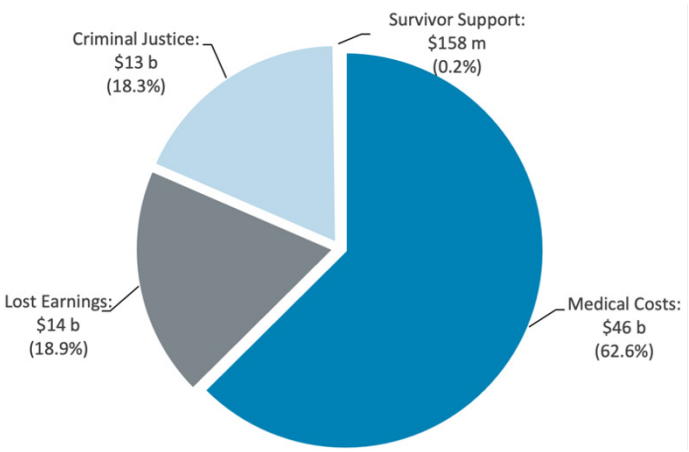
To estimate the medical costs associated with fatal injuries resulting from IPV, we first distinguish fatal violence caused by a firearm from deaths caused by other means. According to the FBI's

Figure 3: Estimated costs of IPV in California relative to selected state funds, 2022



Source: Authors' estimates based on sources shown in Annex 1.

Figure 4: Breakdown of total tangible costs of IPV in California, 2022



Source: Authors' estimates based on sources shown in Annex 1.

Crime Data Explorer, California recorded 95 female homicide victims killed by intimate partners in 2022, with 51 of these fatalities attributed to gun violence (FBI Crime Data). According to the CDC (2021), the average medical costs for firearm-related homicides amount to $8,350 per injury, whereas general homicides incur an average cost of $9,598 (see Table A.1). Figures here are adjusted to 2022 dollars. In 2021, for females, average medical costs per injury is 8,029 dollars for homicide by firearm and 9,229 dollars for general homicide. Healthcare inflation rate of 4 percent in 2022 is applied to adjust the costs to 2022 dollars. As a result, the total medical costs for fatal injuries reach nearly $848,763 (see Table 2).

To calculate the loss of productivity for female IPV victims who were killed, we assess their discounted lifetime earnings, both those who were part of the paid labor force and who were not. According to the Bureau of Labor Statistics (BLS, 2022), female labor force participation in California is 55.3 percent. The total number of female IPV victims was 95, so we estimate that 52.5 female victims were full-time employees (95 multiplied by 55.3% is 52.5) (See Table A.2).

Data from the American Community Survey (ACS, 2022) reveals that in 2022, the median annual earnings for full-time female employees in California was $59,731. For those not participating in the labor force, engaged in unpaid work at home, we apply the state minimum hourly wage of $15.5 per hour, equating to an annual income of $32,240.

To account for the time lost, we subtract the life expectancy of women in California—83.3 years old (NVSR, 2022) from the median age at the time of death—32 years old (California DOJ, 2022), which approximates to 51.3 years. A long-term inflation rate of 2 percent is applied each year to account for income increases. We calculated the net present value (NPV) of the lost earnings. As a result, the total costs attributed to the lifetime loss of earnings amount to nearly $229.7 million (see Table A.2).

To quantify the loss of productivity that results for perpetrators, we employ a methodology similar to that used for the victims. We compute the NPVs of the loss of earnings for individuals officially convicted and serving prison sentences, assuming total loss of income during their incarceration. As noted, 95 female homicide victims were killed by intimate partners (FBI Crime Data 2022). We assume an equal number of males were responsible for these crimes.

The California Department of Justice's 2022 Homicide in California report indicates that 0.09% of the homicide cases resulted in death penalty (California DOJ, 2022). Using the same source, the homicide arrest rate is estimated to be 67.3%. We applied this rate to IPV homicide cases and assumed that arrested offenders all received jailtime. This yields an estimate of 63.9 prisoners that will go to jail for fatal IPV offences. Under California state law, if found guilty of first-degree murder or second-degree murder in the state, the median sentencing is 26.6 years. This is likely an overestimate, since not all arrested perpetrators would be convicted and/or receive the median sentence.

The median annual earnings for full-time male employees in California were reported as $67,700 in 2022 (ACS, 2022). To factor in the time lost due to incarceration, we subtract the life expectancy of men in California—78.4 years (NVSR, 2022) from the median age at the time of crime—27 years old (California DOJ, 2022), which approximates to 51.4 years, leading to an estimated NPV of lost incomes of the all the perpetrators convicted of fatal violence at $114.58 million (see Table A.2). Note: We assume each perpetrator is male. If we instead assume women perpetrated these fatal crimes, the total loss of earnings would still stand at $101.37 million.

The estimated costs of incarceration for these 63.9 prisoners follow a similar methodology. According to the Bureau of Justice Statistics (2022), the Department of Corrections in California spent an average of $131,300 per prisoner in 2020 (equivalent to $149,623 in 2022). As a result, for prisoners responsible for fatal IPV with estimated sentences, the NPV of the accumulated criminal justice costs approach $253.2 million (see Table A.3). Note: When estimating correction costs, we have omitted expenses arising from individuals sentenced to the death penalty due to their relatively low numbers. Nonetheless, it is recognized that individuals on death row may ultimately incur higher costs within the criminal justice system.

Legal fees arise for perpetrators and survivors in the criminal justice system. We used published estimates for the cost of experienced domestic violence attorneys (Dlewis and Dickenstien, 2020), which range from $3,500–$15,000 in 2020 (equivalent to $3,988 and $17,093 in 2022). Using the high end of this range for the 64 perpetrators accused of murder, the total attorney costs amount to over $1.1 million (see Table A.3). Note: If we change the attorney fees to $3,500 ($3,988 in 2022 dollars), the total attorney costs for fatal crimes for perpetrators is $255,000.

In sum, the costs arising from fatal IPV for women in California amount to $599.8 million annually, which is equivalent to 0.02 percent of the state GDP (see Table 2 and Table 3). We underline that this estimate is limited to tangible medical costs, the costs associated with the loss of productivity, and criminal justice. It excludes pain, suffering, and emotional costs for families affected by femicide, which we consider intangible.

Non-fatal IPV Costs

Aggregate non-fatal costs comprise medical costs, loss of income, criminal justice costs and spending on programs responding to violence.

Data from CalVEX (Raj et al., 2023) indicate that the number of IPV events in 2023 were as follows: 67,012 cases of sexual violence, 438,591 cases of physical violence excluding firearm-related assaults, 32 cases of firearm-related violence, and 326,682 cases of women showing moderate to severe depression/anxiety symptoms (see Table A.1). Given these estimates are based on survey data, they exclude data on fatal IPV experiences.

First, we use CDC data (2021) to estimate the medical costs for female injuries due to physical and sexual violence. These data provide detailed

medical cost breakdowns for these types of injuries, distinguishing between emergency department (ED) visits and inpatient stays. In 2022, the average inpatient medical cost per injured person is $64,627 for sexual assaults, and $82,403 for physical assaults. The average ED visit medical cost per injured person is $7,045 for injuries for sexual assaults, and $7,577 for physical assaults. For firearm-related injuries, estimated per person for ED visits and inpatient charges, averaged $5,254 and $95,887, respectively, in 2015. These figures are adjusted for healthcare inflation rates at 2022 values, resulting in $6,595 and $120,356, respectively. Table A.1 shows the sum of ED visit and hospitalization costs for each assault category.

For medical costs on mental health, we use information from nonprofit Kaiser Family Foundation (2021) on the average cost of mental health in California, which approximated to $5,458 per patient in 2021, which we adjusted to 2022 dollars using the US healthcare inflation calculator, indicating costs of $5,676 per patient (see Table A.1).

By multiplying the number of incidents by their respective associated medical costs of sexual and physical assaults, as well as the treatment of associated mental health symptoms, the costs amount to $46.1 billion (see Table 2), or about 1.3 percent of the state's GDP.

Second, to estimate tangible costs arising from lost earnings, we categorize female IPV survivors into two groups: those in full-time employment and those in unpaid positions. According to CalVEX (2023), the prevalence rate of IPV among women who have experienced any of the 22 forms of violence was 5.5 percent in 2023, equivalent to 837,647 female survivors in California. After applying the state's female labor force participation rate of 55.3 percent (ACS, 2022), we can conclude that approximately 463,219 women were full-time employees, while 374,428 were in unpaid roles. Utilizing the same earning sources as in the fatal loss of income calculation, median weekly wage for full-time female workers is $1,149 and, for unpaid female labor, it is $620. Under California's Family and Medical Leave law, the maximum allowed paid medical leave is 12 weeks in a 12-month period. Assuming 12 weeks of lost work for IPV women survivors amounts to a loss of productivity of $9.2 billion (see Table A.2).

There is also a loss of earnings from perpetrators convicted of non-fatal IPV. Unfortunately, we were unable to identify state-level, or large-scale national data, on the share of domestic violent events that are reported to the police, and result in conviction. However available evidence suggests that the conviction rates are very low. For the US, among 517 cases of domestic violence in a nationally representative survey, only 2 percent of cases resulted in imprisonment of the perpetrators (Hamby, 2014). This happens for a series of reasons, beginning with non-reporting to the police, police failure to investigate or make arrests, or criminal charges not being filed. We use the 2 percent rate as the estimated share of non-fatal IPV cases resulting in jail time, yielding an estimate of 16,753 men that would be incarcerated for non-fatal IPV-related crimes.

Under Californian's state penal codes, domestic battery is generally punishable by a fine of up to $2,000 and a maximum of one year in jail (KCLGa,b). Domestic abuse resulting in corporal injury is a felony. If convicted of the offense, it can include up to 4 years in prison and a fine of up to $10,000. The maximum sentence of 4 years of imprisonment is applied to represent lost productivity. We assume these convicted males were employed full-time before their incarceration. To estimate their earnings, we apply the annual median earning figure of $67,700 reported by the ACS for 2022. We calculate the loss of earnings for perpetrators at $4.4 billion

(see Table A.2). Note: If we instead applied a 2 year prison sentence for each offender, the income loss by perpetrators would stand at $2.2 billion and the corrections costs $4.9 billion.

The total loss of earnings incurred from both the victims and perpetrators of non-fatal IPV is estimated to be $13.6 billion, or 0.37 percent of the state's GDP (see Table 2 and Table A.2).

To estimate criminal justice costs for incarcerated individuals who committed non-fatal IPV-related crimes, we use the average spending on corrections per prisoner of $149,623 in 2022 dollars (BJS, 2022). Assuming they remain in prison for four years, the total criminal costs amount to $9.8 billion (see Table A.3).

There are also legal and police costs surrounding the reporting and prosecution of IPV. For the women who reported experiencing any form of IPV, the spectrum of criminal offences varies from minor threats to more severe transgressions, with many going unreported to the police. The 2022 Criminal Victimization report by U.S. Department of Justice estimated that only 51.5 percent of the intimate partner violence cases were reported to police (US DOJ, 2022). Additionally, the U.S. Department of Justice estimated that 39% of reported domestic violence victimization cases led to charges or arrests (US DOJ, 2022). Combining these two data sources, we assume that 20.1 percent of the IPV cases (any of the 22 forms) resulted in charges, which is approximately 168,241 cases. In these cases, both victims and perpetrators require legal representation. Using the median attorney fees published by Dlewis & Dickstein P.L.L.C (2022), of $9,851, we estimate legal costs amounting to approximately $3.3 billion.

The estimated police costs rely on estimated share of time that police officers spend responding to "domestic violence calls that do not involve violent crimes," given a dearth of data on the share of police time spent specifically on IPV cases. According to 2020 estimates, police officers in Los Angeles dedicated approximately 1.12 percent of their work hours to responding to domestic violence-related calls for assistance (LAPD, 2020). Based on Bureau of Labor Statistics estimates that there were about 70,090 police officers in California in 2022, with an annual mean wage of $104,010 (BLS, 2022), we estimate that total police costs amount to around $81.6 million (see Table A.3). This figure is likely an underestimate as we only include police take-home earnings, but not benefits.

Lastly, we include the costs of programs providing support to survivors. According to the California State Budget (2021–2022), the California governor made available $100 million for a one-time supplement to federal funding for domestic violence, $15 million in grant money for the sexual and domestic violence prevention program, and $5 million in grants for domestic violence group outreach. These domestic violence programs totaled $120 million in the fiscal year of 2021. In addition, the Office on Violence Against Women (OVW) at Department of Justice gave out 47 grants and awards to organizations in California totaling $38 million for the fiscal year of 2022. All these programs sum up to $158 million.

The data sources and assumptions underlying these estimates are detailed in Annex 1.

The foregoing attempts to provide a comprehensive picture of tangible costs of IPV in the immediate term—on an annual basis. Evidence suggests that the long-term costs of IPV, which we do not explore here, are substantial. A recent Australian investigation of the health effects of IPV documented long-term costs, with some costs developing years after the IPV began and persisting after it has ceased. The study quantified the excess lifetime out-of-hospital

and pharmaceutical health costs of women who experience IPV using the Australian Longitudinal Study on Women's Health and applying a novel combination of econometric and actuarial techniques to find that women with a history of IPV had 42 percent higher lifetime health costs per person than women who do not experience IPV (William et al., 2022).

Key studies have also estimated the lifetime health costs of IPV by multiplying an aggregate "top-down" estimate of short-term annual costs with an estimated duration for which the cost applies. Peterson et. al. (2018) apply such a methodology to measure the lifetime excess economic cost of IPV for US women. Based on 43 million U.S. men and women with a victimization history, they estimate the lifetime costs of IPV to be about $103,767 per survivor (2014 USD), totaling nearly $3.6 trillion over victims' lifetimes, The estimate included $2.1 trillion (59 percent of total) in medical costs, $1.3 trillion (37 percent) in lost productivity among victims and perpetrators, $73 billion (2 percent) in criminal justice activities, and $62 billion (2 percent) in other costs, including victim property loss or damage. The same study estimated that government sources cover only an estimated $1.3 trillion (37 percent) of the lifetime economic burden.

Intangible Costs

The previous section provided an estimate—nearly $265 million—of the direct financial costs of fatal and non-fatal IPV, which may be regarded as "out of pocket" for individual survivors, families, and governments. We now turn to intangible costs, to account for pain and suffering, which are not included in the tangible estimates.

For fatal injuries, we adopt the approach used by economist Anke Hoeffler (1968), where the value per statistical life (VSL) is based on the premium paid to workers carrying out risky jobs, as estimated for the US (Hoeffler, 2017). Although the level of distress arising from violence may be considerably higher than the distress expected from a risky work environment, such a calculation arguably captures the lower bound of estimates for the risks to life and health associated with violent crime. In this way, labor market data allows statisticians to calculate the cost of a life—or more precisely, a livelihood (McCollister et al., 2010). Rather than measuring the tangible, direct economic costs incurred by violence on the health care, police, and judicial systems, it provides a way to represent intangible costs that are otherwise difficult to quantify.

To estimate the intangible costs associated with IPV affecting women, we utilize the VSL for fatal injuries, and quality of life loss costs for non-fatal injuries, which are available from CDC (2021). After adjusting for 2022 dollars, the average VSL per injured female is $617.5 million for fatal injuries related to firearm-related homicide and $541.1 million for fatal injuries related to general homicide (see Table A.4). As noted above, there were 51 fatal IPV-related gun injuries and 44 due to other violent means. The total VSL for these lost lives amount to $1.2 billion (see Table 4).

To estimate non-fatal intangible costs, we use the IPV prevalence rate for any sexual and/or physical violence, which stands at 2.96 percent, or approximately 450,807 female victims (see Table A.4). We adopted the average quality of life loss costs for ED visits and inpatient stays from CDC, indicating an average cost of $95,034 for ED visits and $142,131 for hospitalizations, all in 2022 dollars (see Table A.4). By multiplying the number of female IPV victims based on CalVEX data with the average costs of ED visits and hospitalization, the total non-fatal intangible costs amount to $108.1 billion, equivalent to 2.97 percent of the state's GDP (see Table 4).

Table 4: Aggregate intangible costs of IPV in California, 2022

	Total Cost ($)	Percent budget	Percent GDP	Per Survivor ($)
Fatal	$1.16 b	0.26%	0.03%	$1,383
Non-fatal	$106.92 b	24.18%	2.94%	$127,638
Total	$108.07 b	24.44%	2.97%	$129,021

Source: Authors' estimates based on sources in Table 4

Study Limitations

We followed methods and assumptions that have been established and adopted in national and global studies, by academic researchers and development agencies. While excellent data were available for the prevalence of IPV in California, there were some gaps both on the prevalence and costs side. This likely leads to some under- as well as over-estimates of specific costs. These are outlined here.

We use the prevalence data generated by the 2023 CalVEX, and assume for the purposes of calculating costs, that survivors who reported experiencing violence in the past 12 month experienced only one incident, which is likely an under-estimate given that IPV is typically not an isolated event.

Data on criminal justice costs due to IPV is scarce in California. As noted above, we assumed that 99.9 percent of homicide cases resulted in a median jail time. Although, this is likely an over-estimate, the number of offenders is relatively small so the effect on the aggregate results is likely minimal. For non-fatal assault cases, we applied a maximum sentencing of 4 years for those who were convicted, which is also likely to be over-estimated.

In addition, to capture the share of those bearing legal costs, we applied the share of victimizations reported to the police multiplied by the percent of reported victimizations where charges were filed, which is approximately 20 percent. This is also likely to be overestimated. We also assumed, in the absence of state-wide data, that 2 percent of cases were associated with convictions, based on a national study, which is subject to measurement error. Our estimates of legal costs are based on a web search of average costs of representation. The police costs are likely under-estimated because it is limited to the share of time in Los Angeles as representation of the state, and monetary earnings excluding benefits.

Finally, we use a one-year time frame to generate costs for 2022. While we believe this is appropriate, this approach risks ignoring long-term physical and mental health consequences, which could be large (Peterson et al., 2021). Similarly, although we estimate a wide range of tangible and intangible costs associated with IPV, we do not assess the medium- and long-term costs, including impacts on career trajectories, and the costs of financial abuse, such as income/asset theft, unauthorized debt and damaged credit on victims. These costs would add significantly to the estimates presented here.

5. CONCLUSIONS AND POLICY IMPLICATIONS

This work offers a first-time comprehensive costing of IPV in California using up to date estimates of IPV from 2023. We find that the tangible costs of IPV in California are estimated to be close to $73.7 billion, or around 2 percent of gross domestic product (GDP) for the state, a level comparable to that seen in other costing studies on IPV conducted, as described previously in this report. We can consider this being a cost of $88,019 per victim of IPV in our state. This figure accounts for the loss of income, health costs, and the costs of criminal justice and response programs. These costs are being borne by individual survivors and victims and their families, by employers, and taxpayers.

The same dollar figures amount to almost 17 percent of the budget—that is, close to what is being spent on Kindergarten through Grade 12 education (California Budget 2021–22). Most costs come from non-fatal injuries caused by IPV. About 63 percent of the costs are medical in nature, about 19 percent due to lost productivity and 18 percent are associated with policing and criminal justice. A tiny proportion—0.2 percent—represents support for survivors. Alongside the tangible costs, the intangible costs of pain and suffering are much larger, about double the direct financial costs.

We draw attention to the fact that the costs of IPV to the state of California are likely greater than public expenditures for safety, higher education, transportation, and a general government category combined. Only a fraction of one percent is earmarked for support to survivors, and much of this funding is irregular. For instance, the 2021–22 California state budget included $5 million for grants to domestic violence groups researching gun violence restraining orders. The 2021–22 budget included $15 million from the General Fund to support the Domestic and Sexual Violence Prevention Grant Program, which expired in April 2024. Though funding for this program was renewed, this budget item received only $2.3 million in 2024. For fiscal year 2021–22, the Governor's Office of Emergency Services (Cal OES) provided $100 million from the General Fund to supplement federal Victims of Crime Act (VCA) funding, which supported a range of services and programs for domestic violence, including financial and technical assistance to local domestic violence and rape crisis centers as well as funding for a statewide domestic violence prevention campaign. With significant reduction in federal funds in 2024, California is expected to decrease expenditures supporting survivors of domestic and sexual violence dramatically; key disbursements for victims' services were omitted from the state's preliminary budget for the 2024–2025 fiscal year.

This is disappointing since evaluations have shown these programs work. For example, school-based prevention programs can reduce acceptance of domestic violence and increase the rate at which youth victims seek help (Fox et al., 2016). Such programs are important because data show that IPV starts during adolescence (Raj et al., 2023). In California, one in six people with a history of IPV report that they first experienced this form of abuse while they were adolescents. The California Partnership to End Domestic Violence (Partnership)—a California domestic violence coalition representing over 1,000 survivors, advocates, organizations and allied individuals across the state, with a track record of successfully passing over 200 pieces of legislation on behalf of domestic violence victims and their children—and ValorUS (VALOR)—a national, California-based sexual assault coalition—expect the state's failure to invest in programs to address

domestic and sexual violence will devastate California (CPEDV, 2023). Anticipated costs include increased homelessness and housing instability, shuttering of emergency shelters and transitional housing, and job loss for workers and a steep reduction in mental health services for survivors. Thus, a reduction in funding to address IPV will exacerbate the mental health and housing crises in California.

We contend that a greater investment in prevention by the California state government will lead to a reduction in spending that is reactive to incidents of IPV. We estimate that California spends about $81.6 million on domestic violence police calls alone, which could be better spent on programs to prevent such incidents. Additionally, as noted, we are unable to estimate long-term costs of IPV, which are likely massive. Research suggests that children in homes with IPV may be both more likely to perpetrate IPV and experience it themselves (Antle et al., 2020; Eriksson and Mazerolle, 2015; Renner and Slack, 2006). Children with exposure to IPV also face greater mental health struggles than their peers (Gartland et al., 2019). Thus, investments in IPV prevention today, can defray California's costs tomorrow.

The costs of IPV directly relate to the costs of gun violence. It is already well-established that the US is facing a costly gun violence epidemic; Everytown (2022) estimates the monetary costs of gun violence in the US amount to $557 billion annually, or about 2.6 percent of national GDP. Yet, it is important to consider that ways in which gun violence and intimate partner violence are interrelated. We assessed the costs of the approximately 95 fatal instances of IPV in the state to be about $600 million. More than half of these fatalities were caused by firearms. The CDC estimates that over 40% of female murders in the US are caused by intimate partners (Niolon et al., 2017).

Non-fatal gun-related IPV incidents are also costly; the combined expenditures of inpatient and emergency visits exceed costs for both physical and sexual assaults not involving firearms. CalVEX reports that California women are more than 4 times as likely to face threats or harm from an intimate partner that involve guns (Raj et al., 2023). Some of these incidents are preventable. California already has the most stringent firearms regulations in the country, yet implementation could be improved, as many Californians—especially men—regularly obtain guns without registering them (Thomas et al., 2024). Domestic Violence Restraining Orders and Gun Violence Restraining orders are two mechanisms that can restrict gun possession by IPV perpetrators. However, CalVEX estimates that perpetrators of IPV were ten times more likely to report acquiring a gun than those who did not perpetrate IPV.

We used state-of-the art methods and novel IPV prevalence data to understand the costs to California. However, assessing the true costs of IPV to the state was made more challenging by data gaps. These includes data on mental health and counselling costs, crime data on convicted individuals with detailed offense categories and relationship to victims, as well as IPV-related criminal justice costs. Understanding the cost of IPV to California helps the public and the state better assess the implications of the state's budgeting. We view this practice as another way to assess the efficacy of California's fiscal priorities. Thus, more transparent data is in the public interest.

Finally, the CalVEX IPV data show that socially and economically vulnerable Californians, including the LGBTQ+ communities, people with a history of homelessness or incarceration, and people living with a disability face disproportionate levels of IPV. CalVEX data also show that IPV rates vary across ethnic groups and within broad ethnic groupings (Raj et al., 2023). Thus, it is plausible that

certain groups in society bare the brunt of the tangible and intangible costs of IPV. More fine-grained data would allow for an assessment of the disparate costs faced by different communities across California and allow for resources to be concentrated in areas communities that benefit from them the most. Subsequent efforts to determine the costs of intimate violence should consider potential heterogeneity in these costs.

Policy Implications

Based on the foregoing considerations, we recommend the following:

1. Establish a consistent and sustainable funding stream on violence prevention and response in the state budget.
2. Tighten compliance with existing firearm legislation, especially among perpetrators of domestic violence.
3. Improve data, specifically on the consequences of intimate partner violence, to better understand the scope of the challenges and track changes over time.
4. Design intersectional IPV policies and practices that attend to the ways gender, race, ethnicity, sexual orientation and socioeconomic status produce both crosscutting and cumulative disadvantages.

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ANNEX 1: DATA SOURCES AND ASSUMPTIONS OF UNDERLYING ESTIMATES

Variable Name	Region	Year	Source	Key Assumption
IPV fatality	CA	2022	Crime Data Explorer, FBI	Calculations based on victims' relationship to homicide offenders. Total 95 female victims killed by intimate partners.
IPV fatality due to shooting	CA	2022	"2022 Homicide in California", CA DOJ	See Table 19. Applied rate of firearm cases among all female homicide cases.
Median age at death for IPV female victims	CA	2022	"2022 Homicide in California", CA DOJ	See Table 10. Applied the median age of total female homicide victims.
IPV prevalence rate, any 22 forms	CA	2023	CalVEX	See page 25.
IPV prevalence rate, sexual	CA	2022	CalVEX	See page 25.
IPV prevalence rate, physical	CA	2022	CalVEX	See page 25.
IPV prevalence rate, physical - gun violence	CA	2022	CalVEX	See page 25.
IPV prevalence rate, emotional	CA	2022	CalVEX	See page 25.
IPV offenders convicted of homicide crimes, count	CA	2022	Crime Data Explorer, FBI	95 female victims killed by intimate partners. Assumed an equal number of males were responsible for these crimes.
Median age at time of crime for IPV offenders responsible for homicide crimes	CA	2022	"2022 Homicide in California", CA DOJ	See Table 31. Applied the median age of arrestee responsible for homicide crimes.
Average medical costs for fatal injured persons, homicide by firearm, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average medical costs for fatal injured persons, homicide, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average VSL for fatal injured persons, firearm, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average VSL for fatal injured persons, homicide, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average medical costs for non-fatal injured persons, sexual assault, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average medical costs for non-fatal injured persons, other assault, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average work loss costs for non-fatal injured persons, sexual assault, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average work loss costs for non-fatal injured persons, other assault, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average quality of life loss costs for non-fatal injured persons, sexual assault, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average quality of life loss costs for non-fatal injured persons, other assault, female	USA	2021	CDC	Adjusted to 2022 dollars using healthcare inflation.
Average medical costs on ED and inpatient for non-fatal firearm-related injuries	USA	2006-2014	Gani, Sakran, and Canner (2017)	Adjusted to 2022 dollars using healthcare inflation
Average mental health costs for example cost of treating/ counselling PTSD or anxiety	CA	2021	KFF	Adjusted to 2022 dollars using healthcare inflation

Variable Name	Region	Year	Source	Key Assumption
Female labor force participation	CA	2022	U.S. BLS	
Median earnings by sex in the past 12 months for the full-time, year-round civilian employed population 16+	CA	2022	ACS, U.S. Census Bureau	Variable S2414
Minimum hourly wage	CA	2022	U.S. DOL	Labor Code Section: $15.5/hour is used
Maximum weeks leave from work due to injury	CA	2022	FMLA	Up to 12 weeks during a 12-month period. 12-week is used.
Percent of homicide offenders had death penalty	CA	2022	"2022 Homicide in California", CA DOJ	See page 2. Author's calculation. Applied the death penalty rate on IPV homicide cases.
IPV homicide arrest rate	CA	2022	"2022 Homicide in California", CA DOJ	See page 2. Author's calculation. Applied the arrest rate on IPV homicide cases.
Percent of domestic violence offenders who went to jail	USA	2014	Sherry Hamby. Psychology Today (2014)	Applied the 2% rate to CA.
Percent of IPV victimizations reported to police	USA	2022	Thompson and Tapp (2023)	Table 4.
Percent of domestic violence reported victimizations filed charges	USA	2006-2015	"Police Response to Domestic Violence, 2006-2015", US DOJ	
Department of Corrections spending per prisoner	CA	2020	BJS	Adjusted to 2022 dollars using CPI inflation rate
Basic sentence on domestic abuse/ battery	CA	2023	Kann California Law	Maximum sentencing applied.
Basic sentence on homicide	CA	2023	Kann California Law	Median sentencing applied.
Domestic violence attorney cost	USA	2020	Dlewis & Dickstein P.L.L.C	Applied the higher bound for fatal injuries and mid-point for non-fatal injuries. Adjusted to 2022 dollars.
Number of domestic violence-related calls for assistance	Los Angeles	2020	OpenJustice	
Number of Calls for Service	Los Angeles	2020	LAPD	
Police and sheriff's patrol officers' employment, count	CA	2022	BLS	
Annual mean wage for police and sheriff's patrol officers	CA	2022	BLS	
Health care inflation	USA	2015-2022	BLS	Health care inflation used to adjust medical costs to 2022 dollars.
CPI inflation	USA	2021-2022	BLS	
State GDP	CA	2022	BEA	
State population	CA	2022	U.S. Census Bureau	Adjusted population to women 18+.
State budget	CA	FY22-23	Urban Institute	
Life expectancy	CA	2019	National Vital Statistics Reports, 2022	
State domestic violence related program funding	CA	FY21-22	California State Budget 2021-2022	See page 148 and 149.
Department of Justice OVW grant awards to California	CA	2022	OVW, DOJ	See page 148 and 149.

ANNEX 2: ANNEX TABLES

Table A.1: Medical costs, 2022

By Injury Outcome	Intent	Injured persons	Avg per person ($)	Total Cost ($)	Share of state GDP
Fatal violence	Gun-related	51	8,350	421,938	0.00001%
	Other	44	9,598	426,825	0.00001%
Non-fatal violence	Sexual assault	67,012	71,672	4,802.8 m	0.13%
	Gun-related physical assault	32	126,951	4.1 m	0.0001%
	Other physical assault	438,591	89,981	39,464.7 m	1.08%
	Emotional	326,682	5,676	1,854.4 m	0.05%

Note: Average cost per person for non-fatal violence is the sum of costs of ED visit and hospitalization.
Source: Author estimates based on sources in Table 4.

Table A.2: Loss of earnings, 2022

Injury Outcome	Category	Victim/offender count	Median Wage ($)	Total Cost ($)	Share of state GDP
Fatal violence	Victims: women, fulltime	52.5	59,731/year	160.0 m	0.004%
	Victims: women, non-paid	42.5	32,240/year	69.8 m	0.002%
	Perpetrators: men, full-time, death penalty	0.1	67,700/year	295,092	0.00001%
	Perpetrators: men, full-time, jail time	63.9	67,700/year	114.6 m	0.003%
Non-fatal violence	Victims: women, fulltime	463,219	1,149/week	6,385.0 m	0.18%
	Victims: women, non-paid	374,428	620/week	2,785.7 m	0.08%
	Perpetrators: men, full-time	16,753	1,302/week	4,447.7 m	0.12%

Source: Authors' estimates based on sources in Table 4.

Table A.3: Criminal justice costs, 2022

Services Type	Category	Total Cost ($)	Share of state GDP
Incarceration, perpetrators	Fatal violence	253.2 m	0.01%
	Non-fatal violence	9,829.9 m	0.27%
Legal	Fatal violence, perpetrators	1.1 m	0.00003%
	Non-fatal violence, perpetrators, and victims	3,314.8 m	0.09%
Police	Time spent on non-violent domestic violence calls	81.6 m	0.002%

Source: Authors' estimates based on sources in Table 4.

Table A. 4: Intangible costs, 2022

Injury Outcome	Category	Injured persons	Average cost per person ($)	Total Cost ($)	Share of state GDP
Fatal violence	Gun-related	51	12.2 m	617.5 m	0.02%
	Other	44	12.1 m	541.1 m	0.01%
Non-fatal violence	ED & Hospitalizations	450,807	237,165	106,915.4 m	2.94%

Source: Authors' estimates based on sources in Table 4.

REFERENCES

American Community Survey (ACS). 2022. U.S. Census Bureau and U.S. Department of Labor (2022). Industry by Sex and Median Earnings in the Past 12 Months (in 2022 Inflation-Adjusted Dollars) for the Full-Time, Year-Round Civilian Employed Population 16 Years and Over, S2414. https://data.census.gov/table/ACSST1Y2022.S2414?t=Employment+and+Labor+Force+Status&g=040XX00US06, accessed February 13, 2023.

Antle B, Karam EA, Barbee AP, Sullivan D, Minogue A, & Glover A. Intergenerational transmission of intimate partner violence and its impact on adolescent relationship attitudes: A qualitative study. Journal of loss and trauma 25, no. 1 (2020): 1-21.

Bank of Canada: Inflation Calculator. https://www.bankofcanada.ca/rates/related/inflation-calculator/, accessed October 24, 2023.

Brown DS, Finkelstein EA, Mercy JA. Methods for estimating medical expenditures attributable to intimate partner violence. J Interpers Violence. 2008 Dec;23(12):1747-66.

Bureau of Labor Statistic (BLS). 2022. States with the highest concentration of jobs and location quotients in Police and Sheriff's Patrol Officers. https://www.bls.gov/oes/current/oes333051.htm#(1), accessed October 19, 2023.

California Department of Justice (CA DOJ). 2022. Homicide in California. https://data-openjustice.doj.ca.gov/sites/default/files/2023-06/Homicide%20In%20CA%202022f.pdf, accessed November 30, 2023.

CPEDV. Statewide survey of sexual and domestic violence organizations forecasts increased homelessness and trauma due to potentially catastrophic funding cuts . California Partnership to End Domestic Violence (CPEDV). November 2023. https://www.cpedv.org/press-release/statewide-survey-sexual-and-domestic-violence-organizations-forecasts-increased

California State Budget. 2021-2022. Gavin Newsom, Governor. State of California. https://ebudget.ca.gov/2021-22/pdf/Enacted/BudgetSummary/FullBudgetSummary.pdf, accessed, November 30, 2023.

California State Budget. 2022-2023. https://ebudget.ca.gov/budget/2022-23EN/#/Home, accessed November 30, 2023.

Centers for Domestic Peace. Economic Impact of Domestic Violence. https://centerfordomesticpeace.org/economic-impact-of-domestic-violence/, accessed September, 2023.

Centers for Disease Control and Prevention (CDC). Costs of Intimate Partner Violence Against Women in the United States National Center for Injury Prevention and Control.. Atlanta (GA): Centers for Disease Control and Prevention; 2003.

Centers for Disease Control and Prevention (CDC). 2021. Number of Injuries and Associated Costs [Internet]. Injury Outcome. Atlanta (GA): CDC; https://wisqars.cdc.gov/cost/, accessed November 30, 2023.

Centers for Disease Control and Prevention (CDC). 2022. Fast Facts: Preventing Intimate Partner Violence. https://www.cdc.gov/violenceprevention/intimatepartnerviolence/fastfact.html#:~:text=The%20lifetime%20economic%20cost%20associated,women%20and%20%2423%2C414%20for%20men, accessed November 30, 2023.

Federal Bureau of Investigation (FBI). 2022. Expanded Homicide Data. Victim's Relationship to the Offender. Crime Data Explorer. https://cde.ucr.cjis.gov/LATEST/webapp/#/pages/explorer/crime/shr, accessed November 30, 2023.

D'Inverno AS, Kearns MC, & Reidy DE. Introduction to the special issue: the role of public policies in preventing IPV, TDV, and SV. Journal of interpersonal violence 33.21 (2018): 3259-3266.

Dlewis & Dickstein PLLC. 2020. "How much does it costs to retain a domestic violence attorney?" https://www.notafraidtowin.com/michigan-domestic-violence-defense-attorneys/cost/, accessed November 30, 2023.

Duvvury N, Carney P, & Nguyen HM. Estimating the costs of domestic violence against women in Viet Nam. UN Women Viet Nam Country Office, 2012. https://www.unwomen.org/en/digital-library/publications/2013/2/estimating-the-cost-of-domestic-violence-against-women-in-viet-nam

Duvvury N, Callan A, Carney P, & Raghavendra S. 2013. Intimate partner violence: economic costs and implications for growth and development. World Bank Women's Voice, Agency, & Participation Research Series No. 3.

Eriksson L, & Mazerolle P. A cycle of violence? Examining family-of-origin violence, attitudes, and intimate partner violence perpetration. Journal of interpersonal violence 30, no. 6 (2015): 945-964.

Everytown Research & Policy. The Economic Cost of Gun Violence. July 19, 2022. https://everytownresearch.org/report/the-economic-cost-of-gun-violence/, accessed September, 2023.

Family and Medical Leave Act (FMLA). Disability Benefits 101, California. https://ca.db101.org/ca/situations/workandbenefits/rights/program2b.htm, accessed February 13, 2024.

Flannery S. Will Domestic Abuse Happen Again? June, 2022. DomesticShellter.org. https://www.domesticshelters.org/articles/identifying-abuse/will-it-happen-again, accessed February 13, 2024.

Fox CL, Corr M-L, Gadd D, & Sim J. (2016). Evaluating the effectiveness of domestic abuse prevention education: Are certain children more or less receptive to the messages conveyed? Legal and Criminological Psychology, 21(1), 212–227. https://doi.org/10.1111/lcrp.12046

FVPSA American Rescue Plan Program. 2021. Fact Sheet. Office of Family Violence Prevention and Services. U.S. Department of Health & Human Services. https://www.acf.hhs.gov/ofvps/fact-sheet/fvpsa-arp-program#:~:text=With%20the%20passage%20of%20the,assault%20survivors%3B%20and%20%2449.5M, accessed October 24, 2023

Gani F, Sakran JV, & Canner JK. Emergency Department Visits for Firearm-related Injuries in the United States, 2016-14. Health Affairs 36, NO. 10 (2017): 1729–1738 October, 2017. https://www.healthaffairs.org/doi/10.1377/hlthaff.2017.0625

Gartland D, Giallo R, Woolhouse H, Mensah F, & Brown SJ. Intergenerational impacts of family violence-mothers and children in a large prospective pregnancy cohort study. EClinicalMedicine 15 (2019): 51-61.

Georgetown Institute for Women, Peace, and Security (GIWPS). The Best and Worst States to Be a Woman: Introducing the U.S. Women, Peace, and Security Index 2020. (Lead: Dr. Jeni Klugman) https://giwps.georgetown.edu/usa-index/

Hamby S. Guess How Many Domestic Violence Offenders Go to Jail? Psychology Today. October 1, 2014. https://www.psychologytoday.com/us/blog/the-web-violence/201410/guess-how-many-domestic-violence-offenders-go-jail, accessed November 30, 2023.

Hoeffler A. What are the costs of violence?. Politics, Philosophy & Economics 16, no. 4 (2017): 422-445.

Howard LM, Trevillion K, Khalifeh H, Woodall A, Agnew-Davies R, & Feder G. 2009. Domestic violence and severe psychiatric disorders: Prevalence and interventions. Psychological Medicine, 40(6), 881–893.

Hoeffler A, & Feardon J. Global Costs of Violence, Princeton University Press. Anke Hoeffler and James Fearon, 2018. Beyond Civil War: The Costs of Interpersonal Violence in Lomborg, Bjorn (ed.) Prioritizing Development: A Cost Benefit Analysis of the United Nations' Sustainable Development Goals. Cambridge: Cambridge University Press, 2018.

Institute for Women's Policy Research (IWPR). The Economic Cost of Intimate Partner Violence, Sexual Assault, and Stalking. August, 2017. https://iwpr.org/wp-content/uploads/2020/10/B367_Economic-Impacts-of-IPV-08.14.17.pdf

Kann California Law Group (KCLGa). Domestic Violence under the California Penal Code. https://www.kannlawoffice.com/domestic-violence.html, accessed February 13, 2024.

Kann California Law Group (KCLGb). California Penal Code [Section] 187(A) - Murder. https://www.kannlawoffice.com/domestic-violence.html, accessed February 13, 2024.

Kaiser Family Foundation (KFF). 2021. Mental Health and Substance Use State Fact Sheets. Mental Health in California. https://www.kff.org/statedata/mental-health-and-substance-use-state-fact-sheets/california/, accessed February 13, 2024.

Klugman J, Hanmer L, Twigg S, Hasan T, McCleary-Sills J, & Santamaria J. 2014. Voice and Agency: Empowering Women and Girls for Shared Prosperity. © Washington, DC: World Bank Group. http://hdl.handle.net/10986/19036 License: cc by 3.0 IGO.

Klugman J, Li L, Raj A. The Costs of Intimate Partner Violence in Louisiana. Newcomb Institute at Tulane University. April 2024.

Los Angeles Policy Department (LAPD). Calls for Service 2020. https://data.lacity.org/Public-Safety/LAPD-Calls-for-Service-2020/84iq-i2r6/about_data, accessed February 27, 2024.

McCollister KE, French MT, & Fang H. The cost of crime to society: new crime-specific estimates for policy and program evaluation. Drug Alcohol Depend. 2010 Apr 1;108(1-2):98-109. doi: 10.1016/j.drugalcdep.2009.12.002. Epub 2010 Jan 13. PMID: 20071107; PMCID: PMC2835847.

Miller T, Fulton D, & Lee D. The Cost and Consequences of Sexual Violence in California. 2018. California Coalition Against Sexual Assault (CALCASA)

Centers for Disease Control and Prevention (CDC). 2003. Costs of Intimate Partner Violence Against Women in the United States. National Center for Injury Prevention and Control, CDC, Department of Health and Human Services, Centers for Disease Control and Prevention. Atlanta, GA. http://www.cdc.gov/violenceprevention/pdf/ipvbook-a.pdf, accessed November 30, 2023.

National Vital Statistics Reports. Volume 70, Number 18. February 10, 2022. https://www.cdc.gov/nchs/data/nvsr/nvsr70/nvsr70-18.pdf, accessed February 13, 2024.

Niolon PH, Kearns M, Dills J, Rambo K, Irving S, Armstead T, & Gilbert L. 2017. Intimate Partner Violence Prevention Resource for Action: A Compilation of the Best Available Evidence. National Center for Injury Prevention and Control, CDC, Department of Health and Human Services, Centers for Disease Control and Prevention. Atlanta, GA

Oliver R, Alexander B, Roe S, & Wlasny M. 2019. The economic and social costs of domestic abuse, London: Home Office. Research Report 107. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/918897/horr107.pdf

OpenJustice. Crime Statistics. Domestic Violence-Related Calls for Assistance. Los Angeles 2013-2022. https://openjustice.doj.ca.gov/exploration/crime-statistics/domestic-violence-related-calls-assistance, accessed February 27, 2024.

Ouedraogo R, & Stenzel D. 2021. The Heavy Economic Toll of Gender- based Violence: Evidence from Sub-Saharan Africa. November 19, 2021. IMF WP/21/277, Washington DC: USA

Peterson C, Miller GF, Barnett SB, Florence C. Economic Cost of Injury — United States, 2019. MMWR Morb Mortal Wkly Rep 2021;70:1655–1659. DOI: http://dx.doi.org/10.15585/mmwr.mm7048a1external icon

Peterson C, Kearns MC, McIntosh WL, Estefan LF, Nicolaidis C, McCollister KE, Gordon A, Florence C. Lifetime Economic Burden of Intimate Partner Violence Among U.S. Adults. Am J Prev Med. 2018 Oct;55(4):433-444. doi: 10.1016/j.amepre.2018.04.049. Epub 2018 Aug 22. PMID: 30166082; PMCID: PMC6161830.

Peterson C, Xu L, & Florence V. Average medical cost of fatal and non-fatal injuries by type in the USA. Injury prevention 27, no. 1 (2021): 1-10. The databases are publicly available at http://www.hcup-us.ahrq.gov and www.ibm.com.

Poverty in California. 2023. Public Policy Institute of California. https://www.ppic.org/wp-content/uploads/1023cdf-appendix.pdf.

Raj A, Johns N, Yore J, Closson K, Kully G, & Thomas J. California Violence Experiences Survey (CalVEX) 2023. September 2023. Center on Gender Equity and Health, University of California San Diego and Newcomb Institute, Tulane University 2023_CalVEX_Report_FINAL.pdf (ucsd.edu), accessed November 30, 2024.

Renner LM, & Slack KS. Intimate partner violence and child maltreatment: Understanding intra-and intergenerational connections. Child abuse & neglect 30, no. 6 (2006): 599-617.

Rothman EF, Hathaway J, Stidsen A, & deVries HF. 2007. How employment helps female victims of intimate partner violence: A qualitative study. Journal of Occupational Health Psychology, 12(2), 136–143. https://doi.org/10.1037/1076-8998.12.2.136

Santos C. Costs of domestic violence: A life satisfaction approach. Fiscal Studies 34, no. 3 (2013): 391-409.

Schelling TC. 1968. The Life You Save May Be Your Own. In Problems in Public Expenditure Analysis, edited by Samuel B. Chase, Jr., 127–62. Washington, DC: Brookings Institution.

Spitzer SA, Forrester JD, Tennakoon L, Spain DA, Weiser TG. A decade of hospital costs for firearm injuries in the United States by region, 2005-2015: government healthcare costs and firearm policies. Trauma Surg Acute Care Open. 2022 Apr 8;7(1):e000854. doi: 10.1136/tsaco-2021-000854. PMID: 35497324; PMCID: PMC8995943.

Thomas J, Johns NE, Yore JB, Fleckman J, Kully G, Theall K, Wagman J, & Raj A. Firearm Exposure in California, California Violence Experiences Survey (CalVEX) 2023. December 2023. Center on Gender Equity and Health, University of California San Diego.

Thompson A, & Tapp SN. Criminal Victimization, 2022. September 2023. https://bjs.ojp.gov/document/cv22.pdf, accessed November 30, 2023.

Tolman RM, & Wang, H-C. Domestic Violence and Women's Employment: Fixed Effects Models of Three Waves of Women's Employment Study Data. American Journal of Community Psychology vol. 36, no 1-2 (2005): 147–58.

UN Women, IDLO, World Bank and Task Force on Justice. 2019. Justice for Women: High-level Group Report. March 2019. https://asiapacific.unwomen.org/sites/default/files/Field%20Office%20ESEAsia/Docs/Publications/2019/04/ap-Justice-for-Women.pdf

UN Women. 2016. Economic Costs of Violence Against Women Report. https://www.unwomen.org/en/news/stories/2016/9/speech-by-lakshmi-puri-on-economic-costs-of-violence-against-women

Urban Institute. 2024. California's Current Budget. https://www.urban.org/policy-centers/cross-center-initiatives/state-and-local-finance-initiative/projects/state-fiscal-briefs/california, accessed February 13, 2024.

U.S. Bureau of Economic Analysis (BEA), Gross Domestic Product: All Industry Total in California [CANGSP], retrieved from FRED, Federal Reserve Bank of St. Louis; https://fred.stlouisfed.org/series/CANGSP, February 27, 2024.

U.S. Bureau of Labor Statistics (BLS). 2022. Labor Force Participation Rate for Women Highest in the District of Columbia in 2022. https://www.bls.gov/opub/ted/2023/labor-force-participation-rate-for-women-highest-in-the-district-of-columbia-in-2022.htm, accessed on September 30, 2023.

U.S. Bureau of Labor Statistics (BLS): All items in U.S. city average, all urban consumers, not seasonally adjusted. Retrieved from US Inflation Calculator. https://www.usinflationcalculator.com/inflation/current-inflation-rates/#:~:text=The%20annual%20inflation%20rate%20for,ET., accessed February 13, 2024.

U.S. Bureau of Justice Statistics (BJS). 2020. "How much do states spend on prisons? Southern states spend the least per inmate and have some of the highest prison incarceration rates in the nation. March 28, 2023. https://usafacts.org/articles/how-much-do-states-spend-on-prisons/, accessed October 16, 2023.

U.S. Census Bureau. 2022. QuickFacts. California. https://www.census.gov/quickfacts/fact/table/california/PST045222?, accessed November 30, 2023.

U.S. Census Bureau. 2021. Racial and Ethnic Diversity in the United States: 2010 Census and 2020 Census August 12, 2021. https://www.census.gov/library/visualizations/interactive/racial-and-ethnic-diversity-in-the-united-states-2010-and-2020-census.html, accessed May 28, 2024.

U.S. Department of Justice (DOJ). 2017. Police Response to Domestic Violence, 2006-2015. https://bjs.ojp.gov/content/pub/pdf/prdv0615.pdf, accessed February 22, 2024.

U.S. Department of Justice (DOJ). Office on Violence Against Women (OVW). 2022. FY 2022 OVW Grant Awards by State. California. https://www.justice.gov/ovw/awards/fy-2022-ovw-grant-awards-by-state, accessed February 27, 2024.

U.S. Department of Labor (DOL). 2022. State Minimum Wage Laws. Updated September 30, 2023. https://www.dol.gov/agencies/whd/minimum-wage/state, accessed November 30, 2023.

US Inflation Calculator. Health Care Inflation in the United States (1948-2024). https://www.usinflationcalculator.com/inflation/health-care-inflation-in-the-united-states/, accessed February 13, 2023.

William J, Loong B, Hanna D, Parkinson B, & Loxton D. Lifetime health costs of intimate partner violence: A prospective longitudinal cohort study with linked data for out-of-hospital and pharmaceutical costs, Economic Modelling, Volume 116, 2022. https://doi.org/10.1016/j.econmod.2022.106013.

Zhang T, Hoddenbagh J, McDonald S, Scrim K. 2012. An Estimation of the Economic Impact of Spousal Violence in Canada, 2009. Department of Justice Canada, Research and Statistics Division: Ottawa. https://www.justice.gc.ca/eng/rp-pr/cj-jp/fv-vf/rr12_7/rr12_7.pdf