Request for Intimate Partner Violence to be Declared a Public Health Crisis

What is intimate partner violence?

Intimate partner violence (IPV) is the use of behaviour to gain control and power over an intimate partner (i.e., a current or former spouse, dating, or sexual partner). IPV does not look the same in every relationship. It may include physical violence, sexual violence, criminal harassment, threats of physical or sexual violence, reproductive coercion, coercive control, spiritual abuse, cyber violence, emotional abuse, financial abuse, or psychological abuse (Government of Canada, 2021a). IPV is not a series of isolated incidents, but a pattern of abusive behaviour (Katerndahl, 2010).

Who experiences IPV?

Victims and abusers can be of any age, gender, or sexual orientation and have any educational background or income (Government of Canada, 2021a). While victims do not fit a mold, women disproportionately experience IPV as the victim, with men being the abuser. Data also show that women often experience IPV with greater frequency and severity (e.g., being choked, being assaulted or threatened with a weapon, or being sexually assaulted) (Cotter, 2021). Due to the devastating impacts of colonialism, IPV against Indigenous women is significantly higher compared with non-Indigenous women (Ontario Native Women's Association, 2018).

Why is IPV a public health problem?

IPV is preventable, yet remains a major public health problem.[i] One-third of women in Canada aged 15 years and older will experience IPV in their lifetime (Cotter, 2021). For some women, it will be a death sentence. Approximately every six days, a woman is killed in Canada by a current or previous intimate partner (Armstrong & Jaffray, 2021).

Children exposed to IPV often experience numerous adverse outcomes, which can continue into adulthood and perpetuate an intergenerational cycle of violence (Wathen, 2012). In 2018, IPV was considered the primary form of child maltreatment in Ontario, making up nearly half (45%) of all substantiated investigations (Fallon et al, 2018).[ii] While IPV is often hidden behind closed doors, the consequences are devastating and costly, ultimately affecting every member of society.[iii]

What are the local statistics?

At a local level, Victim Services received 325 calls for service for IPV between April 1 and Dec 7, 2022. During this period, Victim Services supported 270 female-identified IPV victims as well as 19 children, who were harmed or witnesses of IPV. In addition, Victim Services responded to

124 sexual violence incidents, of which 75 involved female-identified victims, 45 child victims, and 9 child witnesses (K. Jodouin, personal communication, December 9, 2022. While this data provides insight into the prevalence of IPV in our community, it is important to note that IPV remains underreported. The numbers shared reflect only a portion of the violence that occurs (Statistics Canada, 2022).

Why should the board of health declare IPV a public health crisis?

Declaring IPV as a crisis will help increase awareness of the problem. It may spark conversations about IPV and perhaps make it easier for survivors to come forward. The more members of our community who understand the costs and severe impact of IPV, the more prepared we will be to 1) strengthen efforts to prevent IPV; 2) protect and support victims when IPV takes place; 3) hold perpetrators accountable; 4) initiate measures to end the cycle of violence.

For survivors to leave unsafe situations safely, they need sufficient access to appropriate community support, counselling and mental health services, legal services, safe and affordable housing (including shelters), income support, and child care. Before COVID-19, social services in the region were already strained and COVID-19 added even more pressure. Support services (e.g., shelters) had to navigate changing protocols and were not always able to offer regular services, often operating with decreased capacity (Bielski, 2020). Meanwhile, certain households experienced heightened levels of conflict and violence due to stress from employment disruptions, financial pressures, and isolation (Haag et al, 2022; Thompson, 2021). Victims of IPV had decreased access to support systems and greater barriers to escaping abusive situations (Lyons & Brewer, 2022, Peterman et al, 2020).

COVID-19 highlighted the need for profound structural and social changes at all levels of society. Action around IPV at the local level can ignite long-lasting change. We need more systems-level support, maintained adequate funding, policies and programs that effectively address root causes of violence and look at safety holistically, stronger laws and law enforcement, and greater resources for relevant sectors that promote trauma-informed, survivor-centered, anti-racist, culturally competent, and equitable care with an intersectional perspective. Working collaboratively as a community and jointly advocating for increased resources can save lives. Everyone deserves to live free of violence and oppression.

IPV prevention and harm reduction align with growing efforts to address Adverse Childhood Experiences (ACEs). Urgent action is needed to end the perpetuation of the cycle of intergenerational violence and trauma (Cotter, 2021).

What harms are associated with IPV?

IPV is associated with numerous harms, including[iv] (Wathen, 2012):

- Physical health problems:
  - chronic pain
  - irritable bowel syndrome
  - gastrointestinal disorders
  - sleeping disorders
  - brain injuries
  - disability
  - fibromyalgia
  - sleep disorders
  - heart disease
  - stroke
  - asthma

- Psychological concerns:
  - high rates of depression
  - anxiety disorders (particularly PTSD)
  - sleep disorders
  - phobias and panic disorder
  - psychosomatic disorders
  - suicidal behaviour
  - self-harm
  - eating disorders
  - substance dependence
  - antisocial personality disorders
  - non-affective psychosis
  - low self-esteem
  - trust issues

- Reproductive health issues:
  - gynaecological disorders
  - infertility
  - pelvic inflammatory disease
  - pregnancy complications or miscarriage
  - sexual dysfunction
  - sexually transmitted diseases (e.g., HIV/AIDS)
  - unsafe abortion
  - unwanted pregnancy
  - pre-term labour
  - perinatal death
  - low birth weight

IPV is also linked with risky behaviours (e.g., substance use, unsafe sexual behaviour, physical inactivity), food insecurity, human trafficking, housing and homelessness, and difficulty keeping a job (Andermann et al, 2021; Peterson et al, 2018; Wathen, 2012; Wathen, MacGregor, & MacQuarrie, 2016).

Exposure to intimate partner violence can compromise a child's emotional and behavioural regulation capabilities and can lead to many of the physical and psychological concerns listed above (Wathen, 2012; Nikolova et al, 2021). IPV exposure is also related to poor academic outcomes, high-risk behaviours (e.g., delinquency, substance use), and an increased likelihood of entering the juvenile system. Children who witness IPV are more likely to experience other forms of abuse by caregivers (e.g., physical and sexual abuse). Come adulthood, those who were exposed to IPV as children are more likely to be involved in violent intimate relationships as victims or perpetrators (Nikolova et al, 2021).

REFERENCE LIST

Andermann, A., Mott, S., Mathew, C. M., Kendall, C., Mendonca, O., Harriott, D., McLellan, A., Riddle, A., Saad, A., Iqbal, W., Magwood, O., & Pottie, K. (2021). Evidence-informed interventions and best practices for supporting women experiencing or at risk of homelessness: a scoping review with gender and equity analysis. *Health promotion and chronic disease prevention in Canada: research, policy, and practice*, *41*(1): 1–13. https://doi.org/10.24095/hpcdp.41.1.01

Armstrong, A. & Jaffray, B. (2021, Nov 25). Homicide in Canada, 2020. Statistics Canada. *Statistics Canada.* Retrieved from: https://www150.statcan.gc.ca/n1/pub/85-002-x/2021001/article/00017-eng.htm

Bielski, Z. (2020, March 23). Self-isolation directives increase risk for women facing domestic violence, experts warn. *The Globe and Mail*. Retrieved from https://www.theglobeandmail.com/canada/article-self-isolation-directives-increase-risk-for-women-facing-domestic/

Cotter, A. (2021). Intimate partner violence in Canada, 2018: An overview. *Statistics Canada*. Retrieved from: https://www150.statcan.gc.ca/n1/pub/85-002-x/2021001/article/00003-eng.htm

Fallon, B., Trocmé, N., MacLaurin, B., Sinha, V., Black, T., Felstiner, … Johnston, A. (2010). Ontario incidence study of reported child abuse and neglect-2008 (OIS-2008). Toronto, ON: Child Welfare Research Portal.

Government of Canada. (2021a, fall). Fact sheet: Intimate partner violence. *Government of Canada.* Retrieved from: https://women-gender-equality.canada.ca/en/gender-based-violence-knowledge-centre/intimate-partner-violence.html

Haag, H. L., Toccalino, D., Estrella, M. J., Moore, A., & Colantonio, A. (2022). The shadow pandemic: a qualitative exploration of the impacts of COVID-19 on service providers and women survivors of intimate partner violence and brain injury. *The Journal of head trauma rehabilitation*, *37*(1): 43–52. https://doi.org/10.1097/HTR.0000000000000751

Katerndahl, D.A., Burge, S.K., Ferrer, R.L., Becho, J., & Wood, R. (2010). Complex dynamics in intimate partner violence: a time series study of 16 women. *Primary care companion to the Journal of clinical psychiatry*, *12*(4). https://doi.org/10.4088/PCC.09m00859whi

Lyons, M., & Brewer, G. (2022). Experiences of intimate partner violence during lockdown and the COVID-19 pandemic. *J Fam Viol* 37: 969–977. https://doi.org/10.1007/s10896-021-00260-x

Nikolova, K., Fallon, B., Black, T., Passanha, N., & Isaac, K. (2021, September). Responding to intimate partner violence (IPV) in Ontario, Canada: a closer look at police involvement. *Children and Youth Services Review, 128*. https://doi.org/10.1016/j.childyouth.2021.106168.

Ontario Native Women's Association. (2018) Indigenous women, intimate partner violence and housing. *Learning Network, Issue 25.* London, Ontario: Centre for Research & Education on Violence Against Women & Children. ISBN # 978-1-988412-19-1. Retrieved from http://www.vawlearningnetwork.ca/our-work/issuebased_newsletters/Issue-25/index.html

Peterson, C., Kearns, M.C., McIntosh, W.L., Estefan, L.F., Nicolaidis, C., McCollister, K.E., Gordon, A., & C. Florence. (2018). Lifetime economic burden of intimate partner violence among U.S. adults. *American Journal of Preventative Medicine*. *55*(4). 433-444.

Peterman, A., Potts., A., O'Donnell, M., Thompson, K., Nyati, S. Oertelt-Prigione, S., & van Gender, N. (2020). Pandemics and violence against women and children: Working paper 528. *Centre for Global Development.* Retrieved from https://www.cgdev.org/sites/default/files/pandemics-and-vawg-april2.pdf

Statistics Canada. (2022, October 19). Victims of police-reported family and intimate partner violence in Canada, 2021. *Statistics Canada.* Retrieved from: https://www150.statcan.gc.ca/n1/daily-quotidien/221019/dq221019c-eng.htm

Thompson, N. (2021, Feb 15). Reports of domestic, intimate partner violence continue to rise during pandemic. *CBC.* Retrieved from: https://www.cbc.ca/news/canada/toronto/domestic-intimate-partner-violence-up-in-pandemic-1.5914344

Wathen, C. N., MacGregor, C. D., & MacQuarrie, B. J. (2016, January 19). Relationships Among Intimate Partner Violence, Work, and Health. *Journal of Interpersonal Violence*, *33*(14). https://doi.org/10.1177/0886260515624236

Wathen, N. (2012). Health Impacts of Violent Victimization on Women and their Children. *Department of Justice Canada.* Retrieved from: https://www.justice.gc.ca/eng/rp-pr/cj-jp/fv-vf/rr12_12/rr12_12.pdf

Zhang T, Hoddenbagh J, McDonald S, & Scrim, K. (2013, January 25). An estimation of the economic impact of spousal violence in Canada, 2009. *Government of Canada*. Retrieved from: https://www.justice.gc.ca/eng/rp-pr/cj-jp/fv-vf/rr12_7/p0.html

[i] Police reports of IPV reveal a gradual increase in Canada over the past seven years. In 2021, police assisted 114,132 victims of IPV aged 12 years and older (344 victims per 100,000 population), which marked a 2% increase from the previous year (Statistics Canada, 2022).

[ii] Exposure to IPV represented the largest proportion of substantiated child maltreatment investigations in Ontario in 2018 (Fallon et al, 2018).

[iii] Incidents of spousal violence (which includes relationships of married, common-law, separated, or divorced partners of at least 15 years of age) that occurred in 2009 cost Canadians approximately $7.4 billion (Zhang et al, 2013).

[iv] Please note that this is not an exhaustive list.