ACTING ON VIOLENCE AGAINST WOMEN IS A BLUEPRINT FOR HEALTH
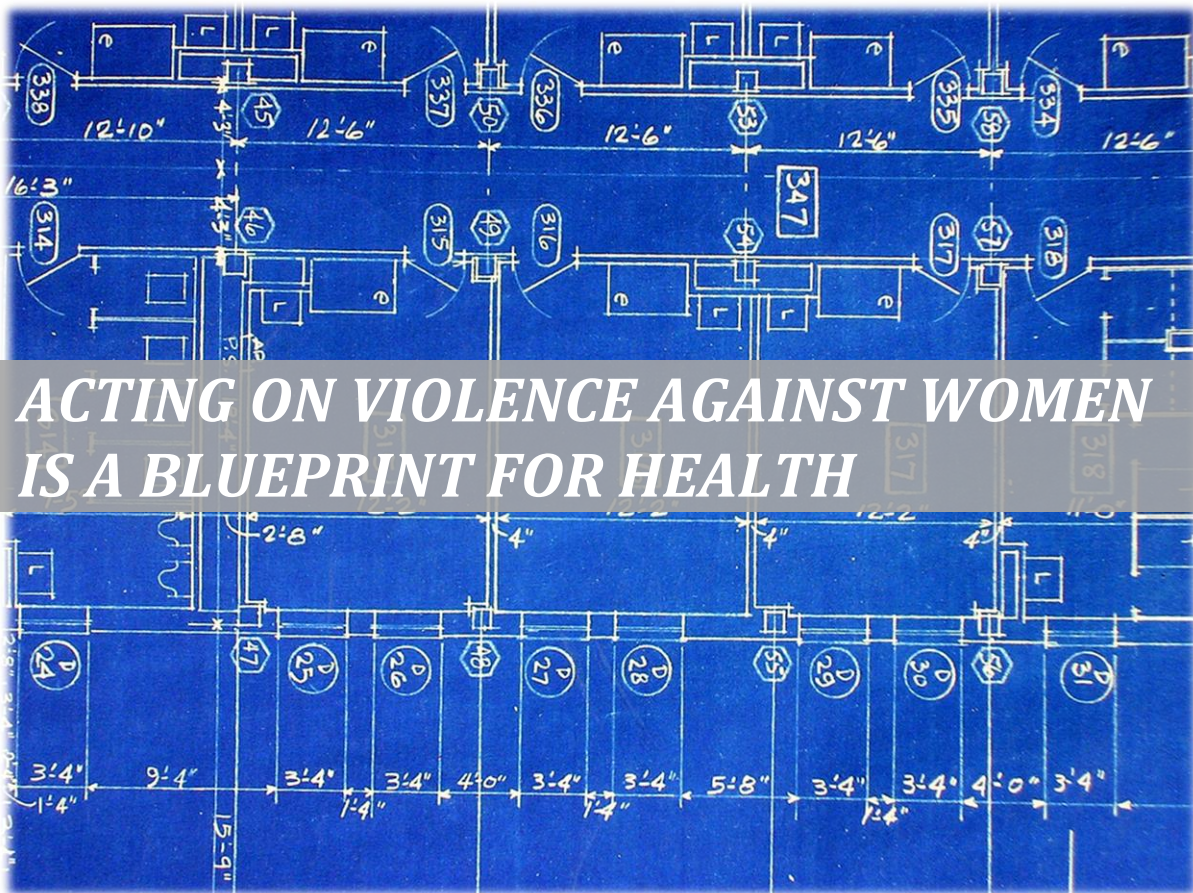
A brief on the impact of A Blueprint for Canada's National Action Plan on Violence Against Women and Girls on the health of Canadians through the lens of the social determinants of health

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Réseau canadien des maisons d'hébergement pour femmes

YWCA CANADA
A TURNING POINT FOR WOMEN
UN POINT TOURNANT POUR LES FEMMES

INTRODUCTION

In 2008, the United Nations called on all countries to adopt and implement National Action Plans on Violence Against Women (NAP on VAW) by 2015. It is within this context that the Canadian Network of Women's Shelters and Transition Houses brought together, in April 2014, 23 organizations to develop a Blueprint for Canada's NAP on VAW. The resulting document, *A Blueprint for Canada's National Action Plan on Violence Against Women and Girls*,[1] provides a roadmap for Canada's National Action Plan.

This brief looks at the expected effects on the health of Canadians should a National Action Plan on Violence Against Women and Girls, based on the Blueprint as its starting point, be developed and implemented by the Government of Canada and provincial/territorial governments. It analyzes the *Blueprint* from the point of view of the social determinants of health, of which there are a number of models. This brief primarily draws on the York University social determinants of health model[2] and the key determinants of health outlined by the Public Health Agency of Canada.[3] Our analysis of the Blueprint under the lens of the Social Determinants of Health, bring us to propose that experience of violence/trauma is a social determinant of health in its own right.

Experience of Trauma and Violence

Trauma and violence can be experienced by women, men and children in many different ways. Refugees fleeing war, torture or natural disaster, combatants in a conflict zone, first responders, residential school survivors, people who have been sexually or physically abused or subject to hate crimes may all experience negative physical and mental health effects. Most social determinants of health models do not list experience of violence/trauma as its

Violence against women affects everyone

The World Health Organization estimates that one in four women in Canada will experience intimate partner violence or sexual violence in her lifetime.[a]

According to Statistics Canada, in 2014 633,000 Canadians, overwhelmingly women, reported having experienced sexual assault **in the past year alone**.[b] Statistics Canada data also show that 1.2 million Canadians experienced intimate partner violence in the five years prior to its survey in 2009.[c]

The direct costs of intimate partner violence in Canada was $1.7 billion in 2009,[d] which includes both costs to the taxpayer such as health care, policing and criminal justice system costs, and costs to the victim such as lost wages, medical expenses not otherwise covered, loss and damage to property, and losses to third parties, such as employers and family members, but does **not** include indirect costs such as pain and suffering. The direct costs of sexual assault are over $546 million per year.[e]

Because of the profound and far-reaching impact of violence against women on our economy and society, all Canadians are affected by violence against women.

own determinant of health. Violence against women has been proposed by the Native Women's Association of Canada as a determinant of Indigenous women's health.[4]

The World Health Organization lists the following consequences of violence against women: death, disability, serious injuries, injury to fetus, unwanted or early pregnancy, sexually transmitted infections including HIV transmission, development of chronic conditions such as irritable bowel syndrome, chronic pelvic pain, urinary tract infection, suicide attempts, depression, anxiety and Post-Traumatic Stress Disorder.[5] Exposure to violence in the home may indirectly increase a person's risk of acquiring a range of diseases: diabetes, heart disease, high blood pressure, sleep disorders, fibromyalgia, chronic pain/disability, cancer, osteoporosis, asthma, anemia, hepatitis, lung and liver disease, thyroid disease.[6]

Given the clear health impacts, experience of violence and trauma is a social determinant of health which itself interacts with all the others. In the rest of this brief we look at how violence against women intersects with every other determinant of health, and the impact on health should a National Action Plan on Violence Against Women based on the *Blueprint* be implemented.

Income and Social Status

"There is strong and growing evidence that higher social and economic status is associated with better health. In fact, these two factors seem to be the most important determinants of health."
– Public Health Agency of Canada[7]

Violence against women undermines income and social status by...
- Leading to lost wages, which the Department of Justice Canada calculated at $33.6 million due to intimate partner violence in 2009.[8]
- Creating the need for additional expenses borne by the victim. The Department of Justice estimated that Canadian women who were victims of intimate partner violence collectively bore the costs of $62.9 million in damaged or destroyed property in 2009 alone, and an additional $12.2 million in moving expenses as a result of the violence.[9]
- Increasing reliance on food banks. Women who left abusive situations relied on food banks at 20 times the rate of the Canadian average, up to three years after leaving.[10] Food and income insecurity are major barriers to leaving abusive relationships.
- Affecting the future income of children who witness violence against women in the home, as witnessing this violence is linked to long-term mental and physical health conditions, and these children at increased risk of being victims themselves. The Department of Justice calculated the lost future income of children who witness intimate partner violence against women at $148.4 million.[11]
- Stigmatizing women who are survivors of intimate partner violence and/or sexual assault. This is one of the reasons why these crimes are under-reported. According to Statistics Canada, sexual assault is the most under-reported crime in Canada. Only 5% of sexual assaults are reported to police.[12]

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…

- Reduce the stigma of being a survivor of violence through education and awareness, making it easier for women and girls to come forward and access services.
- Lead to concrete steps being taken to prevent violence from happening in the first place, which would be a major step forward in achieving economic gender equality. As long as women are being beaten and raped, the economic gap between women and men can never fully close.
- Create economic options for women so that they do not have to be economically dependent on an abuser.

In particular, the following recommendations in the *Blueprint* would have a direct effect on easing the negative financial consequences of violence:

- Raise social assistance rates to provide adequate income to move beyond poverty. Ensure that full-time work at minimum wage provides a living wage. Provide supports for women's education and entry or re-entry into the paid labour force.
- Provide comprehensive and consistent victim compensation programs.
- Ensure equitable division of assets accumulated during the relationship for both married and common-law women and the enforcement of child support payments without risk to the safety of the woman.
- Offer free legal aid representation and information for abused women, including free information about rights and entitlements for criminal and family court systems.

Education and Literacy

"Health status improves with level of education. Education is closely tied to socioeconomic status, and effective education for children and lifelong learning for adults are key contributors to health and prosperity for individuals, and for the country. Education contributes to health and prosperity by equipping people with knowledge and skills for problem solving, and helps provide a sense of control and mastery over life circumstances. It increases opportunities for job and income security, and job satisfaction. And it improves people's ability to access and understand information to help keep them healthy."
– Public Health Agency of Canada[13]

Violence against women undermines education and literacy by…

- Making too many Canadian households miserable and fearful places in which neither women nor children can adequately focus on their studies.
- Creating trauma and mental health issues among women and children, interfering with long-term ability to study and learn. Children in homes in which violence against women is taking place are more prone to developmental delays, failing grades, irregular school attendance, acting out, and behaving violently to others.[14]
- Hospitalizing, or otherwise rendering female postsecondary students who are victims of intimate partner violence unable to perform daily activities. According to the Department of

Justice Canada, "The GSS [Statistics Canada General Social Survey] finds that female victims missed a total of 6,574 days of school because of spousal violence, while no male victims reported lost education."[15]

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would...
- Ensure that women are able to study without fear and without missing school because of hospitalization due to intimate partner violence and sexual assault.
- Ensure that children have the stability, safety and care they need to succeed at school.

In particular, the recommendations outlined in the healthy child development section of this brief would also have an effect on advancing education and literacy because physically and mentally healthy children are in a better position to learn.

Employment and Working Conditions

"Unemployment is related to poor health through various pathways. First, unemployment often leads to material deprivation and poverty by reducing income and removing benefits that were previously provided by one's employer. Second, losing a job is a stressful event that lowers one's self-esteem, disrupts daily routines, and increases anxiety. Third, unemployment increases the likelihood of turning to unhealthy coping behaviours such as tobacco use and problem drinking."
– Mikkonen and Raphael, York University[16]

"Unemployment, underemployment, stressful or unsafe work are associated with poorer health."
– Public Health Agency of Canada[17]

Violence against women undermines employment and working conditions by...
- Leading to 145,147 lost days of work in 2009 alone for female victims of intimate partner violence in Canada.[18]
- Impeding women from finding or keeping work, which is part of some abusers' controlling behaviour.
- Increasing the risk that women may be dismissed from their jobs due to violence-related decreased productivity, increased absenteeism, low morale and strained relations with other employees.[19]
- Spilling over into the workplace when abusers show up.[20]
- Making some workplaces themselves unsafe for women through violence and harassment. A quarter of all workplace violence incidents are sexual assaults.[21]

Implementing a proposed *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would...
- Free women to be productive employees and free to start businesses without fear.
- Free women from workplace harassment and violence so that they can concentrate on doing their jobs.

In particular, the following recommendations in the *Blueprint* would have a direct effect on improving employment and working conditions:

- Ensure that employers take effective measures to prevent, investigate and remedy sexual harassment and other forms of discriminatory harassment in the workplace and address the impact of domestic violence at work, including leave to deal with the impact of violence against women.

Social Environments and Community Services

"Social or community responses can add resources to an individual's repertoire of strategies to cope with changes and foster health."
– Public Health Agency of Canada[22]

Violence against women undermines social environments by…

- Overwhelming services which are insufficient to respond to the needs of women and their children, particularly in rural areas, First Nations, Inuit and Métis communities, and some other under-resourced communities which may experience higher risks.
- Overwhelming the friends, family and communities of survivors, who may not how to best respond to violence.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…

- Show Canadians that their governments care about violence against women and are acting in a coherent and comprehensive way to end it. This sends a strong message that abused women and their children are not alone, that violence is wrong, and help is available.
- Make sure help is actually available to all women and children no matter where they live or who they are.

In particular, the following recommendations in the *Blueprint* would have a direct effect on changing social environments so that violence against women is not enabled by institutions or members of the public:

- Establish national public education campaigns on violence against women and girls.
- Ensure cross-sector coordination, collaboration and information sharing on safety planning.
- Ensure that police, lawyers, and judges receive training in intersectional gender-based analysis of family and sexual violence, including an understanding of the tactics an abuser will use during family court proceedings.
- Ensure coherence between court systems and acknowledge the presence of family violence and/or sexual violence by ensuring the training of judges and lawyers, by creating dedicated and specialized teams within police forces and amongst prosecutors, by appointing dedicated judges and by ensuring that information pertaining to court orders be shared between the courts involved in cases dealing with family violence and/or sexual violence.

- Ensure efficient and effective cross-jurisdictional enforcement of protection and other court orders.

Health Services

"High quality health care services are a social determinant of health as well as a basic human right. The main purpose of a universal health care system is to protect the health of citizens and spread health costs across the whole society."
– Mikkonen and Raphael, York University[23]

Violence against women undermines health services by…
- Re-inflicting injuries which have to be treated once again.
- Jacking up the costs of health services because physical and mental injuries are being treated after the fact rather than prevented from happening. The Department of Justice calculated that in 2009, emergency room visits by female victims of spousal violence cost a minimum of $4.4 million and acute hospitalization costs were $3.5 million.[24]
- Causing the deaths of women and children before they even get to health services.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…
- Eventually reduce the costs of health services if violence is prevented.
- Better equip health services to respond to violence against women.

In particular, the following recommendations in the *Blueprint* would have a direct effect on providing adequate health services to survivors of violence no matter where in Canada they live:
- Guarantee high-quality intersectional/trauma-informed counseling and support services in both the immediate and longer term.
- Develop a health sector response to VAW [violence against women], ensuring integration with and access to all areas of care including primary care, emergency services, reproductive and sexual health services and mental health, including PTSD.
- Ensure that organizations and professional bodies training future professionals who will potentially intervene with victims of VAW receive adequate and ongoing training to identify violence and risk factors.

Housing, Physical Environments and Geography

"Many studies show that poor quality housing and homelessness are clear threats to the health of Canadians. Housing is an absolute necessity for living a healthy life and living in unsafe, unaffordable or insecure housing increases the risk of many health problems…. People experience qualitatively different material environments depending on their housing quality. Overcrowding

allows for transmission of respiratory and other illnesses. Some Canadian homes, especially on Aboriginal reserves, lack even clean water and basic sanitation – a fundamental public health risk…. Living in poor housing creates stress and unhealthy means of coping such as substance abuse…. The presence of lead and mold, poor heating and draft, inadequate ventilation, vermin, and overcrowding are all determinants of adverse health outcomes. Children who live in low quality housing conditions have a greater likelihood of poor health outcomes in both childhood and as adults. Dampness, for example, causes respiratory illness and makes pre-existing health conditions worse. It is not easy to separate the effects of housing from other factors since poverty, poor housing and pre-existing illnesses often go together, but studies that have separated them show poor housing conditions to be independent causes of adverse health outcomes."
– Mikkonen and Raphael, York University[25]

Pauktuutit Inuit Women of Canada has long pointed out the intersection between lack of affordable housing, overcrowded housing, geographic isolation, Indigenous status, gender, lack of adequate and culturally-appropriate community services and experience of trauma/violence.[26] Statistics Canada data show that in 2011, a third (33%) of Inuit in Nunangat (Inuit traditional lands) lived in overcrowded conditions,[27] compared with 3% of the total Canadian population.[28] Overcrowded housing is linked to higher rates of family violence because of a lack of sleep, anger, depression, strained relationships and psychological distress.[29] Lack of affordable housing in remote northern communities is especially harmful because many communities do not have shelters or anywhere to go to escape abuse, particularly when storms and weather keep planes - the only means of transportation to and from the community - grounded. Some women have to return to abusers because they do not have anywhere else to live.[30] If they escape to an urban centre, they risk becoming homeless there.[31] Université Laval researchers in partnership with Saturviit Inuit Women of Nunavik found that 74% of the 108 Inuit women surveyed in seven Nunavik (northern Québec) communities had experienced violence in the home, and almost half (46%) had experienced sexual assault.[32] The 2007–2008 Inuit Health Survey in Nunavut found that 31% of respondents experienced severe physical abuse as children, and 52% of women and 22% of men reported having experienced severe sexual abuse during childhood.[33] A Statistics Canada report found that the rate of violent incidents in Inuit Nunangat was nine times as high as in the rest of Canada.[34] Lack of affordable housing can limit any woman's options when it comes to trying to leave an abuser, but this can be infinitely compounded by remote location, lack of services and conditions faced because of Indigenous status.

Violence against women undermines women and children's physical environments by...

- Making home a dangerous place.
- Forcing some women to make a choice to stay with an abuser or to face homelessness or inadequate and unhealthy housing. This is particularly true for women and children in remote areas, urban centres in which people experience homelessness, area that lack sufficient services, populations who experience higher risk of overcrowded housing and homelessness, and people who need barrier-free housing to accommodate a disability.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would...

- Recognize that safe, affordable, accessible housing is a prerequisite for both violence prevention and good health.
- Ensure women and their children have somewhere to escape to in the short-term and an adequate, safe, affordable place to live in the long-term.

In particular, the following recommendations in the *Blueprint* would have a direct effect on improving physical environments for abused women and their children:

- Implement a national plan to end women's homelessness and a national housing strategy that ensures every woman leaving a violent situation, a shelter, or a prison has a safe affordable home. Ensure development of a housing strategy by and for Indigenous women.
- Provide adequate funding to VAW [violence against women] shelters/transition houses to meet the demand for immediate and secure emergency and short-term accommodation for women and their children, as well as for second-stage and permanent housing.

Personal Health Practices and Coping Skills

"Personal Health Practices and Coping Skills refer to those actions by which individuals can prevent diseases and promote self-care, cope with challenges, and develop self-reliance, solve problems and make choices that enhance health."
– Public Health Agency of Canada[35]

Violence against women undermines personal health practices and coping skills by...

- Making women and girls feel worthless. In order to take care of yourself and develop healthy practices, you need to care about yourself first. That is hard to do when someone is verbally, physically and/or sexually abusing you.
- Leading some women and girls to self-medicate with alcohol or drugs. The experience of violence is a risk factor in the development of addictions.[36]
- Making avoidance of the abuse the priority, rather than any other health practices. Women and girls who are abused are much more likely to attempt suicide and engage in unhealthy coping mechanisms.[37]
- Taking choice out of the hands of women: Women and girls who are sexually assaulted cannot insist on protection from disease or pregnancy.
- Allowing men to continue to lash out at women and children instead of teaching them how to deal with their problems of anger, inadequacy and control in healthy and constructive ways.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would...

- Allow women and girls to heal from abuse and develop healthy practices.

- Restore the choice to women about whom they have sexual engagements with, when and how.
- Ensure that abusers have access to treatment, and are directed to treatment by those around them.

In particular, the following recommendations in the *Blueprint* would have a direct effect on increasing personal health practices and coping skills, particularly of men who choose violence as a way of dealing with their problems:
- Foster prevention initiatives led by women working in partnership with men to educate men and boys on ways to acknowledge, challenge and prevent violence, including intensive work with perpetrators.

Gender

"Women in Canada experience more adverse social determinants of health than men. The main reason for this is that women carry more responsibilities for raising children and taking care of housework. Women are also less likely to be working full-time and are less likely to be eligible for unemployment benefits. In addition, women are employed in lower paying occupations and experience more discrimination in the workplace than men."
– Mikkonen and Raphael, York University[38]

Although Canadian women do live longer than men on average, they also experience more health problems and disability over their lifetimes.[39]

Violence against women undermines gender equality and closing the gendered health gap by...
- Preventing women from reaching their full potential. This includes the actual physical, sexual and psychological violence and the threat of it.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would...
- Call attention to the gendered nature of violence, and put in place what is needed to respond to and prevent violence against women.

By ensuring appropriate responses for survivors, perpetrators and children, and by contributing to violence prevention, ALL of the recommendations in the *Blueprint* would have a direct effect toward achieving gender equality in Canada.

Disability

"Studies indicate that 60% of women with disabilities are likely to experience a form of violence during the course of their adult lives,[40] and that women with disabilities are sexually assaulted at a rate at least twice higher than that experienced by the general population of women.[41] Women with intellectual disabilities and Deaf women experience violence at even higher rates than those experienced by women with other disabilities. In a study comparing the rates of cases of sexual and physical assault among women with disabilities to those of women without disabilities, it was determined that women with disabilities were four times more likely to have experienced sexual assault than women without disabilities.[42] Women with disabilities and Deaf women are at risk of violence in many forms, including neglect, physical abuse, sexual abuse, psychological abuse and financial exploitation.[43] The long and short term ramifications of this violence are severe and include mental, physical and health problems. Moreover, according to the World Health Organization, the implications of violence and abuse are also social and economic, as women's lives are affected through isolation and a loss of the ability to work, which subsequently engenders a loss of employment and wages and a decrease in their capacity to take care of themselves and their children.[44] As a result of abuse, women with disabilities and Deaf women are being further excluded from full participation in society."
– DisAbled Women's Network of Canada[45]

Violence against women undermines the full economic, social and political participation of women and girls with disabilities by…

- Compounding the problems and barriers already faced by women with disabilities, such as employment discrimination, lack of access to accessible housing, and greater risk of low income.
- Encouraging the dependence of women on abusive partners or caregivers to meet basic needs.
- Potentially adding to a physical or mental disability in terms of the damaging long-term effects of physical, sexual and psychological abuse.
- Intensifying low self-worth and stigma that women and girls with disabilities already absorb from society, which can itself lead to anxiety, depression and other mental health concerns and a lowered ability to reach out for help.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…

- Lead to an intersectional approach to ending violence against women that takes disability into account in terms of income security, food security, health and social services, correctional services, and culturally-appropriate services, as people who are Deaf or living with a disability are a part of every racial, ethnic, linguistic and cultural group.

In particular, the following recommendations in the *Blueprint* would have a direct effect on addressing the increased risks and varying needs of victims and perpetrators who are Deaf or living with a disability:

- Ensure programming meets the specific needs of youth, older adults, people with disabilities and Deaf people, immigrants and refugees, and LGBTQ communities in addressing and preventing gender-based violence.

Race, Immigration Status and Culture

"Violence against women isn't picky. It crosses various lines including socio-economic status, religion, race, and culture. Statistics from the Canadian Women's Foundation show that 50% of Canadian women experience physical or sexual assault after the age of 16 and that a woman is killed, on average, every six days by her intimate partner…. For racialized women, exposure to recurrent poverty and racism in everyday life puts them at greater risk for domestic violence…. Poverty is a racialized issue with racialized Canadians earning 81.4 cents for every dollar earned by non-racialized Canadians; and the reality for racialized women is even worse. In Toronto, 62% of people living in poverty identify with a [non-White] racial group. While poverty doesn't necessarily lead to domestic violence, consequences of it can exacerbate the effects of violence. In some cases, poverty keeps women dependent on their partners, making it difficult to leave abusive relationships. In other cases it isolates women, therefore limiting their social supports to escape violence. Negative outcomes of poverty, disproportionately experienced by racialized women, increase the threat of violence and limit victims' options.

Multiple barriers to services also affect racialized women. A study by Women's Health in Women's Hands Community Health Centre found that one in five women have experienced racism when using the healthcare system, as a result of cultural insensitivity, stereotypes, name-calling, and inferior quality of care. Further, immigrant women who do not speak English or French have difficulties navigating through an often unaccommodating system. These situations do not encourage or assist racialized women to access help. As well, mainstream services that do not consider cultural norms and practices risk isolating women from their communities and/or not serving their immediate needs."

– Vanessa Abban, Wellesley Institute[46]

Violence against women undermines equality for women of various racial, ethnic, cultural or other backgrounds or geopolitical origins by…

- Putting some women at greater risk because of their immigration status. Some women fear sponsorship breakdown and deportation because they are told by the abuser that if they leave, they will be deported. Women with precarious immigration status (temporary foreign workers, live-in caregivers, trafficked or in the country illegally) are particularly vulnerable to coercion and abuse.[47]
- Compounding the racist violence and hate crimes[48] many women in Canada already face. Statistics Canada reports that "[c]ompared to hate crimes targeting other religions, hate

crimes targeting Muslim populations were more likely to be violent offences (33%). Over the period from 2010 to 2013, Muslim populations had the highest percentage of hate crime victims who were female (47%)."[49]
- Providing an additional tool for abusers to justify their violence. Violence against women is intersectional – that means some women may be at greater risk because they are part of societal groups which face discrimination, hatred and stereotyping.
- Making it more difficult for some women to access services without being subject to racism, homophobia or other forms of discrimination, or access services that are in their language and respectful of their culture. This is particularly true in areas of Canada in which specialized services or culturally appropriate services do not exist and where health and social service providers are not adequately trained to respect all clients no matter what their language or background.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would...
- Recognize and respond to the fact that women's experiences of violence are shaped by multiple forms of discrimination and disadvantage, which intersect with race, ethnicity, religion, gender identity, sexual orientation, immigrant and refugee status, age, and disability. The only way to ensure that prevention programs and other services meet the needs of women from various backgrounds is by asking them and listening to them.

In particular, the following recommendations in the *Blueprint* would have a direct effect on addressing the increased risks some women face on the basis of race, culture, language, and immigration status:
- Ensure that immigration policy does not result in sponsored immigrants having to remain in abusive situations. Ensure that migrant workers or women with precarious immigrant status have full access to service responses and are not legally dependent on remaining with abusive sponsors or employers.
- Ensure programming meets the specific needs of youth, older adults, people with disabilities and Deaf people, immigrants and refugees, and LGBTQ communities in addressing and preventing gender-based violence.

Indigenous Status

"The poor health status of the Aboriginal women due to inequities in SDH [social determinants of health] in Canada is quite well documented.... Aboriginal women are at higher risk for alcohol and substance abuse, mental illness, suicide, diabetes (including gestational diabetes), cervical cancer, as well as more frequently experience deleterious circumstances such as poverty, alarmingly high rates of spousal, sexual and other violence, inability to access safe, secure, affordable, nondiscriminatory housing for themselves and their families (on- and off-reserve, in rural, remote and urban settings), and barriers and lack of access to higher education, job training, employment, entrepreneurial loans and investments, and related socioeconomic opportunities.... The situation of

Canadian Aboriginal women thus aptly illustrates the intersection of race and gender – a double disadvantage which presently contributes exponentially to negative life and work experiences, the continuation of multiple forms of systemic discrimination, and the size of the gap in health to be closed for Aboriginal women in Canada."
– Native Women's Association of Canada[50]

First Nations, Inuit and Métis (Indigenous) women are vastly more likely to be murdered than other Canadian women.[51] Indigenous women report a sexual assault rate of 115 incidents per 1,000 population, much higher than the rate of 35 per 1,000 recorded by their non-Indigenous counterparts.[52]

Violence against women undermines closing the socioeconomic gap between Indigenous peoples and other Canadians by…

- Threatening, hurting and killing Indigenous women and girls.
- Undermining the ability of victims to access education, employment and a healthy life.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…

- Respect the particular histories and needs of Indigenous communities which are emerging from the intergenerational trauma entrenched by residential schools, colonization, forced relocations, forced replacement and loss of control over economic, social, political and religious systems, racism and exclusion. This underlying trauma is the root of the higher incidence of violence, addictions, suicides and socioeconomic exclusion faced by many Indigenous peoples.
- Recognize and support Indigenous people's successful efforts and knowledge about healing from violence, currently only accessible through small-scale limited term projects, and Indigenous models of social determinants of health, which can include spirituality, culture, language and a connection the land.[53]

In particular, the following recommendations in the *Blueprint* would have a direct effect on reducing barriers to Indigenous women and girls achieving their full social, economic and political potential and health:

- Support First Nations, Métis and Inuit organizations and governments to develop prevention strategies for their communities.
- Ensure access to court diversion programs for First Nation, Métis and Inuit women to break cycles of violence leading to criminalization and incarceration of violence survivors.
- Expand police cultural security training on all forms of VAW [violence against women] and increase First Nation, Métis and Inuit presence on police forces.

Social Exclusion and Marginalization

"Social exclusion creates the living conditions and personal experiences that endanger health…. Social exclusion creates a sense of powerlessness, hopelessness and depression that further diminish the possibilities of inclusion in society…. Socially excluded Canadians are more likely to be unemployed and earn lower wages. They have less access to health and social services, and means of furthering their education…. Excluded groups have little influence upon decisions made by governments and other institutions. They lack power."
– Mikkonen and Raphael, York University[54]

"People who suffer from adverse social and material living conditions also experience high levels of physiological and psychological stress…. At the physiological level, chronic stress can lead to prolonged biological reactions that strain the physical body…. Research evidence convincingly shows that continuous stress weakens the resistance to diseases and disrupts the functioning of the hormonal and metabolic systems. Physiological tensions provoked by stress make people more vulnerable to many serious illnesses such as cardiovascular and immune system diseases, and adult-onset diabetes. At the psychological level, stressful and poor living conditions can cause continuing feelings of shame, insecurity and worthlessness. In adverse living conditions, everyday life often appears as unpredictable, uncontrollable, and meaningless. Uncertainty about the future raises anxiety and hopelessness that increases the level of exhaustion and makes everyday coping even more difficult."
– Mikkonen and Raphael, York University[55]

We have looked at types of exclusion and marginalization based on disability, gender, race and Indigenous status, but social exclusion can be based on other factors too, such as societal and institutional attitudes and barriers associated with mental health, age, sexuality, gender identity, low income, occupational status, functional illiteracy, homelessness, rural origin and any other excuse people use for treating other people with disrespect.

Violence against women compounds social exclusion and marginalization by…
- Increasing the marginalization that women who are already on the edges of society face.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…
- Recognize and respond to the fact that women's experiences of violence are shaped by multiple forms of discrimination and disadvantage.

In particular, the following recommendations in the *Blueprint* would have a direct effect on addressing the increased risks and varying needs of people who face multiple challenges:

- Ensure programming meets the specific needs of youth, older adults, people with disabilities and Deaf people, immigrants and refugees, and LGBTQ communities in addressing and preventing gender-based violence.

Social Support Networks

 "Some experts in the field have concluded that the health effect of social relationships may be as important as established risk factors such as smoking, physical activity, obesity and high blood pressure."
– Public Health Agency of Canada[56]

Violence against women undermines social support networks by…
- Isolating women from family and friends, which is very often a component of abusive and controlling behaviour.
- Making some members of small or remote communities in which services are absent or not in full-time operation afraid to help survivors of violence for fear that the abusive individual might come after them.

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…
- Ensure that adequate services are present and accessible so survivors of violence who have no one to help them do have somewhere to turn.
- Enable women to once again be full participants in their community and society.

In particular, the following recommendations in the *Blueprint* would have a direct effect on increasing social support needed by women:
- Provide adequate funding to service providers including sexual assault, rape crisis and other community-based services to deliver immediate 24/7 crisis support.

Early Life / Healthy Child Development

"Experiences from conception to age six have the most important influence of any time in the life cycle on the connecting and sculpting of the brain's neurons…. A loving, secure attachment between parents/caregivers and babies in the first 18 months of life helps children to develop trust, self-esteem, emotional control and the ability to have positive relationships with others in later life…. Infants and children who are neglected or abused are at higher risk for injuries, a number of behavioural, social and cognitive problems later in life, and death."
– Public Health Agency of Canada[57]

"Early childhood experiences have strong immediate and longer lasting biological, psychological and social effects upon health. "Latency effects" refer to how early childhood experiences

predispose children to either good or poor health regardless of later life circumstances. For example, low birthweight babies living in disadvantaged conditions are generally more susceptible to health problems than babies of advantaged populations. These latency effects result from biological processes during pregnancy associated with poor maternal diet, parental risk behaviours, and experience of stress. Health effects may also result from early psychological experiences that create a sense of control or self-efficacy. "Cumulative effects" suggest that the longer children live under conditions of material and social deprivation, the more likely they are to show adverse health and developmental outcomes. Accumulated disadvantage can lead to cognitive and emotional deficits such as incompetence and emotional immaturity. In addition, adverse childhood experiences can create a sense of inefficacy – or learned helplessness – which is a strong determinant of poor health."

– Mikkonen and Raphael, York University[58]

Violence against women undermines healthy child development by…

- Making children afraid for their lives and physical safety and the physical safety and life of their mother. Children in homes in which the mother is being abused are at much higher risk of also being physically or sexually abused.[59]
- Disrupting the bonds between parents and children.
- Modelling violent behaviour and disrespect toward women.[60]
- Leading to many physical and mental health impacts on children, which can include "developmental delay, headaches, stomach aches, bed wetting and soiling, eating disorders, self-mutilation or burning, thoughts of suicide, dissociation, inappropriate sexual behaviour, … and very low self-esteem, difficulty trusting others, difficulty in problem-solving, relationship problems, high levels of anger and aggression …"[61]
- Increasing the risk of becoming victims and perpetrators themselves later in life.[62]
- Leading to serious mental and physical repercussions for girls who are sexually or physically assaulted, including an increase in suicidal behaviour.[63]

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…

- Reduce the numbers of Canadian children bearing the lifelong mental and physical impact of sexual and physical assault and witnessing violence against their mother.

In particular, the following recommendations in the *Blueprint* would have a direct effect on increasing healthy child development:

- Ensure appropriate services including counseling and safe childcare for children affected by domestic violence.
- Establish family justice centres that allow for exchange of children (due to custody/access issues) and supervised access in a manner that is safe for both mothers and children.
- Make it mandatory for judges to consider family and sexual violence in access and custody decisions.

Biology and Genetic Endowment

"The basic biology and organic make-up of the human body are a fundamental determinant of health. Genetic endowment provides an inherited predisposition to a wide range of individual responses that affect health status."
– Public Health Agency of Canada[64]

Violence against women undermines children's biology and genetic endowment by…
- Affecting gene expression and altering children's ability to adapt to stressors later in life, through the negative biological effects of early chronic stress and trauma.[65]
- Increasing stress and injury during pregnancy, which also has neurophysiological effects on the fetus, increasing the resulting child's risk of psychiatric disorders later in life.[66]
- Increasing the risk of self-medication with alcohol or other substances as a coping mechanism for the abuse,[67] which can affect a developing fetus permanently altering its biology. Effects of Fetal Alcohol Spectrum Disorder may include low body weight, learning disabilities, speech and language delays, intellectual disability or low IQ, difficulty in school, poor coordination, hyperactive behaviour, difficulty with attention, poor memory, poor reasoning and judgment skills, vision or hearing problems, and heart, kidney and bone problems.[68]

Implementing a *National Action Plan on Violence Against Women and Girls* as outlined in the *Blueprint* would…
- Give infants and children a genetically and biologically healthier start in life through the reduction or elimination of the epigenetic, physical, psychological and socioeconomic effects of violence against their mothers.

In particular, ALL of the recommendations in the *Blueprint* would have a direct effect on reducing the stress, trauma and negative economic consequences experienced by women who experience violence, and their children.

CONCLUSION

Violence against women is a major public health issue, as well as an issue of justice and equality. It requires a coordinated and well-resourced effort to address the problems created by violence against women and to prevent them. All Canadians can expect to benefit from these efforts.

This brief does not cover all of the recommendations in *A Blueprint for Canada's National Action Plan on Violence Against Women and Girls*. You can find the complete *Blueprint* at http://endvaw.ca/our-work/blueprint-for-canadas-national-action-plan-on-violence-against-women.

The profound structural change needed to secure investments in the social determinants of health in our complex federal system will occur only if we succeed in raising public awareness and developing political will. – The Honourable Carolyn Bennett, 2009[69]

Endnotes

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