

Table of Contents

Executive Summary	2
1. Introduction	4
1.1 Context and Background	4
1.1.1. Definitions of Violence Against Women	4
1.1.2. Significance of the Issue	6
Violence against women on a global scale	7
Violence against women in Canada	7
Violence against women in Ontario	8
Violence against women in rural areas	9
Impact of VAW	10
1.2 Overview of the Research	12
1.2.1 Research Purpose and Questions	12
1.2.2 Research Approach	12
1.2.3 Research Methods	13
2. Prevalence of VAW in Perth and Huron	15
2.1 Demographic Profile of Perth & Huron	15
2.2 Defining Violence Against Women	15
2.3 Perceptions of Prevalence of Violence in Perth & Huron	16
2.4 Stories Illustrating the Prevalence of VAW	20
3. Impact of Violence Against Women	23
3.1 Individual Impact of VAW	23
Physical Impact	23
Psychological Impact	23
Economic Impact	23
Social Impact	24
3.2 Community Impact of VAW	24
Social Impact	24
Economic Impact	24
Legal Impact	24
4. Existing Services In Perth and Huron	25
4.1 Overall Existing VAW Services	25
4.2 Strengths in Current Response to VAW in Perth & Huron	26
5. Gaps in Services in Perth and Huron	31
5.1 Identified Gaps in VAW Services	31
5.2 Barriers to Accessing VAW Services	35
5.2.1 Living in Rural Communities	35
5.2.2 Specific Population Barriers	37
6. Recommendations	39
7. References	41
8. Appendices	43
Appendix A: Agency survey findings	43
Appendix B: Good Practices	48



EXECUTIVE SUMMARY

This is a research report on violence against women (VAW) in Perth and Huron Counties. The study was commissioned by the Social Research and Planning Council Perth Huron (SRPC) and conducted by the Centre for Community Based Research (CCBR).

The purpose of this study was to analyse VAW in Perth and Huron Counties and the current service system. This study gathered available information related to the prevalence of violence against women and the services available in Perth and Huron Counties in order to identify any service gaps that may exist as well as recommendations.

Women who experience violence may be considered a “hidden population” who are understandably, a challenge to engage in research on this subject. However, this study presents the stories of several local women, which sheds light on the nature and impact of VAW, and indicates the significance of this study.

The main findings of the study are organized according to the following categories: Prevalence of VAW in Perth and Huron Counties; Impact of VAW; Existing Services; Gaps and Barriers; Good Practices and Recommendations.

As defined by the United Nations, violence against women constitutes “Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.”¹ The prevalence of VAW in Perth and Huron Counties is not clear and there is uncertainty about it in comparison to other areas of Ontario. One locally specific factor was identified - that abuse is under-reported because of isolation in this rural area. Although all forms of VAW occur, emotional/psychological abuse was identified by research participants as the most prevalent in Perth and Huron Counties. It was also identified that VAW occurs more often within the private sphere than the public sphere.

VAW has a devastating impact on women. Women’s physical and psychological health are negatively impacted, as is their economic and social life. VAW also has a negative social, economic and legal impact on the community as a whole. Socially, there is often stigma attached to women with lived experience of violence. Economically, VAW impacts the community as services, including healthcare, are drawn upon. Also, women who experience violence face challenges in maintaining employment or entering the labour market. The legal impact of VAW is the backlog that is created within legal services, particularly in the court system.

There are a variety of organizations in Perth and Huron Counties that serve victims of VAW. It was identified that there are connections and collaborations between agencies and that in both counties there are committees that advocate to prevent VAW and improve services. The three

1 Canadian Women’s Foundation, “Fact Sheet- Moving Women Out of Violence”



most commonly offered services are advocacy, referrals and counselling. The three services that were most sought after by women are shelter and temporary housing, counselling and financial aid services.

Several gaps in services were also identified and include a lack of capacity to serve women within Perth and Huron Counties. In particular, there is a shortage of shelter space, lack of local sexual assault services, lack of shelter specific services for women with substance abuse issues, no Domestic Abuse Response Team in Perth County, limited credit counseling services for women, and a general gap in services for children and men.

Some of the barriers to accessing violence against women services include: financial dependence on the perpetrator, a lack of awareness of services, lack of transportation, and social stigma. Good practices in preventing VAW have been identified by the United Nations' Division for the Advancement of Women. Good practices in law, in the provision of services and in prevention, are outlined in the report with international examples.

Several recommendations were made by research participants. Below is a list of recommendations resulting from this study:

- Increase the number of beds in emergency shelters and second stage housing in Perth and Huron Counties to provide safe spaces for women.
- Increase program funding to violence against women services for women, children and men in Perth and Huron Counties.
- Expand VAW prevention strategies in Perth and Huron Counties
- Expand sexual assault and forensic services in Perth and Huron Counties to meet the needs of women in their own communities.
- Establish a harm-reduction approach for women in shelter who are experiencing substance use issues in Perth and Huron Counties.
- Increase collaboration between VAW agencies in Perth and Huron Counties, working together to: explore a tracking system that will reflect the prevalence of violence against women in Perth and Huron Counties; identify the needs of specific populations; and expand VAW prevention strategies in Perth and Huron Counties.



1. INTRODUCTION

This report is a snapshot of violence against women (VAW) in Perth and Huron Counties. This research study was conducted by the Centre for Community-Based Research (CCBR) on behalf of the Social Research and Planning Council Perth Huron (SRPC). The overall purpose of the study was to conduct an analysis of violence against women in Perth and Huron Counties and write a report outlining the findings. This study included gathering available information related to the prevalence of VAW and the services available in Perth and Huron Counties in order to identify any service gaps that may exist. It also sought to identify any best practices and recommendations for future planning.

WHY THIS REPORT? The SRPC determines its research topics by gathering community and committee input regarding prevalent social issues. VAW was identified in 2010-2011 as one of the top five areas of concern in Perth and Huron Counties needing examination.

1.1 CONTEXT AND BACKGROUND

VAW is regarded worldwide as a violation of human rights and a significant impediment to achieving gender equality. Having its roots in power imbalances and structural inequality between men and women, violence against women deprives victims of fundamental freedoms such as the right to live with security, physical and mental health, education, work, housing, and participation in public life. Such violence feeds the subordination of women and the concept of gender inequality affecting not only victims individually, but also their families and the communities they reside in. It is compounded by discrimination on the grounds of race, ethnicity, sexual identity, social status, class, and age.

1.1.1. DEFINITIONS OF VIOLENCE AGAINST WOMEN

The most widely used definition is provided by the United Nations and defines violence against women as:

“Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.”²

There are many forms of such violence, and one person may experience multiple types. The Department of Justice identifies five types of “spousal abuse” which are indicative of the types of violence experienced by women, although this list is not exhaustive:

Physical abuse may occur once, or repeatedly, and involves the use of physical force that leads to the injury of someone. Slapping, choking, or punching a person, using hands or objects as weapons, threatening a person with a knife or gun or committing murder are forms of physical abuse.

2 Canadian Women's Foundation, “Fact Sheet- Moving Women Out of Violence”



Sexual abuse consists of all forms of sexual assault, sexual harassment, and sexual exploitation and involves the use of threats, intimidation, or physical force to force a person into unwanted sexual acts.

Emotional or verbal abuse includes verbal attacks, shouting, screaming, and name-calling. The use of criticism, verbal threats, social isolation, intimidation or exploitation to dominate someone is known as emotional or verbal abuse. Making degrading comments about a person's body or behaviour, forcing her to commit degrading acts, confining her to the house, destroying her possessions and threatening to kill her or the children are some examples that fall within this category.

Economic abuse includes stealing or controlling a person's money or valuables, forced labor or denying the right to work.

Spiritual abuse involves using a person's religious or spiritual beliefs to manipulate, dominate, and control them. It may also include preventing someone from engaging in religious or spiritual activities and criticizing or ridiculing their beliefs.³

Tracy's Story*

Tracy recalls her first experience of sexual abuse when she was approximately three years old and was abused by a teenager. She said she was emotionally neglected by her parents and did not tell her parents about the incident because the perpetrator threatened her life. She was sexually assaulted twice as a teenager by a driver training instructor and by her employer in the workplace. Growing up in a small, rural community, Tracy believed this was normal behaviour and was afraid and ashamed to tell her parents. As a teenager, she became romantically involved with another teen who was neglected by his parents and they later married. Throughout her marriage, she experienced all forms of abuse from her husband in both the private and public sphere. Unfortunately, Tracy experienced many difficulties accessing services in her community and was forced to leave her hometown in order to get the help she needed.

When I was 7, I didn't tell my mom what was going on [at first]. When I did [tell her], she said, "That's my husband you're talking about."

~ Woman with lived experience

***Note:** Personal details, including names, provided by those interviewed during this study have been omitted, in order to protect the privacy of study participants.

All images appearing in this report are stock photos, these images do not intentionally represent the likeness of any study participants nor do they imply that models are women with lived experience of violence or perpetrators.

3 Department of Justice Canada, "Spousal Abuse: A Factsheet From The Department of Justice Canada"



1.1.2. SIGNIFICANCE OF THE ISSUE

“ Violence is not something that happens between two people, it’s the whole system that creates the condition of violence between people and there has to be responsibility at all levels to make change because we create the society we live in. We create it together. ”

- Key informant*

Violence against women represents a unique aspect of the wider social problem of violence, requiring special attention and a gendered analysis. Although men also experience violence, this study focuses on the experiences of women, recognizing the gendered nature of the violence they experience, and its basis in the social conditions of gender inequity. According to Amnesty International, women represent the majority of sexual assault and spousal violence victims. Around the world at least one woman in every three has been beaten, coerced into sex, or otherwise abused in her lifetime.⁴ Every year, violence in the home and the community devastates the lives of millions of women. It can be difficult to accurately quantify the full extent of this social problem because not all women that experience violence seek support. In Ontario, less than a quarter of victims report the incident to the police and many experience violence multiple times before they report it. In Statistics Canada’s 2009 study on family violence in Canada, it was reported that more than 6% of Ontario women living in a common-law or marital relationship report experiencing physical or sexual assault by a spousal partner.⁵

As a reflection of the elements associated with living in rural communities, rural areas see higher rates of domestic violence than urban areas.⁶ The physical isolation due to their geographical location, rural ethics and character, community complacency, limited access to information and services, the lack of autonomy and confidentiality and attitudes are some of the elements associated with violence against women in rural areas.⁷

VAW has serious repercussions on victims and their families and the communities they reside in, leaving both visible and invisible marks. It deprives victims of fundamental freedoms and continues to be a burden on society, putting the health, justice and social services under stress.

4 Amnesty International USA, “Violence Against Women Information”, available at: <http://www.amnestyusa.org/our-work/issues/women-s-rights/violence-against-women/violence-against-women-information>

5 Statistics Canada (2009), “Family Violence in Canada: A Statistical Profile”, Catalogue no. 85-224-X <http://www.statcan.gc.ca/pub/85-224-x/85-224-x2010000-eng.pdf>

6 Government of Canada (2011), “ Victims of Crime Research Digest”, Issue 04/2011

7 Department of Justice Canada (2000), “The Ontario Women Abuse Study (ORWAS): Final Report



Violence against women on a global scale

VAW is a global phenomenon that persists in all the countries of the world. Studies have been carried out by a wide range of bodies such as government ministries, national statistical offices, universities, international agencies, NGOs and women's rights organizations. The results have shown that despite efforts to prevent and address discrimination and women equality issues, violence against women continues to be a persistent human rights violation on a global level.⁸

The International Violence Against Women Survey (IVAWS) addresses "men's violence against women, especially domestic violence and sexual assault".⁹ Having reached 30 countries as of 2008, the project published a comparative research report based on data from 11 of those countries. Below is a summary of some of the key findings:

- VAW is a universal phenomenon and occurs in every age and economic group.
- 35-60% of women in the 11 countries surveyed have experienced male violence.
- 22-40% of women have experienced intimate partner violence.
- Less than one third of women reported their experience of violence to the police, and women were more likely to report stranger violence than intimate partner violence.
- Approximately one fourth of women who experience violence have not communicated their experience to anyone.

Violence against women in Canada

VAW is a devastating reality for many Canadian families. According to Statistics Canada, seven percent of women who were living in a common-law or marital relationship reported that they had been physically or sexually assaulted by a spousal partner at least once during the previous five years.¹⁰ The highest rates of spousal assault against women are registered in the Provinces of Prince Edward Island, Saskatchewan, Alberta, and British Columbia.

With current and former spouses making up the largest number of intimate partner assault offenders recorded by the police, women reported higher rates of violence by previous spouses compared to current spouses.

In general, women are more frequently subjected to severe forms of violence from men than men are from women. In 2004, twice as many women than men were beaten by their partners and four times as many were choked; 16% of women who were victimized by a spouse were

8 United Nations (2006), "Ending Violence Against Women, From Words To Action", Study of the Secretary-General, Sales

9 HEUNI (2008), "The International Violence Against Women Survey", available at: <http://www.heuni.fi/text/Etusivu/1198084791730>

10 Statistics Canada (2006), "Measuring Violence Against Women" Statistical Trends 2006, Catalogue no. 85-570-XIE



sexually assaulted, and twice as many female as male victims of spousal assault reported chronic, ongoing assaults (10 or more). Women were also more likely to be victims of stalking.

The percentage of men who were charged with first degree murder in spousal killings has risen over the past 30 years from 24% in the period 1975 to 1984 to 49% in the most recent decade. The percentage of women who were charged with first degree murder also rose from 16% to 25%.

Violence against women in Ontario

According to The Ontario Women's Directorate, 6% of Ontario women living in a common-law or marital relationship report experiencing physical/sexual assault by a spousal partner, placing Ontario among the regions with the lowest rates of spousal assault against women, despite registering the highest number of spousal homicides in Canada during 1975-2004.¹¹ The majority of victims of spousal violence are women, representing 83% of victims. Women experience more serious forms of spousal assault than men, they are three times more likely to report that they had been beaten, choked, sexually assaulted, or threatened with a gun or knife by their partner or ex-partner. Less than one quarter of victims of spousal violence report the incident to the police. Many victims are victimized multiple times before they report to police.

Below we highlight some other key characteristics of violence against women in Ontario:

- Spousal violence is most prevalent amongst 25 to 34 year olds.
- From 2002 until 2009 the Ontario Domestic Violence Death Review Committee reports that 80% of victims were adult females.¹²
- In domestic homicide cases in Ontario men are the perpetrators in 92% of cases and women are the victims in 91% of cases.
- Aboriginal women are three times more likely to experience spousal violence than non-Aboriginal women.
- The rate of spousal homicide for Aboriginal women is eight times greater than for non-Aboriginal women.
- Almost 40% of women assaulted by spouses said their children witnessed the violence against them, and in many cases the violence was severe.
- A snapshot survey found that there were over 30,000 women and children staying in various types of shelters across Ontario on a given day.

11 Ontario Women's Directorate, Resources and Links, available at: <http://www.women.gov.on.ca/english/resources/stats.shtml>

12 Domestic Violence Review Committee (2012), 2011 Annual Report, Office of the Chief Coroner.



- For every 100,000 married, common-law and separated women in Ontario, there are 29 women in shelters to escape domestic violence.
- Over half of abused women are admitted to shelters with their children.

Violence against women in rural areas

Although there are many similarities in experiences among rural and urban women, some important differences suggest that VAW in rural areas is contextual. According to a report by the Public Health Agency of Canada in 2004, there are five key elements that distinguish VAW in rural areas from VAW generally.¹³ Brief descriptions of barriers for each element are provided below in relation to rural areas:

Geographical location and isolation – it is easier to hide abuse, lengthy response times, lack of access to people to help in an emergency, and lack of public transportation.

Economic conditions – lack of affordable housing and employment, those who leave often end up in poverty, women on farms are often more financially dependent because they do not receive a wage for their work and have no employment insurance or pension.

Lack of access to services – increased distance from many specialized services for family violence, complex needs and service delivery (e.g. lawyers, social services, mental health, school counsellors) are further challenged by the lack of centralized locations as in more urban areas.

Lack of confidentiality – challenge in preserving confidentiality, social stigma may be a deterrent to getting help, fear of exposure, strong ethic of self-sufficiency, belief that family matters are private, and lack of trust in service providers.

Attitudes – slow to admit that domestic violence is a serious problem; stigma attached if women use mental health services; hard to admit to abuse because women feel it is their fault; leaving means leaving a way of life, one's home and one's community; and disruption of leaving is even greater for farm women because there is no separation between home and work.



13 Public Health agency of Canada. (2004), "How prevalent is women abuse in rural areas?" Canadian Health Network quoted in Rural Public Health Report (2007). Haldimand-Norfolk Health Unit.



Impact of VAW

Violence against women influences many aspects of women's lives and generally involves long-lasting impacts that can negatively affect how women function independently. Women experience personal impacts that change the way their families and children function and are detrimental to mental health and well-being. When women experience VAW, it is difficult to separate unhealthy relationships from other facets of life because personal and social aspects are intertwined. Not only do women experience tumultuous personal lives, but the effects of VAW impact the entire community.

Violence against women impacts children. Specifically, it has influence over their behaviour, attitudes, mental health, and emotional stability. It has been estimated that children see or hear 40% to 80% of domestic assaults, and each year, approximately 360,000 Canadian children witness or experience family violence. Long-term exposure to family violence can negatively affect children's brain development and their abilities to learn. This exposure can lead to a range of behavioural and emotional issues such as increased anxiety, aggression, bullying, phobias, and insomnia. In addition, children who witness violence have an increased risk of developing psychiatric disorders compared with children from non-violent homes. The cycle of violence continues because these children are more likely to become victims or abusers as adults compared with other children who did not witness violence regularly.¹⁴



14 Canadian Women's Foundation, "FACT SHEET- Moving women out of violence"



The impact of violence against women on women's mental health is significant and can operate as a bidirectional relationship. Women with varying levels of mental health issues are more likely to experience VAW compared with women who do not have mental health concerns. At the same time, mental health issues often develop as a result of VAW, thus the dual relationship between the experiences of VAW and its effects on mental well-being. Significantly higher rates of depression are found in women who have experienced violence compared with the general population of women. For example, the lifetime prevalence of depression for women in Canada is 12.2%. Among mental health inpatient populations, approximately 83% of women were exposed to severe physical or sexual violence as a child or as an adult.

The economic impact of violence against women is substantial for women individually and for the greater community. For women, the personal costs of being involved in the justice system can put a financial strain on the family. Paying for lawyers and taking time off work, if she is employed and/or has access to family financial resources, can significantly impact the household income. In cases where abused women do not have access to the family financial resources, if they decide to leave, they leave with no money. And, women bear the burden of additional out-of-pocket expenses for any medications or services that are not covered by the public healthcare system. Employment is negatively affected as a result of being distracted by what is happening personally and the likelihood of working fewer hours because of the need to attend appointments. Women who utilize any of the public services for VAW, such as the justice and healthcare system, are increasing the load on the need for more public funding. If women are not employed, further demand is placed on social assistance so that they have money to financially support their family.¹⁵

15 United Nations (2005), "The Economic Costs of Violence Against Women: An Evaluation of the Literature", available at: www.un.org/womenwatch/daw/vaw/expert%20brief%20costs.pdf



1.2 OVERVIEW OF THE RESEARCH

The Centre for Community Based Research (CCBR) was contracted by the Social Research and Planning Council Perth Huron to carry out this research study on violence against women in Perth and Huron Counties. CCBR is an independent, not-for-profit organization established in 1982 (www.communitybasedresearch.ca). Located in Kitchener, Ontario, CCBR is committed to social change and the development of communities and human services that are responsive and supportive, especially for people with limited access to power and opportunity.

1.2.1 RESEARCH PURPOSE AND QUESTIONS

The overall purpose of the study was to conduct an analysis of violence against women in Perth and Huron Counties and write a report outlining the findings. This study included gathering available information related to the prevalence of violence against women and the services available in Perth and Huron Counties in order to identify any service gaps that may exist.

This study and report was guided by the following main research questions:

- What is the prevalence of violence against women in Perth and Huron?
- What is the impact of violence against women in Perth and Huron?
- What are the existing services and supports available for women who experience violence in Perth and Huron?
- What are the gaps in existing services and supports for women who experience violence in Perth and Huron?
- What are the good practices and recommendations that could inform future funding and development of services?

1.2.2 RESEARCH APPROACH

This project utilized a participatory action research approach, which incorporates two main elements: an advisory committee and community researchers. An advisory committee was formed with members of the Social Research & Planning Council Perth Huron and representatives of community agencies to guide all processes of the research. The advisory committee received regular updates regarding the project and were given the opportunity to review the findings and the report. Two community researchers who work as VAW service



providers were trained in conducting interviews by the CCBR research team in a one-day training session. The community researchers conducted interviews with women who have lived experience with violence.

1.2.3 RESEARCH METHODS

This research project used multiple methods to gather data, including:

Literature review

The purpose of the literature review was to partially inform the research questions and to provide context for developing the data collection tools. Academic and community literature were reviewed and a general internet search using key words was conducted.

Online surveys

Two online surveys were developed for service providers and women with lived experience in Perth and Huron Counties. The survey for service providers was focused on VAW to gain insight into the current state of services and supports, any gaps that may exist, and barriers women face in accessing these services. A second online survey was developed for women with lived experience of violence to report what type of abuse they have experienced, the services they have accessed, and any barriers they have faced in accessing services. Both surveys were promoted through the advisory committee. The women's survey was also promoted through flyers and service providers.

Seventeen (n=17) representatives from agencies serving women who experience violence completed the survey for service providers. Not all respondents answered the survey in its entirety, thus the number of respondents for each question are indicated accordingly in the tables in the appendix. The majority of agencies that completed the survey were located in Stratford, meaning the survey responses will describe results mainly from that city. The names of the agencies who responded to the survey and where they are located in Perth and Huron Counties are indicated in Table 1 (Appendix A).

The second survey was completed by women who have experienced violence. However, only four (n=4) participants completed the survey. It is not clear why the response rate was so low, but, it is possible that women did not want to complete the survey due to the sensitive nature of the topic. Results from these women were used as anecdotal evidence and are included in the analysis of women's experiences and their perspectives below.

Focus groups

Three focus groups with 8-12 purposely selected service providers were held in Perth and Huron Counties. The purpose of the focus groups was to gain a deeper understanding of the current state of services and supports and to identify the gaps and barriers to accessing these services for women.



One focus group was conducted with Perth County service providers, and was attended by representatives from the Emily Murphy Centre, Victim Services, Victim Witness, Shelterlink and Choices for Change.

The second focus group was conducted at Optimism Place Women's Shelter and Support Services with the Stop VAW Committee from Perth and staff from Optimism Place Women's Shelter and Support Services. Participants from the Stop VAW Committee included representatives from The Emily Murphy Centre, Family & Children's Services of Perth, Stratford Police, Corrections Services, Community Living, and the Canadian Mental Health Association (CMHA).

The third focus group was conducted at the Huron Women's Shelter with the Domestic Assault Response Team (DART). Representatives at this focus group were from the Women's Shelter, Partner Assault Recovery (PAR) Program, CMHA, Crown Attorney's Office, the Mental Health Unit at the hospital, and Children's Aid Society (CAS).

Individual interviews

Five individual interviews with women who have lived experience of violence were conducted to gain an understanding of their experiences, how they responded, and their thoughts on services available in Perth and Huron Counties. The participants were interviewed in Perth County and were connected to a service agency. The age range of women was from 27-47 years old, and four of the women had children. All of the women had low income, with four women relying on social assistance as their primary source of income. Education levels among the women included no formal education (n=1), high school diplomas (n=3), and a college diploma (n=1).

Key informant interviews

Six key informant interviews were conducted. Five key informant interviews were conducted over the telephone and one key informant participated via written responses. Approximately 10-12 key informants were identified by a member of the advisory committee and the final sample was selected by the CCBR research team. Key informants were selected based on their knowledge of VAW issues, including best practices, to prevent this type of violence in Perth and Huron. Those who were interviewed included three Executive Directors of service agencies, one from the Ministry of Community and Social Services, one from a VAW research centre at a southwestern Ontario University, and one from Stratford Police Services.



2. PREVALENCE OF VAW IN PERTH AND HURON

2.1 DEMOGRAPHIC PROFILE OF PERTH & HURON

Located along the shores of Lake Huron, Huron County has a population of 59,100 (29,125 male and 29,970 female; Statistics Canada, 2011) and covers 3,408 km² of mixed farmland. Its economy is based on agriculture and small-scale manufacturing with about one in five residents identifying farming as an occupation. Huron County is one of Ontario's most rural counties with 60.4% of the population living in rural areas.¹⁶ The unemployment rate is 4.4% (3.7% male and 5.2% female) and level of education is lower in comparison to the average level in Ontario.¹⁷

Perth County shares its borders with Huron County and is located in the heart of southwestern Ontario with a population of 74,340 (36,445 male and 37,895 female). It is similar to Huron County in many ways: agriculture is an important source of income for a significant part of the rural population, with approximately 90% of the land classified as prime agricultural land.¹⁸ Education levels are lower compared to Ontario. The 2006 unemployment rate was 3.7% (3.2% male and 4.2% female).

2.2 DEFINING VIOLENCE AGAINST WOMEN

Participants were asked to share their understanding of VAW. Similarly to the definition previously provided by the United Nations, a common definition that emerged in this study was that VAW is “gender-based” and is used to “gain power and control” over a woman “through intimidation or fear.” Participants named all forms of abuse, such as physical, mental, verbal, emotional, financial, and sexual as methods to create a “power imbalance.” It was also mentioned that this behaviour is “intentional” and can happen in dating relationships, marriages, common-law partnerships, same-sex relationships, and after relationships have dissolved. A few participants suggested that violence against women is “a product and a cause of societal inequality,” and is “a systemic/societal problem with foundations in patriarchy.” Two participants highlighted that it is any form of “unwanted” behaviour or “any act that causes harm.”

16 Huron County (2009), “Community Health Status Report”, available at : http://www.huroncounty.ca/health/reports_chsr.php

17 Statistics Canada, (2006). “Community Profiles” , available at: <http://www12.statcan.ca/census-recensement/2006/dp-pd/prof/92-591/index.cfm>

18 Perth County (2012). “About Perth County” http://www.perthcounty.ca/about_perth_county



2.3 PERCEPTIONS OF PREVALENCE OF VIOLENCE IN PERTH & HURON

“ Violence against women knows no bounds. ”

- Women’s survey participant

The following section describes research participants’ perceptions about the prevalence of violence in Perth and Huron Counties, and may not reflect current VAW statistics. When participants were asked about the prevalence, the intention was to develop a snapshot of VAW in Perth and Huron. The purpose of this section is to describe how service providers and women with lived experience of violence view violence against women in their community. Overall, the results indicated that prevalence of VAW in Perth and Huron Counties is not clear and there is uncertainty about the frequency of VAW in comparison to other areas of Ontario. It is evident that issues of VAW are experienced differently in largely rural communities and that emotional abuse may play a significant role in women’s experiences.

Perth County has some isolated areas, which hinders our abilities to know exactly how many women are being abused, as well as can make abuse that much more hidden.

~Service providers’ survey participant

Available statistics about the prevalence of violence are limited. According to the Stratford Police 2009 annual report, there were 443 intimate occurrences (violence which occurs between intimate partners or ex-partners) and 175 non-intimate occurrences (violence which occurs between any two people in a domestic situation i.e., parent to child) of domestic violence, for a total 618 occurrences.¹⁹ A total of 161 charges were laid in these occurrences. These statistics are only applicable to the city of Stratford and cannot be generalized to other areas of Perth or Huron Counties. In addition, the Huron Perth Children’s Aid Society reports that in any given year, 13-15% of the referrals they receive are related to incidences involving abuse of women.

Rural women are more isolated...and attitudes in the rural community, I think, can be more conservative around actually thinking about women who are victims of predators.

~Key informant

19 Stratford Police Service (2009), “Annual Report”, available at:
www.stratfordpolice.com/files/about/AnnualReport.pdf



Across all stakeholder groups, there was a level of **uncertainty about the prevalence** of violence in Perth and Huron Counties in comparison to other counties throughout Ontario. What emerged as consistent was that survey and focus group participants and key informants said violence is unique in Perth and Huron because of the large rural communities. One key informant perceived that attitudes about VAW tend to be more negative and conservative around recognizing women as victims to their abusers. The conservative attitudes may point to denying that violence against women exists or that women who experience violence may in fact have done something to provoke the perpetrator. This finding echoes what was found in the previously mentioned Public Health Agency of Canada (PHAC) study about VAW in rural areas; attitudes about VAW and stigma attached to victims result in a lack of recognition that a problem exists, resulting in an under-reporting of violence. Also similar to PHAC's findings is the challenge that rural isolation poses. It is challenging for service providers to reach out to women in rural communities and rural women are more isolated from others compared with more urban settings. Some service providers believed that abuse in Perth and Huron is under-reported because of the isolation in rural areas.

Isolation exacerbates the prevalence of violence. Women may remain in unsafe situations for longer due to fewer resources being available...More traditional values may also play a role.

~Service providers' survey participant

Some service providers across focus groups agreed that it is **difficult to pinpoint any one type of abuse** as most prevalent because varying forms of abuse are interrelated. Participants reported that the types of abuse are often connected with one another in a relationship. It was noted that it becomes difficult to separate the types of abuse because they often happen in tandem with one another throughout the cycle.

...many of those types of violence are intertwined...physical abuse, sexual, emotional abuse – I mean I don't know that you can separate them out.

~Perth service providers' focus group

Survey results indicated mixed perceptions about the prevalence of violence in Perth and Huron Counties compared with other counties in Ontario. Half (n=8) of the services providers reported being 'unsure' while the other half reported that VAW was 'about the same' (n=5) or 'high' in comparison to other Ontario counties. Women with lived experience were also split, half (n=2) saying they were unsure and the other half saying it was 'high' (n=1) and 'about the same' (n=1).



Service providers were asked in the survey to indicate the average number of women they serve per month, and of 16 agencies, eight indicated that they serve over 30 women. The remaining nine agencies indicated serving less than 30 women, with four reporting serving between six to ten women per month.

Service providers were also asked to indicate their perceptions of the top three typical characteristics of women who experience violence. Eight service providers indicated women between the ages of 31-40 years old most often experience violence, five reported women between 21-30 years, and one indicated women between 41-50 years of age. This suggests the range of population affected by the experience of violence, although the sample size is not definitive. Of 15 agencies, 13 reported women with mental health issues most often experience violence, followed by women who live with low income (n=9), rural women (n=9), and women with substance use issues (n=8).

In the surveys, women and service providers were asked whether they perceived physical, emotional/psychology, sexual, or economic abuse as most prevalent in Perth and Huron Counties. According to 13 service providers and four women, they consider **emotional/psychological abuse** as the most prevalent. Participants were able to explain their answers, and three service providers wrote that all types of violence are equally prevalent and connected with one another.

We see it, as a community, as a continuum. And we think that no single one of the forms of abuse happen alone.

~Huron service providers' focus group

Similar findings were reflected in the service providers' focus groups, where participants explained that **physical abuse is visually recognized**, but **emotional abuse goes unnoticed**. Participants agreed that emotional abuse is often normalized and may not be recognized as a true form of abuse. Providers explained that women believe emotional abuse is acceptable and will continue living with the abuse despite the negative effects. As noted by one service provider regarding emotional abuse, the "abusers have become more skilled." This means that service providers have noted a change in the types of violence against women they are dealing with at the agencies. Perpetrators are manipulative and abusing victims psychologically compared with in the past when physical abuse was more apparent. One service provider identified that sexual abuse is becoming more recognized as a violation to a woman's safety.

I guess reportable would be physical assaults. But we all know that in addition to that there's emotional, there's financial, all those things are there but a quantitative one would be assaults.

~Huron service providers' focus group



Sexual abuse is being more recognized as an abuse, that [sex is] not an entitlement.

~Stop VAW focus group

Emotional abuse is normalcy for a lot of these girls, it's a normal thing. Do [they] recognize that as an abuse? Probably not.

~Huron service providers' focus group

Women learn to live with the emotional abuse a lot. [Women] think it's okay and go on living the life they [have] sort of become accustomed to.

~Perth service providers' focus group

Survey participants were asked to indicate their perceptions of whether VAW happens more in private (e.g. at home) or in public (e.g. malls, bars, workplace, etc.). All sixteen agencies who responded to the survey perceived that violence against women happens more in private. Two service providers reported that violence happens in public compared with five service providers who perceived that violence against women does not happen in public. In one of the service providers' focus groups, it was explained that violence in public does happen, but it has become normalized by society and thus often goes unnoticed by the general public. It was added that individuals who witness and recognize that abuse is occurring tend not to intervene possibly because they are not sure what to do.

I think that to a certain extent many folks become inert to it, they don't even see it anymore...many would walk away.

~Stop VAW focus group

I would suggest that people are a bit more uncomfortable and don't know what to do about that [VAW in public].

~Perth service providers' focus group

One service provider recalled an incident where a man was verbally abusing a woman in a public place. In the words of the service provider:

The man was telling her she was brain dead and that she was an f'ing idiot, it was quite the thing...I have a big mouth and told him there was no excuse for him and that set him off again, unfortunately for the poor woman.

~Stop VAW focus group



2.4 STORIES ILLUSTRATING THE PREVALENCE OF VAW

Women were asked in the interviews to share their stories about their experiences with violence against women. The purpose of this section is to illustrate the prevalence of violence that was experienced by women in Perth County. Four of the women reported experiencing multiple forms of abuse from childhood into adulthood, and one woman reported multiple types of abuse when she was in one adult relationship.

Diana's Story

Diana says that she was abused by her parents and family members from the time she was born up until she was in her middle 20s. She experienced all forms of abuse from the time she was a young child, and her earliest memory was trying to stay awake so she would not be sexually assaulted by her father. Diana grew up in a cult and recalls being sexually abused by other men in the community and was sold to these men by her father. She lived in a very small community and felt isolated from the outside world to the point that she did not know of what services existed for help. She remembers being told by perpetrators that no one would believe her and she would be put in jail if she told anyone what happened. She was also instilled with a fear of police and was told there were “bad people” who take children away from their families if they reported these incidents. She started running away at age 18, but was continuously found and brought back to the community by her family; a cycle that went on for six years. At the age of 25, Diana was finally able to get the help she needed to leave her former life behind.

At the age of 3 years old, my first memory is of being gang raped by at least 10 men. This occurred in my parents' home.

~ Woman with lived experience



Julie's Story

Julie remembers experiencing abuse as a child at the hands of her parents. Incidents of violence would happen in her home in front of her siblings and sometimes in front of other people. When she was a teenager, she experienced abuse from her boyfriend who later became her husband. Julie says that her husband abused her physically, verbally, emotionally, and financially in their home and at her workplace. She recalls that her reactions changed over the years. When the incidents first occurred, she was apologetic and would try to make the relationship better. She even tried to change her behaviour so the abuse would not occur, but realized it did not matter what she did, the abuse did not stop. She became withdrawn and socially isolated herself from her friends and family members. When Julie became pregnant, she recalls an incident where she was physically assaulted by her husband, and after her children were born, he began to sexually assault her. Now that they are separated, she still continues to experience abuse, harassment, and control from her ex-husband who withholds financial support for their children. Julie was able to find support by reaching out to her family doctor and connecting with shelters in the area.

I am afraid that I am going to die at the hands of my ex-husband, and that my children are going to die.

~ Woman with lived experience

Susan's Story

Susan does not recall experiencing abuse when she was young and has been in only one relationship, which was an abusive relationship. Her husband of 10 years was controlling and she experienced emotional abuse for the most part, but recalls a few incidents where she was physically assaulted. Her husband controlled every aspect of her life and the household finances. Susan recounts when her husband got heavily involved with drugs and alcohol and had significant substance abuse issues. He would become angry if she spent money that was to be used to support his habit. She also became involved with substances

...it feels like you're in a black hole, this hole, and you just can't get out. Because he put me down there. I felt so bad. I didn't even know who I was.

~ Woman with lived experience

to cope with her situation. She remembers when the drug use became so out of control that her husband tried to take his own life. Susan has four children with her husband and says that at one point he was a good father, but his behaviour has negatively affected her children's well-being. She was able to seek help through counselling and shelter services.



Patricia's Story

Patricia recalls being sexually abused by her father when she was just 4 years old, and then experiencing sexual abuse from her brother. She kept this information from her mother and when she tried to tell her mother, her mother did not believe her. When she was nine years old, she was sexually assaulted by a fellow student. At the age of 14, she wrote a disturbing poem and her friend went immediately to the school counsellor. Patricia was admitted to the hospital and sought psychiatric help for what she endured as a child. A few years later, she became pregnant with her son and stopped going to see her psychiatrist. Later, she told her girlfriend at the time that she was leaving the relationship. The girlfriend got upset and hit the back of her knees with a stick. After she left her relationship she returned to Perth County, but fell on hard financial times and lived out of her car. Patricia sought shelter services and has been coping better now that she is able to open up to other women who are experiencing similar situations.

He choked me...he didn't stop until I fell to the ground. I thought he was going to kill me. At the same time, I felt like I was getting what I deserved.

~ Woman with lived experience



3. IMPACT OF VIOLENCE AGAINST WOMEN

Participants across stakeholder groups were asked about the impact of violence on women as individuals and on the community. The following section is divided into the individual physical, psychological, economical, and social impact and the social, economical, and legal impact on the community.

3.1 INDIVIDUAL IMPACT OF VAW

Physical Impact

Service providers and women with lived experience reported internal and external indicators of the physical impact. Examples included broken bones, bruises, contusions, sore muscles, and crooked teeth. Some women reported experiencing medical ailments such as nausea and vomiting, headaches, fatigue, arthritis, sexual dysfunction, and one woman reported that her experiences exacerbated her cancer.

Psychological Impact

Service providers indicated that violence against women greatly affects women's mental health and well-being. Many service providers reported that women experience anxiety, depression, and post-traumatic stress disorder (PTSD). A few service providers also reported women may experience eating disorders and substance abuse issues. Often, these concurrent issues continue with the cycle of abuse or begin as a result of abuse. Service providers also indicated that most women experience decreased self-esteem and confidence, heightened fear, shame, guilt, and embarrassment, and subsequently lose the ability to function on a daily basis. Women echoed similar results with several reporting feelings of depression, losing their sense of self, and one woman reported developing an eating disorder.

Economic Impact

Women reported living in poverty and having little to no access to money as a result of their experiences with violence. One woman said she was not able to go to work on a regular basis because of the abuse she was experiencing and therefore, was not able to financially contribute to the household. Most service providers reported that women become financially dependent on the perpetrator and are unable to leave their situation because they have no means of income support. One service provider mentioned that women are unable to manage their finances because they are unfamiliar with them, and this affects their ability to live independently. A Perth focus group participant said it becomes difficult for couples to manage two households when the courts are involved, and thus it is more economical to stay together, despite the situation often being unsafe.



Social Impact

Women reported that socially, they had become withdrawn and did not know how to interact with others anymore. Most of the women reported they had lost friends and other important relationships in their lives. Women reported feeling isolated and becoming isolated from their community. A few women reported having difficulty trusting others, that they do not like meeting new people, and have challenges maintaining relationships in general. Service providers echoed similar responses, adding that women lose their support systems and withdraw from services.

3.2 COMMUNITY IMPACT OF VAW

Social Impact

In the community, women experience stigma and are often marginalized because of VAW. A few service providers mentioned that the community in general denies that VAW exists (e.g. “not in my backyard”), which devalues women’s experiences. Women mentioned experiencing social issues with their families and often losing relationships with family members because of the violence that they have experienced. Some women reported that VAW has negatively affected their children’s behaviour and emotional well-being. One service provider noted that when children are present, the VAW cycle has the potential to continue into the next generation and alters their perceptions of appropriate ways to interact with others.

Economic Impact

Service providers noted the high cost of violence against women to the system and to the larger community. Community agencies, justice services and health services, which are funded by taxpayers’ dollars, are drawn upon. A few service providers and women mentioned that, because of the violence they have experienced, it is challenging for them to maintain their current jobs or to enter the workforce. This increases the burden on employers, women, their families, and the social assistance system.

Legal Impact

Service providers reported that VAW creates a particularly significant backlog in the court system. Specifically, they reported that violence against women increases the burden on legal aid services. A few women mentioned that they have to use the legal system to protect their children from the perpetrator, usually the father. A few service providers also mentioned economic costs to women and their families, and the cost to employers for allowing women time off work to attend court dates.



4. EXISTING SERVICES IN PERTH AND HURON

This section describes the existing violence against women services in Perth and Huron Counties and identifies the strengths in response to VAW according to research participants. It was found that Perth and Huron Counties offer similar VAW services and women can access most services in their community. A conspicuous exception to this is the unavailability of medical testing available at hospitals for victims of sexual assault. A noted strength in VAW services was the connections and collaborations between agencies to serve women with the best options available. Both Perth and Huron have committees that advocate for VAW and work to coordinate available services.

4.1 OVERALL EXISTING VAW SERVICES

From the agency survey, service providers were asked to report the types of services they provided, which types of services women most often sought, and indicate the gaps in services. The types of services and supports offered in Perth and Huron were reported by service providers in the survey. The **top three services offered for women** who experience violence by organizations were advocacy (n=12), referrals (n=11), and counselling (n=10); see Table 3 in Appendix A. Other types of services that are provided include credit counselling, supports for women with disabilities, art therapy, children's therapy and supports, health and fitness, transportation, food assistance, assistance with clothing and household items, and connecting women to other resources in the community.

Agencies reported serving children, youth, women, parents, families, and adults of all ages, suggesting there are services available for people of all ages and genders. It was not clear if these agencies offered services for male perpetrators because it was not specifically stated. Rather, speculation is that service providers were speaking more to services they offer in general that may not be directly related to violence against women.

Recall that survey results are based mostly on agencies in Stratford and because of this, clarity was needed in the Huron focus group regarding the services offered in Huron County. Similar services are available in Huron County as in Perth County. Focus group participants indicated that they have a shelter and second stage housing, a sexual recovery program, counselling and advocacy services, and a Partner Assault Recovery (PAR) program. Huron service providers also noted they actively collaborate with their local justice system through the Crown Attorney's office and police services. It was also noted that Huron County service providers collaborate with the hospital to support women experiencing violence.



Providers who completed the survey reported other types of financial supports or subsidies that are offered through their organization. Nine agencies offer free violence against women services and six offer VAW services that are partially covered by the agency, but did not specify the services. Four reported covering childcare, three agencies reported partial coverage for childcare, and eight do not cover the cost of childcare for women. Two agencies indicated that they fund transportation costs, seven agencies offer partial coverage for transportation, and six did not offer transportation cost coverage. One agency indicated they offer subsidies for programs in the community that have fees and another reported counsellors will go to a rural woman's home if it is safe to travel to her residence.

In their survey, service providers also indicated the **top three services that were most sought after** by women. Shelter and temporary housing (n=12) was most frequently sought by women, followed by counselling (n=10), and financial aid services (n=8); see Table 3 in Appendix A. Fourteen service providers reported that they see the same women on multiple occasions, and a few estimated between 50-100% of the same women seek their services on a monthly basis. However, this was the case because women are receiving ongoing services, such as counselling, or other services on a longer-term basis.

Service providers reported receiving referrals to their services for women through other agencies, family and friends, and women who self-refer. It was also reported that police and court services make referrals for women. Others types of referrals added by service providers were received from doctors, mental health services, probation and parole, shelters, 211 Directory, and internal referrals.

4.2 STRENGTHS IN CURRENT RESPONSE TO VAW IN PERTH & HURON

Women and service providers rated the overall quality of the services available in Perth and Huron Counties. Six service providers gave a rating of 'very good,' six gave a rating of 'good,' and four rated the quality of services as 'neither good nor poor.' Of the four women who responded to the survey, one rated the services as 'very good' and the remaining three rated the services in Perth and Huron as 'good.'

The interviews with women who have lived experience echo similar perceptions of the services in Perth County. The women said the services were helpful and they felt safe after receiving assistance. Women reported that they received support for their children and learned about coping strategies for what was within their control. One woman reported that after being involved in a woman's group, she felt she could relate to others who were in similar situations, which reduced her feelings of isolation.



A couple of agencies have been extremely helpful; second stage housing as well as the school board.

~Woman with lived experience

My overall experience of services in Perth County were positive.

~Woman with lived experience

[When] I first learned about Choice theory, I began to understand that I had no control over my abusive ex-husband...and that changed my life.

~Woman with lived experience

In all the groups that they have [at the agency], you're supposed to share what you've been through. Knowing there's other people who have been there too...For the first time, I didn't feel alone.

~Woman with lived experience

In the survey, service providers were asked to identify VAW programs or agencies that they perceived to benefit women in Perth and Huron. Optimism Place Women's Shelter and Support Services and the Emily Murphy Centre were identified most often as agencies that benefit women. Caring Dads, Supportive Mothering, and Counselling Services were programs most often reported as benefiting women. Service providers mentioned other agencies and programs such as Victim Services, Family Services Perth Huron, and early intervention programs for children to name a few others. One service provider stated that all violence against women services were of benefit to those requiring the assistance.

ALL services that work with abused women and children are effective.

~Service providers survey participant



A strength that was identified in both Perth and Huron Counties was the connections and collaborations that exist between organizations. Participants reported that service providers will work with one another to meet the needs of women who are seeking their assistance. Providers reported they have good relationships with one another and some will develop a plan together when multiple agencies have the same woman seeking services.

The collaboration of women's services [is a strength]. There is better communication, we [service providers] know what's happening, and we talk about things that are happening.

~Stop VAW focus group

I think anywhere that is using the activity of coordination and collaborating, and is in the VAW sector is a strength.

~Key informant

It was mentioned in the Perth and Huron service providers' focus groups that for the most part, they are able to serve women locally. Most VAW services are available within their own community to reduce travelling to other larger cities. It should be noted, however, that women who have experienced sexual violence, must be taken to hospitals in London or Kitchener in order to have the standard "rape kit" testing preformed.

...most people get served in the county for whatever service and I think a lot of people don't go to London. We deal with situations that we wouldn't have dealt with in the past.

~Huron service providers' focus group

One service provider in the Perth focus group explained that they conduct what is called 'case conferencing,' in which all the service providers meet when they have a client in common. The agencies will come to the table with the client and together discuss how best to meet the needs of the individual. The agencies will assist the client with scheduling meetings and appointments, and assist her with organizing her schedule so she can attend appointments regularly and on time.

And we do pull together like in conferences when we all have a single client in common, we will fight frequently to pull everybody to the table...

~Perth service providers' focus group



The work of the North Perth Violence Against Women Advisory Committee, a group composed of a broad representation of related VAW service providers, led to the establishment of The North Perth Violence Against Women Resource Centre. This committee conducted a study about services to rural women in the north and subsequently, a hub-type resource centre was established in Listowel. Currently, the resource centre is funded by Optimism Place Women's Shelter and Support Services and provides a variety of information and services, including counselling for women and children as well as clothing, food, and other household needs.

There are two active committees working toward preventing violence against women in the community. Below, the mandates for the Stop VAW Committee and Domestic Abuse Review Team (DART) are described.

Stop VAW Committee in Perth County

In Perth, the Stop VAW Committee is a collaborative group involving: Canadian Mental Health Association, City of Stratford Housing, Community Living Association of Stratford and Area, Emily Murphy Centre, Family Services Perth-Huron, Huron Perth Children's Aid Society, Ontario Provincial Police Sebringville Detachment, Optimism Place Women's Shelter and Support Services, Probation and Parole, Stratford General Hospital Sexual Abuse Treatment Program, Stratford Police Services, Supervised Access Program Perth-Huron, Victims Services Perth, and Victim Witness Assistance Program. Stop VAW is a community-based committee that responds to violence against women by developing prevention strategies for VAW in Perth County. The committee shares information and conducts outreach activities to educate the public and raise awareness about VAW.

The following goals are the focus of Stop VAW:

- Work towards an understanding among committee members, of the complex dynamics of violence against women.
- Educate the community about violence against women.
- Facilitate and collaborate with members and other organizations to help ensure that women have current resources and information about the legal, social, and medical systems.
- Dispel myths about violence against women and services offered.



DART in Huron County

The Domestic Abuse Response Team (DART) of Huron County reviews individual cases of abuse reported in the community to improve services offered through agencies and responses from the justice system to prevent violence from occurring in the community. The team consists of representatives from the following organizations: Alexandra Marine and General Hospital, Children's Aid Society, Crown Attorney's office, Huron County Public Health, Huron Women's Shelter, Ontario Provincial Police, Probation and Parole, Partner Assault Response Program (Huron Perth Centre for Children and Youth), Victim Services of Huron County; Victim/Witness Assistance Program, and Wingham Police Service.

The following represent the goals/objectives of the DART:

- To develop and maintain working relationships among members that foster collaborative efforts;
- Identify gaps and problems in responding to domestic violence in Huron County;
- Discuss intervention programs by community service providers;
- Make recommendations to enhance service delivery;
- Participate in or coordinate public education activities related to domestic violence; and
- Review and analyze the coordinated response to specific cases of domestic violence.



5. GAPS IN SERVICES IN PERTH AND HURON

The following section is divided into two categories. Gaps in VAW services and barriers in accessing VAW services in Perth and Huron County are described. Gaps and barriers were primarily identified by service providers in focus groups and key informant interviews.

5.1 IDENTIFIED GAPS IN VAW SERVICES

The most frequently identified gaps noted in the agency survey included a lack of services for financial aid (n=13), legal aid (n=12), and access to shelter or temporary housing (n=9); see Table 4 in Appendix A. Other needed supports include child and family counselling, financial assistance for women, services for sexual assault, rape kits, housing, and more shelter beds. A call for more collaboration between organizations and within the court systems was identified as a necessity.

Service providers across focus groups reported they lack capacity to serve women within Perth and Huron. This lack of capacity requires service providers to send women out of town, to larger, more urban cities in the surrounding area so they can access services. The need to refer women to external agencies is a result of the length of waitlists for specific services, primarily, counselling and housing.

Summary of 2012 Shelter Statistics for Perth and Huron Counties		
Emergency Shelter	Optimism Place	Huron Women's Shelter
Location	Perth County	Huron County
Number of funded beds	13	10
Days at 100% capacity	302	65
Days over 100% capacity	12	154
% of days at or over capacity	86%	60%
# of crisis and support calls	1776	2402

See Appendix A - Table 7 and Table 8

A lack of space in shelters was also reported by service providers as a gap. Services providers reported there are waitlists for services in Perth and Huron Counties. Currently, Optimism Place Women's Shelter and Support Services does not keep a waitlist, but is often at full capacity and women cannot get access to the shelter and their services. In 2011-2012, the Emily Murphy Centre had an average of eight families on a waitlist at any given time. In particular, there is a lack of shelter beds in Huron County. Women are subsequently sent to Kitchener, London, and Woodstock, but shelters are at capacity in those areas as well.



The neighbouring communities are full as well [at the shelters]. Kitchener, London, Woodstock, women have to go an hour away from the area.

~Stop VAW focus group

And the waitlist, I mean that's huge. Kids who need services here [Huron County], now, have to wait months before they can even see anybody.

~Huron service providers' focus group

It was reported in focus groups and by a few key informants that women sometimes have to go to surrounding cities because there are a lack of sexual assault services in Perth and Huron. Particularly, there are no sexual assault clinics in either county, and examinations are not conducted at the hospitals in Perth or Huron County. Women from Perth and Huron Counties are sent to Kitchener or London for examination in cases of sexual assault and for sexual assault services. Optimism Place Women's Shelter and Support Services has trained staff to provide sexual assault services, but this has been done unfunded for many years. Services offered include: education and prevention, hospital accompaniments within Perth County, referrals, advocacy, counselling and legal support and accompaniment. One key informant mentioned that there is a counselling service for sexual assault at the hospital, but with only one full time counsellor on staff, it is difficult to keep up with demand for service and wait times can be lengthy.

The women in this community and on the street, they would tell you that 'if I were raped I'd be able to get full services here.' They would be absolutely shocked that no, they can't.

~Key informant

Currently, there is also a lack of services for women in shelter with substance abuse issues in Perth County. While Choices for Change: Alcohol, Drug & Gambling Counselling Centre program does provide harm reduction services within their scope of services, there are no in-shelter harm reduction programs or detoxification and methadone clinics available at this time.²⁰ Wet shelters are temporary housing for people with substance abuse issues where they can go to use substances safely with sterile equipment, and they will not be turned away. People who use wet shelters do not have to be sober when they are accessing services, but this is not the case with the current shelters in Perth and Huron. Women coming into the Perth shelter cannot be using substances because of liability issues and instead are sent to shelters in Kitchener and London, which are usually at capacity. It should be noted that Choices for Change does provide service to shelter and second stage clients upon request with dedicated staff going to the shelters weekly.

20 Currently, there are plans to have an operational methadone clinic in 2013 that will be on a part-time basis. A physician is establishing this clinic with the assistance of Choices for Change.



A few focus group participants and key informants from Perth County identified that the **lack of a committee like DART** in the county has created a significant gap in service delivery. The benefit of the DART committee is that it brings the justice system and service providers together to understand processes and how each sector can make improvements that will support women. DART builds relationships between these two parties and identifies key players for both sides to contact when there is a need to support women who have experienced violence.

The gap that was left in the community [because of DART ending] was that we no longer had a designated time every month to sit down with our criminal justice partners and other community partners to form relationships and bridges that were really meaningful into those systems.

~Key informant

Limited credit counselling services for women who are leaving abusive relationships was also identified as a gap. One key informant stressed that women need to be educated about finances so they are not dependent on their partner for financial support. In one focus group, it was mentioned that the cost of living in Stratford is high for a single household income, which may further contribute to women staying in their abusive relationship. When women are leaving abusive relationships, many of them do not have the correct information about finances and risk being taken advantage of by private creditors or payday lending companies.

Power and control gets exercised through finances. Women who do not understand the basics around the household budget or what assets they have, it creates dependency and the ability for control.

~Key informant

In the Huron County focus group, service providers reported there is a **general gap in services for children** in the community. Combined with the long waitlists, there are limited psychiatric and counselling services for children and youth to deal with their experiences. One service provider reported that for children to access services, they are often sent to Perth County where there are more youth-oriented supports available.²¹

I think we have some gaps in services for adolescents. We don't have any children psychiatric beds.

~Huron service providers' focus group

21 Efforts are currently underway to reduce wait times for children and youth in need of accessing psychiatric and counselling services. Recently, investments have been made to improve timely access to services at the Huron-Perth Centre for Children and Youth through the expansion of services. One new service (Earlier Access) explicitly strives to reduce wait times. Another involves working with education consultants in schools to identify and help students who are struggling. Additionally, in September of 2011, the first publicly funded child psychiatrist was hired to provide services in this agency.



There is always the need for more services (counseling) for children.

~Huron service providers' focus group

Across focus groups there was also an **identified lack of services for men**. There are a lack of men's shelters in Perth and Huron Counties and services in general for men. There is a Caring Dads program available in both Perth and Huron Counties. However, the program in Huron County does not have stable funding. In addition, both Counties have a Partner Assault Recovery (PAR) program that serves men who have been found guilty of assault in the community. However, if a man has not been through the court system, they cannot access the program and therefore cannot get help for dealing with their issues. According to a key informant and a focus group participant, the PAR program does not have enough funding and there are long waitlists for men to access this service.

So, why are we pulling the women out of the homes? Put the men in a shelter and have them in counselling.

~Perth service providers' focus group

The PAR program is under-funded and the only clients you are getting are court mandated that have been found guilty. So anyone that's looking for help that hasn't gone through the court system would not be able to do that program.

~Huron service providers' focus group

A few key informants indicated that there is a gap in services for families and in VAW cases, sometimes **the whole family must be treated**. All family members who are involved in VAW require services to deal with the after effects, but there are few supports available. One service provider argued that it is not enough to just assist women in these situations. Rather, a more global approach needs to be taken to change offenders' attitudes and behaviours, and targeting younger men is essential to promote change.

...we need to be looking more deeply, thinking about how to heal families... how to support families. There is very little that looks at family support.

~Key informant

You have to deal with the offenders to get the offenders to change and you have to change society's attitude; the young men, you have to change their attitude about what is acceptable and what is not acceptable.

~Huron service providers' focus group

...we still need to prevent punitive attitudes [about VAW] and we need to do much earlier intervention in the family when they first become aware of the violence that is happening...

~Key informant



5.2 BARRIERS TO ACCESSING VAW SERVICES

Service providers identified challenges they experience with delivery and barriers women face in accessing the services they require. The greatest challenges in service delivery are the complex needs of clients (n=14), navigating the legal system (n=14), and the lack of funding (n=13) for VAW services. For barriers not covered in the survey question, it was also mentioned that philosophies and policies varied among organizations and there was some difficulty around agency collaboration and cooperation.

I didn't reach out for help because I was ashamed. I held a lot of sympathy for my abuser. I didn't want him to get into trouble.

~ Woman with lived experience

Service providers were also asked to identify barriers that prevent women from accessing supports. The most frequently cited barriers women face when accessing VAW services are financial dependence on the perpetrator (n=14), lack of awareness of services (n=13), lack of transportation (n=13), and social stigma (n=12). One woman with lived experience identified that the sympathy she felt towards her abuser held her back from seeking help.

5.2.1 LIVING IN RURAL COMMUNITIES

Service providers noted that women who live in rural areas are **marginalized and there is limited outreach** in the community because of increased isolation. When living in rural areas, women do not always have access to telephones and the internet, so this creates further isolation from others and prevents women from accessing VAW services. As one service provider explained, violence against women is not always visible because of the isolation and distance between neighbours in the rural areas. Another service provider noted it can be dangerous living in remote locations because of the potential for perpetrators to have access to hunting guns in the home.

[VAW is] not on the street corner or next door to you, because you're living on farms and that can be miles away from your neighbour

~ Stop VAW focus group

...the availability of long guns is more prevalent than in more urban centres. So knowing that all you have to do is just walk across the room and grab the shot gun, it can be incredibly intimidating and threatening...

~ Stop VAW focus group



One participant mentioned that because Huron County and the towns in the area are small, there are issues with **stigma and confidentiality** in the community. Specifically, there is a real concern about being recognized through identifiable objects (e.g. vehicles) by others in the community that prevent women from accessing services. There is a sense that people become indirectly involved in one another's lives, will know what is happening, and will know there is a problem at home.

...we are a very small community and everybody knows what everybody does so the reaching out for help and saying that it's happening, the stigma that is attached to that is heightened by virtue of if someone pulls their car into this parking lot, people will know who drives what vehicle and think you might have been there.

~ Huron service providers' focus group

A significant barrier that consistently came up across focus groups in Perth and Huron was the **lack of transportation limiting access** to services in the community. Both counties are largely rural and in Perth County, Stratford is the only town that has public transportation. There is no public transportation system in Huron County and people in both areas have to primarily rely on personal vehicles for transportation. However, most of the women who access violence against women services cannot afford to own a vehicle because of poverty which hinders access to all services. Some women can only go places in the community that are within walking distance. This is particularly challenging for women who live on farms or more remote areas, where walking to services is not possible. Transportation is a further limiting factor because if women have their lives established in a particular town, it is difficult to uproot and access services in a larger city that is further away from home.

Huron County has no public transportation in terms of a bussing system. Perth County only has one in Stratford. [There is] nothing that goes to Listowel or some of the other smaller communities.

~Perth service providers' focus group

If they [women] don't have a vehicle and they have a job in North Perth, it is difficult to come to Stratford.

~Stop VAW focus group

I think poverty. Poverty is huge and that's a barrier to access any kind of services.

~Huron service providers' focus group



5.2.2 SPECIFIC POPULATION BARRIERS

Certain populations in Perth and Huron Counties were identified as facing barriers to accessing violence against women services. Members of some Anabaptist communities, seniors, and people with disabilities who experience violence are thought to encounter barriers to accessing supports and services.

There are several different **Mennonite and Amish cultural groups** that live in Huron and Perth Counties, and that may be referred to as Anabaptist cultural groups. While there are commonalities among Anabaptists, it is important to remember that there are many differences between groups, and many differences between individuals within any group. Like in all communities, families experience health and social issues. Marriages falter and violence against women occurs. Their distinct heritage and strong traditions strengthen and unite their close-knit communities, and can be a valuable resource. However, close-knit communities may also be barriers for women needing to access VAW services, particularly when alternative treatments for abuse are the prevailing belief. In addition, members who access services that are not part of the accepted cultural norm may face social exclusion.

Focus group participants and some key informants identified language differences, hesitancy to interact with non-community members and limited access to modern communication technology as circumstances that may pose a difficulty for women from the Anabaptist community to reach out for help. The challenges of geography and transportation add to these barriers for women in communities that continue to rely on travel by horse and buggy.

I think there's a level of under-reporting to service agencies, because I think the [Mennonite] community tends to deal with issues [abuse] like that internally, so there's a sort of great unknown.

~Stop VAW focus group

...there's a whole desire to serve the [Mennonite] population...It's hard to reach into that community because you're asking women to leave their entire community, they'll be shunned.

~Key informant

It's difficult for them [Mennonites] to access help. They don't have phones or electricity so making a phone call which seems very practical and simple to us is not for them, but there is definitely cultural pressure there not to, I mean, very patriarchal.

~Perth service providers' focus group



Culturally appropriate education to increase knowledge and awareness about abuse and effective interventions was identified as a need. It is important to note that research into effective strategies tailored for these communities is limited. However, cultural sensitivity training and increased understanding about the various cultural groups living in Huron and Perth counties would assist service providers to meet community needs. Church leaders might also be a resource in some circumstances if consent is obtained. Service providers may benefit from reviewing the Amish Studies site at www2.etown.edu/amishstudies or the Descriptive Profile of Amish and Mennonite Communities in Perth County (2012).



The Huron service providers' focus group mentioned that outreach to seniors was challenging in their area. One key informant echoed this barrier saying **reaching out to seniors** is challenging because of an apparent generational gap. It was noted that there are distinct gender differences when comparing older and younger generations of women, with senior women tending to adopt more traditional gender roles. In older generations, more women are still financially dependent on men because men are the primary earners of the household income. Risk for elder abuse is high in general, because there is an increased reliance on others to care for the person as he or she ages and becomes less independent.

Women are now starting to make more money, but in the older generation, men are the bread winners and women are more dependent.

~Key informant

Seniors become more dependent on someone else. There is an opportunity for abuse because of caregiving.

~Key informant

The key informant went on to further explain that **people with physical and developmental disabilities** experience similar circumstances as seniors. Some people with disabilities are more dependent on others for their care, and this increases the risk of abuse. People with disabilities are more integrated and living in the community compared with the past when they were institutionalized, but they are still vulnerable to stigma.



6. RECOMMENDATIONS

This section features recommendations relevant to the local and provincial level. The following recommendations are based on research participant data that was collected for this report and any suggestions that were provided by participants across stakeholder groups.

Increase the number of beds in emergency shelters and second stage housing in Perth and Huron Counties to provide safe spaces for women

Perth and Huron Counties are experiencing a shortage in terms of the number of beds and spaces they have available for women at the emergency shelters and in second stage housing. Consequently, service providers must send women to neighbouring communities, which are often full, or women must remain in unsafe conditions by residing with the perpetrator, or with friends and family in the community where the perpetrator has access to them. Increasing the number of beds in shelters and second stage housing will enable women to find a safe space within their communities, from which to begin recovery.

Increase program funding to VAW services for women, children and men in Perth and Huron Counties

Addressing violence against women requires looking at the issue holistically. Change is unlikely if we only offer assistance after violence has occurred or only to certain populations. Men who have been subjected to violence often become perpetrators. Children who witness and/or experience violence often continue the cycle of violence later in life. Funding should address service waitlists and lack of space for women who wish to access services. Expansion of services for children is necessary. Program development for men who have been abused and who abuse is also vital. Approaching violence against women from a societal perspective rather than as a women's issue, may contribute to preventing VAW incidents in the future. A few participants suggested potential funders for future initiatives, which included the Provincial and Federal governments, Public Health, the Ontario Trillium Foundation, and the private sector.

Expand sexual assault and forensic services in Perth and Huron Counties to meet the needs of women in their own communities

Women cannot access sexual assault services in Perth or Huron County and must travel to larger, neighbouring cities. Both counties should establish community-based sexual assault services to provide for women locally. It was also emphasized that forensic services are also needed in Perth and Huron Counties. Providing services for women where they are located should decrease the negative effects they may experience when they must leave their local communities to seek support.

Establish a harm-reduction approach for women in shelter who are experiencing substance use issues in Perth and Huron Counties

Women with substance abuse issues cannot access services at the shelters due to restrictions and liabilities. If women are seeking shelter and are using substances, they are sent to larger, neighbouring cities that have substance-related services, but are often at capacity. It was mentioned by a few service



providers that there is need for the establishment of a detoxification unit for women who use substances in Perth and Huron Counties. Establishing services will provide much needed care to women who have substance use issues and they will have a safe space to seek help for their complex needs.

Increase collaboration between VAW agencies in Perth and Huron Counties, working together to: explore a tracking system that will reflect the prevalence of VAW in Perth and Huron Counties; identify the needs of specific populations; and expand VAW prevention strategies in Perth and Huron Counties

Although collaboration exists between agencies in Perth and Huron, a few participants identified ways in which collaboration could be improved for more seamless access to services for women. For example, the re-establishment of a DART committee in Perth was recommended in order to bring the justice system and community agencies together in addressing violence against women. It was also recommended that the two temporary housing services in Perth County: Optimism Place Women’s Shelter and Support Services, a women’s shelter; and the Emily Murphy Centre, which provides second stage housing; further collaborate and increase referrals between the two agencies.

When service providers were asked, there was some hesitation and uncertainty about the prevalence rates of violence against women in comparison to other counties in the province. If anything, data should be accessible to service providers about the prevalence rates of VAW in Perth and Huron through some centralized system. Having this data available may help service providers to understand the statistical picture of violence, which can guide education and campaign work to reduce and prevent VAW from occurring in these areas. It can also assist in the planning of services that are most needed in Perth and Huron Counties, including those for specific populations.

It was noted that the prevalence of violence and the service needs of Mennonites, seniors, and people with disabilities are often unclear. Service providers experience barriers gaining entry into those communities because of the increased isolation that they may face. Ways to access these populations to identify their needs and increase awareness of services should be explored. Communities need to explore innovative ways to collect data but also to encourage more people to report abuse so that all collected data can better reflect the magnitude of the issue throughout the two counties. Services would then be better able to reach the women and children that need them. This increased knowledge and awareness may reduce access barriers that may currently exist between both service providers and the identified populations.

More resources should be put into prevention strategies, such as public education and programs for men. Some research participants suggested that more work needs to be done around prevention strategies rather than dealing with situations after the fact. In particular, public education was seen as an area of priority. Services are needed for families to prevent violence from happening in the home and so families can recognize the signs of abuse before it spirals out of control. A few service providers described the current violence against women service landscape as “band-aid solutions” that only temporarily fix the problem, but sometimes do not have a lasting impact.



7. REFERENCES

Amnesty International USA, “Violence Against Women Information”, available at: <http://www.amnestyusa.org/our-work/issues/women-s-rights/violence-against-women/violence-against-women-information>

Canadian Women’s Foundation, “FACT SHEET- Moving women out of violence”

Department of Justice Canada (2000), “The Ontario Women Abuse Study (ORWAS): Final Report

Department of Justice Canada, “Spousal Abuse: A Factsheet From The Department of Justice Canada”

Domestic Violence Review Committee (2012), 2011 Annual Report, Office of the Chief Coroner.

Government of Canada (2011), “Victims of Crime Research Digest”, Issue 04/2011

HEUNI (2008), “The International Violence Against Women Survey”, available at: Huron County (2009), “Community Health Status Report”, available at http://www.huroncounty.ca/health/reports_chsr.php

Ontario Women’s Directorate, Resources and Links, available at: <http://www.women.gov.on.ca/english/resources/stats.shtml>

Ontario Women’s Directorate, Resources and Links, available at: <http://www.women.gov.on.ca/english/resources/stats.shtml>

Perth County (2012). “About Perth County” http://www.perthcounty.ca/about_perth_county

Public Health agency of Canada. (2004), “How prevalent is women abuse in rural areas?”, Canadian Health Network quoted in Rural Public Health Report (2007). Haldimand-Norfolk Health Unit.

Statistics Canada (2006), “Measuring Violence Against Women” Statistical Trends 2006, Catalogue no. 85-570-XIE

Statistics Canada, (2006). “Community Profiles” , available at: <http://www12.statcan.ca/census-recensement/2006/dp-pd/prof/92-591/index.cfm>



Stratford Police Service (2009), “Annual Report”, available at: www.stratfordpolice.com/files/about/AnnualReport.pdf

United Nations (2005), “Good practices in combating and eliminating violence against women”. Report of the Expert Group Meeting, Vienna, Austria.

United Nations (2005), “The Economic Costs of Violence Against Women: An Evaluation of the Literature”, available at: www.un.org/womenwatch/daw/vaw/expert%20brief%20costs.pdf

United Nations (2006), “Ending Violence Against Women, From Words To Action”, Study of the Secretary-General, Sales



8. APPENDICES

APPENDIX A: AGENCY SURVEY FINDINGS

Table 1: Names and locations of VAW agencies or service providers	
Agency Name or Service Provider	Location
Emily Murphy Centre	Stratford (Perth)
Optimism Place Women's Shelter and Support Services Women's Shelter & Support Services	Stratford
Family Services Perth Huron	Stratford
Rural Response for Healthy Children	Clinton (Huron)
Huron-Perth Centre	Clinton
Huron Perth Healthcare Alliance	Stratford, Listowel, Seaforth (Perth/Huron)
Choices for Change	Stratford
City of Stratford Social Services	Stratford
Family Services Perth Huron	Stratford
Victim Services of Perth County	Stratford
Supervised Access Visitation & Exchange Huron Perth	Stratford, Listowel, Clinton, Goderich, & Exeter (Perth/Huron)
YMCA of Stratford-Perth	Stratford
Stratford Central	Stratford
Community Living Stratford and Area and Stratford Lakeside Active Adults Association	Stratford
Stratford Access Program	Stratford

Table 2: Service providers' perceptions of typical characteristics of women who experience violence	
Demographic Characteristics	Frequency (n = 15)
Women with mental health issues	13
Low income women	9
Rural women	9
Women with substance use issues	8
Married women	4
Women in common-law relationships	3
Women with disabilities	3
Single women	1
Divorced women	1
Women in same sex relationships	-
Widowed women	-



Table 3: VAW services offered, sought by women, and gaps in services			
Types of Services	Frequency		
	Offered (n = 14)	Most Sought (top three; n = 16)	Gaps (n = 16)
Advocacy	12	5	6
Outreach	6	2	7
Mediation	1	1	4
Legal Aid	1	5	12
Counselling	10	10	7
Medical Services	-	3	4
Financial Aid	2	8	13
Shelter/Temporary Housing	3	12	9
Skills Development	8	1	3
Professional Development	3	1	4
Employment Support	4	1	4
Peer Support Groups	6	1	4
Public Education	6	1	7
Referrals	11	2	3
Crisis Hotline	3	3	1
Court Support*	N/A	3	N/A

*Service providers were only asked if court support was a service that was sought by women.

Table 4: How women are referred to the agency	
Type of Referral	Frequency (n = 15)
Other agencies	14
Family and friends	14
Self-referral	14
Police services	10
Court services	7



Table 5: Challenges identified by service providers in VAW service delivery	
Types of Challenges	Frequency (n = 16)
Complexity of client needs	14
Dealing with the legal system	14
Lack of funding	13
Lack of staff	7
Sensitive nature of women's issues	6
Issues of confidentiality	4
Lack of gender-based violence training for staff	3
Staff turnover	3

Table 6: Service providers' perceptions of barriers women experience when accessing VAW services	
Types of Barriers	Frequency (n = 16)
Financial dependence on perpetrator	14
Lack of awareness of services	13
Lack of transportation	13
Social stigma	12
Fear of exposure	11
Fear for their lives and their families	11
Mental health issues	11
Substance dependencies	10
Lack of childcare	10
Confidence in effectiveness of services	8
Confidentiality issues	6
They don't think they need help	6
They don't want help	4
Disability	4



Table 7: Emergency Shelter Usage in Perth and Huron County in 2012

AGENCY	OPTIMISM PLACE - PERTH		HURON WOMEN'S SHELTER	
Month	Days at 100% Capacity	Days over 100% Capacity	Days at 100% Capacity	Days over 100% Capacity
January	16	0	5	26
February	28	0	10	10
March	30	6	11	19
April	26	0	7	17
May	31	2	6	15
June	30	4	1	24
July	30	0	2	24
August	23	0	1	2
September	21	0	16	6
October	25	0	1	11
November	23	0	1	0
December	19	0	4	0
SUB-TOTAL	302	12	65	154
TOTAL YEAR	314		219	
% of Year	86%		60%	
Funding Bases	13 Beds		10 Beds	

Both agencies have roll-away cots and emergency beds to ensure that all who seek safety can be accommodated.



Table 8: Services Provided at Optimism Place and Huron Women’s Shelter Emergency Shelters during the Fiscal Year 2011-2012

Service	OPTIMISM PLACE - PERTH	HURON WOMEN’S SHELTER*
Housing for Individual Women	79	50
Housing for Children	42	55
Total “Resident Days” (1 person in 1 bed)	4082	4739
Average Overall Occupancy	86%	130%
Number of Crisis and Support Calls Responded To	1776	2402
Individual Counselling to Women (Counsellors in residence and outreach)	8719.5 hours	1072 sessions + 473 sessions (Sexual Assault Recovery Program) = 1545 sessions
Children’s Counselling	651 hours	873 sessions
Funding Bases	13 Beds	10 Beds

Both agencies have roll-away cots and emergency beds to ensure that all who seek safety can be accommodated.

*Huron Women’s Shelter also reported that they provide 2nd stage housing, which includes 22 Apartments which are ‘rent-g geared-to-income’ in three separate sites; Goderich, Clinton, and Exeter. 40 individual women and 43 children lived in second stage housing with an overall occupancy rate of 81% in the three buildings.



APPENDIX B: GOOD PRACTICES

The following section highlights good practices coming out of a report from the United Nation's Division for the Advancement of Women. The text boxes within this section highlight some research participants' perceptions of projects and initiatives in other communities which they identified as promising.

Below is a summary of the good practices as identified by the United Nations with excerpts:

Good practices in law

1. General principles

Gender-based power relations are heavily dependent on law and legal systems. For this reason, legal reform has been a main focus for creating gender equality. In many States, various systems of religious or customary laws apply alongside the civil or criminal law. These systems are increasingly becoming the focus of reform efforts by women's organizations. For example, in Malaysia, "customary laws have been used to reform the Sharia in the introduction of the principle of division of matrimonial property" (pg. 15).

2. Legal codes

Countries are responsible for adopting laws that prohibit and criminalize violence against women and implementing them in an effective manner, making sure that they do not discriminate any social group. A functional legal system is not only vital for legal reform and procedural change but it helps protect women from abuse and reduces the need to access support. One example of a good practice is from Sweden, "the iKvinnofrid law" (an old Swedish word which means women's peace). This law "created a series of new offences, including "gross violation of women's integrity" which enables prosecution of domestic violence as a course of conduct, strengthens the law on sexual harassment and criminalizes the purchase of sexual services" (pg. 16).

3. Investigation and prosecution of complaints

In addition to intervene, force out and arrest perpetrators of violence in the household, in most jurisdictions the police is responsible for recording complaints and initiating investigations. The staff should be technologically equipped to collect and safeguard evidence. Female victims should be given the opportunity to choose to deal with specialized female staff. For instance, "women's police stations in Latin America and women's police cells in India have led to an increase in the reporting and recording of violence against women". Despite these



efforts, research studies show that the majority of reported cases of violence against women are not prosecuted. In this context, the link between prosecution, protection and services is critical. In the United States, New York specialized domestic violence courts incorporate services for victims along with criminal prosecution. In the United Kingdom, hospital-based Sexual Assault Referral Centres (SARCs) provide 24-hour contexts in which rape can be reported, forensic examinations undertaken, and victims provided with medical and other kinds of support” (pg. 17).

4. The rights of victims

All victims should have the right to legal advice and representation, information about their case, support and counseling. In the legal process, a victim’s “privacy, dignity and autonomy of [...] must be respected and enhanced in the legal process” and “no woman reporting a crime against her should be subjected to procedures that are humiliating” (pg. 18). Finland, Sweden and Switzerland have enacted “victim support laws”. These laws “aim to counteract the weak position of victims, resulting from their victimization and the justice system’s prioritization of rights of defendants. Such laws entitle victims to free legal advice and representation, alongside access to other forms of advocacy and support” (pg. 18).

5. Implementation of the law and evaluation

The judiciary plays a vital role in enforcing and interpreting laws, with its pro-active approach contributing considerably towards establishing new standards in relation to violence against women. Examples of good practices in law reform as social change are rulings by the Supreme Courts of Nepal, South Korea, the United Kingdom and Zimbabwe, who removed the marital rape exemption. With the purpose of evaluation, all countries should gather and analyse statistics about violence against women.

6. Coordination and stakeholder participation

Multi-sector collaboration is necessary depending on the type of incident. Collaborations between health, education, social services and other non-governmental organizations “can create dynamic projects and sets of services” (pg. 21). In most areas of the United Kingdom and Ireland, there are local inter-agency forums that work towards developing and promoting good practices.

In the process of law reform, victims, and women’s organizations should be included in the dialogue with those who will be implementing the laws. For example, in Honduras, government and civil society stakeholders were part of a multi-sectoral commission which “developed proposals to reform the law on domestic violence” (pg. 21).



In the Stop VAW focus group, participants highlighted a pilot project they identified as promising in London, Ontario that involved four partners: Women’s Community House, Changing Ways, the Children’s Aid Society and the Centre for Research and Education on Violence against Women and Children. The purpose of this pilot project was to help high-risk men end their abusive behaviour in their primary and intimate relationships. Men who were involved in this program receive an intervention with the purpose of attempting to decrease further incidents of violence. It was shared that although the entrance criteria for this pilot project was VAW-specific, the results showed a reduction in participants’ overall crime commission.

Good practices in the provision of services

In countries, services and supports are provided most commonly by State agencies and non-governmental organizations, increasingly involving communities, employers, the private sector (health providers, counselors, lawyers) and individuals. Good practice in providing support requires a “well-resourced specialist sector and training and capacity-building across core State agencies such as health, justice, social welfare and education” (pg. 22). For example, In Egypt, non-governmental women’s organizations began to raise awareness of VAW by collecting and using information to demonstrate that there was a need for a response. After collecting data from court records on “honour crimes”, they held various meetings and roundtables and organized a national conference to share their findings with others. This resulted in breaking the “taboo about speaking on the issue” and subsequently, “a network of non-governmental organizations linked together to address the issue from different angles, setting the foundation for the development of services” (pg. 23).

1. Goals in service provision and basic considerations

Services should be provided in such a way that empowers women to take control of their lives while promoting their overall well-being and security, both physical and emotional. Services should also be accessible and provide a range of options for support. There are multiple considerations that need to be taken into account in service provision, including: service providers not colluding with “traditional gender ideologies that excuse or justify men’s violence and/or blame victims” (pg. 23); responding thoughtfully to victims and treating them with respect can be “a step in the slow process of restoring trust and faith in other human beings” (pg. 23); and considering the needs of victims depending on the length and type of violence they faced, among other factors.



2. Principles of good practice in service provision

The following considerations are principles of good practice that reflect not only the protection of human rights but also the lessons learned by service providers when dealing with violence against women :

- Begin from women's accounts/experiences of violence: Listening is a crucial principle in providing services to victims/survivors
- Be clear that a victim is never responsible for violence: This covers explicit and implicit ways of blaming women, and service users may need space to explore why victims feel they are to blame.
- Self-determination: Service providers should provide women with options and possibilities, advice and support, but not take decisions for them.
- Confidentiality
- Securing and empowering victims
- Accessible to all
- Pro-active contact: Once a victim establishes contact, the service should take responsibility for keeping in touch and offer ongoing support.
- Support by women for women: Numerous research studies show that in the aftermath of violence women and girls feel more trusting towards other females
- Support supporters: Violence against women work can be difficult and demanding, it is therefore vital that some form of supervision is available.

One key informant shared a promising practice from the Aboriginal community, where a holistic approach to addressing violence is used. This is done by involving all members of the family. Osweken Aboriginal community near Brantford, Ontario has first and second stage housing, but in addition has third stage housing. In third stage housing, all members of the family live in the shelter to heal from VAW together and learn how to cope as a functioning unit. Current responses to VAW encourage men, women, and children to separate, but to address violence against women as a family issue may be the next step to preventing violence in the community.



The following are two examples of good practices for guidelines for shelters and domestic violence services. “The European network WAVE (Women Against Violence Europe) has developed quality standards for women’s services [...] including for help lines and shelters. It also provides guidance on empowerment practices. The Council of Europe recommends that one place in a women’s shelter per 7,500 inhabitants should be provided, and the minimum standard should be one place per 10,000 inhabitants” (pg. 25).

3. Necessary forms of service provision

Even though the State is an important funder, the State itself is not the best provider of services for women. Rather, the State must ensure that its agents have the training and skills to fulfill specific roles in cases of violence against women. National emergency 24h hotlines, national networks of sexual assault centres and shelters and building capacity in communities form the minimum level of services that should be available for women. A good practice is Sexual Assault (Referral) Centres (SACs/SARCs) which, “aim to provide a high standard of comprehensive care to anyone who has experienced recent sexual assault” (pg. 26). There are a number of SAC/SARC models. Many countries have hospital-based provision. Australia has a community-based option that is near a partner hospital. Canada and other countries have extensive networks while others have centres “often in major cities or locations where either women’s groups or committed medical staff have campaigned to improve local provision” (pg. 26). There are also ‘centres of excellence’ in countries like Iceland, Ireland, Denmark and Sweden.

4. Co-ordination and multi-agency work

Inter-agency cooperation and coordination is vital in this field, since offering support and services for women victims and prosecuting perpetrators requires linking more than a few agencies and services. For instance, there is ACT, an inter-agency project in Canberra, Australia which “in coordination with the Victims of Crime Office, has over three years increased both the arrest and conviction rates for perpetrators of domestic violence. These results are the outcome of an agreed protocol between involved agencies and a dynamic, solution-oriented process. The use of new technologies such as digital cameras to photograph victims and crime scenes which are made available to the court immediately, along with awareness that prosecutors will not drop cases, has increased guilty pleas. A research project has also been undertaken to investigate victim satisfaction” (pg. 27-28).

Good practices in prevention

Comprehensive international, regional, national and local multi-sectoral preventative strategies are mandatory for the creation of freedom from all forms of violence against women societies. Prevention strategies must address the causes of violence against women, which are rooted in the continuities between traditional and contemporary gender-orders.



1. Approaches to change-making

Campaigning- has proved to be effective in preventing violence against women by making issues visible and creating response strategies. For example, in 1990, the Latin American and Caribbean Network against Domestic and Sexual Violence was formed and included representatives from 21 countries. The campaigns they have undertaken have resulted in “significant changes in national legislative and policy environments, as well as regional and international statements of political will” (pg. 33). In addition, legislation on domestic or family violence exists in almost all Latin American and Caribbean countries and “many have laws that address sexual violence, including both amendments to the penal codes and the inclusion of provisions that specifically address sexual violence” (pg. 33).

One research participant shared a campaign they thought was promising called Neighbours, Friends & Families (NFF). This campaign is an educational VAW awareness campaign in partnership between the Ontario Women’s Directorate and the Centre for Research & Education on Violence Against Women & Children. The purpose of the NFF campaign is to raise awareness of the signs of VAW so that people who are close to at-risk women and abusive men can help. The website offers information on recognizing the signs of abuse in both women and men, and how to approach conversations with victims and perpetrators about stopping abusive behaviours. There is information for victims and perpetrators of violence and what resources are available to seek help with the situation.

Using the media- is effective in reaching large audiences and can have wide ranging impacts. One example of media being used comes from Breakthrough, a women’s human rights group. With support from UNIFEM, they made a video that addressed “domestic violence and empowerment of the survivor” (pg. 34). In India, this video reached over 26 million households and made it to the country’s top 10.

Community mobilization- refers to engaging and mobilizing the local community to challenge violence against women. One example of good community activation practice is the Kivulini Women’s Rights Organization, who is working with a cross section of community members in Mwanza, Tanzania. Kivulini is “linking individual women and men at the grassroots traditional and religious leaders, local government officials and institutions, [and they move beyond] awareness-raising into helping stakeholders themselves make and sustain tangible changes in their communities, workplaces and institutions” (pg. 34).



Local activism- this approach sees the whole community as responsible for protecting women and prevention of violence. One example of local activism is from the Centre for Domestic Violence Prevention (CEDOVIP) in Kampala, Uganda. This centre has an equal number of men and women volunteers and community counsellors. The following is a summary of what they do: “the volunteers commit to attend training sessions twice monthly and to give 20 hours of their time each month to conducting violence prevention activities in their community. Activities range from participatory drama, impromptu discussions, booklet clubs, door-to-door visits, advocacy at local government meetings, watch groups, community dialogues, etc. They discuss and challenge violence against women among their peers. The role of the community counselors is to provide basic support services to women. Three male counselors have also been trained at the request of women in the community, their roles are family mediation and working with perpetrators. These community members are the first layer of response and the primary promoters of social change” (pg. 35).

Advocacy- can play a role in prevention by “convincing governments and parliamentarians of the need for sustained prevention efforts against violence against women across all sectors” (pg. 35). It can facilitate knowledge transfers between government, civil society and victims/survivors and ensure that lessons learned in other countries are shared.

Changing conducive contexts- includes good lighting in areas where people wait for public transportation (transport interchanges), car parks, streets in both town centres and residential areas, and walking paths along main access roads. For example, in refugee camps, “the UNHCR guidelines include recommendations that women/girls are to be consulted to identify appropriate placement and lighting for latrines/bathing areas and food distribution centres, as well as how best to ensure safe access to water and fuel” (pg. 36).

Alliance and coalition-building- this is something that is emerging in the developed world especially. These include strategic alliances and coalitions among groups that work towards social justice. It is suggested that although it can be challenging to build coalitions across the VAW sector, “a united sector can argue more effectively for integrated approaches to all forms of violence against women and undertake preventative work in coalition” (pg. 36).

Engaging men- a key alliance in the prevention of VAW. Engaging men and boys in transforming gender relations and creating a “masculinity that uncouples strength and respect from violence” (pg. 36) is important. This approach requires building coalitions where men respect “women’s leadership overall [and] have clear policies and protocols about whether and how men who admit to having used violence can be involved, how to deal with revelations about current abuse, and developing messages and programming that does not excuse men but at the same time does not leave them feeling accused, blamed or guilty” (pg. 36).



Training and capacity-building- refers to the training and capacity building of the victims of violence against women and community members to prevent violence against women. This may include: self-defence training for women, gender-just relationships for men and conflict resolution for the community. Self defence for women and girls is seen as a good practice. It was developed in the 1970s to “prevent sexual assault and provide effective defence strategies” (pg. 36). Since then, it has been adapted for different groups, including young girls and women living with a disability. Self defence now covers various types of abuse and in some countries has been included in schools for girls.

