OCTEVAW

Ottawa Coalition To End Violence Against Women

Hidden from Sight Volume II:

A Profile of Violence Against Women in Ottawa

November 1, 2011

Hidden From Sight Volume II:
The Prevalence of Violence Against Women in Ottawa

November 2011

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This report, as well as additional information on violence against women can be found on our website:
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For good...forever *Le bien...toujours*

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Ottawa Coalition to End Violence Against Women

Ottawa Coalition to End Violence Against Women (OCTEVAW) is a non-profit, non-partisan organization composed of a network of member organizations and individuals located within the City of Ottawa and surrounding regions. Our members include women abuse and rape crisis agencies, victim services, child protection services, hospital and police representatives, the crown, probation and parole, health and counselling services, academic researchers, and other concerned community members.

Mission:

The Ottawa Coalition to End Violence Against Women (OCTEVAW) is a coalition of organizations and individuals dedicated to ending violence against women (VAW) and through leadership, education, advocacy, and political action, to promoting a coordinated response to women and their children who have experienced abuse. We bring together women's shelters, sexual assault centres, children's services, health and resource centres, police services, hospital services, victims' services, the Crown, researchers, students, and other community agencies and justice partners to combat woman abuse and sexual violence in our community.

Vision:

OCTEVAW aspires to a future in which:

• No woman in our community need fear for her safety and well-being, or that of her children;

• Respect for the inherent worth and dignity of all women is reflected in our public institutions; and,

• All members of the community are united in supporting efforts to ensure a permanent end to violence and abuse of women and their children in Ottawa.

Values:

In working collaboratively to achieve equality of rights, fair access to services and resources, and social justice for women and their children who have experienced abuse, OCTEVAW adheres to feminist, anti-racist, anti-oppression, and pro-choice principles and is committed to celebrating diversity, inclusiveness, and the dignity of all women and their children.

Background to the Project

The first volume of the *Hidden From Sight* report was born out of a prevailing need for a more accurate overview of the prevalence of VAW in Ottawa. To that end, OCTEVAW received one-time project funding in 2008-2009 from the Ministry of Community and Social Services to conduct research and write the initial report. The first report looked at police, community, and government data regarding woman abuse in intimate relationships, sexual violence, and femicides (homicides with female victims that contain a woman abuse component) in the Ottawa area as they compared with national and provincial trends.

The first report raised additional questions and identified new challenges and in 2010-2011 Community Foundations Ottawa provided a one-time project grant for a follow-up report.

The primary goal of this project is to consolidate and update existing VAW data collected by local agencies, thereby providing agencies and the public with a ready reference on the prevalence of VAW in Ottawa. It is OCTEVAW's hope that "Hidden From Sight" will contribute to dialogue, improved service responses, and ultimately the elimination of violence against women. Additional objectives include:

Providing a descriptive overview of services available to survivors of VAW in Ottawa;

Consolidation and analysis, where data is available, of the demographic characteristics of survivors who access VAW services in Ottawa, as well as the manifestations of VAW (types or characteristics of the violence) that lead women to seek services;

Identification of gaps in knowledge about the prevalence, manifestations, demographic characteristics, access to services, and service responses to VAW and subsequent areas for future research, dialogue and investigation; and,

Piloting of a Snapshot research project as a potential method for collecting more complete and detailed data on survivors of VAW (demographic profile, types of violence experienced, and services accessed), as well as to identify potential gaps and barriers to access that require investigation.

Timeframe

Unless otherwise specified, 2009-2010 refers to the full 24 calendar months of this time period. In cases where organizations track information based on the fiscal calendar, data has been recoded to correspond to the appropriate timeframe or as otherwise noted.

Geographic Location

This report includes data from agencies that serve women currently residing in the Ottawa area or who have accessed services in Ottawa but may live elsewhere.

Methodology of the Project

To coordinate the research project, OCTEVAW hired a part-time researcher to liaise between the agencies involved, manage and analyze the data, and write a final report. The research coordinator contacted OCTEVAW member agencies and other community agencies through a call for participation newsletter (see Appendix A), phone calls, and email messages. The pool of agencies snowballed with input from OCTEVAW members and the agencies initially contacted (for a list of all agencies contacted and those that participated, see APPENDIX B). Agencies contributed available data along four major themes: demographic characteristics of clients served, number of clients served, chief concern of client served, and referrals to other services. In the end, 48 agencies were contacted and invited to participate and 32 of these agencies were able to contribute data.

OCTEVAW also piloted a primary data collection methodology for the Snapshot component of the "Hidden From Sight" report. The methodology for this sub-project is further detailed in the Snapshot section.

Limitations of the Research Design

A number of limitations in the research design result from resource limitations and the ad hoc nature of the project:

Resources

- A challenge for the agencies participating in this project was to spare the time to summarize and submit relevant data. Although interest in participating was high, not all organizations were able to provide data due to a lack of time or available resources. Therefore, the data presented in this report should not be considered exhaustive or inclusive of all women affected by violence in Ottawa.
- It is not possible from the data provided to assess the status of VAW in all its diversity. Certain groups of women who experience multiple barriers and intersecting oppressions may not have been thoroughly accounted for in this report, including (but not limited to) Aboriginal women, women with disabilities, women of colour, and Francophone women. Due to limited time and resources, it was impossible to do an exhaustive and extensive collection of data from all agencies that may have served women survivors of violence. Future research projects should aim to be as inclusive and accessible as possible.

Data Collection

- It is important to note that this report includes data collected from 32 Ottawa agencies. Therefore, women who have come forward to agencies not included in this report and women who have not come forward to any agency will not be reflected in the data.
- All data presented within the main report are pre-existing data[1] collected by the agencies themselves and no two agencies collect the same data in exactly the same format. As such, our role was to faithfully report and analyze the data as it was provided to us.
- There are two counting limitations that are important to this report. First, VAW tends to be highly under-reported. Many assaulted women do not seek support from the police or health or social service agencies, or if they do, they choose not to disclose that the reason they are seeking services is because they have been assaulted. Second, women who contact more than one agency will likely be counted more than once in the data. Figures in this report should therefore be interpreted as the number of contacts that women have had with services and not the number of women affected (unless otherwise stated).
- Cases of woman abuse often include elements of sexual abuse. However, sexual violence is particularly underreported (Statistics Canada, 2008) due to the shame and stigma experienced by survivors. When women report abuse by their partners, they often do not disclose sexual abuse, making sexual violence more difficult to measure. Additionally, this report does not focus on sexual violence committed against minors under 16 years of age.

[1] *Original data was collected for the Snapshot project so comparisons could be made across agencies.*

Violence Against Women (VAW) Definitions and Terminology

Violence Against Women

Violence against anyone is unacceptable. However, violence perpetrated by men against women represents a unique aspect of a wider social problem and requires specific attention and solutions. Experiences of woman abuse and sexual violence must be assessed against the backdrop of the historical, social, political, cultural, and economic inequality of women.

The United Nations Declaration on the Elimination of Violence against Women (1993) defines VAW 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." Health Canada has adapted this as the official definition of VAW for the Government of Canada (Health Canada, 2006). In addition, the Declaration further defines VAW as understood to encompass, but not be limited to, the following:

(a) Physical, sexual, and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence, and violence related to exploitation;

(b) Physical, sexual, and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions, and elsewhere, trafficking in women, and forced prostitution; and,

(c) Physical, sexual, and psychological violence perpetrated or condoned by the State, wherever it occurs (United Nations, 1993).

Survivor

The word "victim" is often used to describe women who have experienced violence; however, it is often argued that the term pathologizes individuals and their experiences. The word "survivor" stems from a feminist framework that emphasizes and celebrates the enduring strength and resiliency of women. The term "survivor" in used in this report to refer to women who have experienced violence.

Woman Abuse

Similar to domestic violence or intimate partner violence, woman abuse is a term that describes violence occurring within an intimate relationship. However, woman abuse is a term that stems from a gender-based analysis and therefore better reflects the power dynamics and gendered social roles of men and women. It refers to psychological, emotional, verbal, environmental, social, financial, ritual, and religious abuse, harassing behaviour, and use of physical or sexual violence, be it actual or threatened, that is perpetrated by a man against a woman who currently share or previously shared an intimate relationship. Woman abuse can occur in all relationships regardless of relationship type or status (e.g., dating, common law, marriage, or familial). The violence may represent isolated incidents, but typically occurs within a larger context of power and control leading to ongoing abuse and controlling behaviour.

Woman abuse is the term used to describe all types of threats, violence and abuse women experience in past or present relationships. In exceptional cases, terms such as domestic violence or intimate partner violence will be used to reflect the specific terminology as it is used by particular agencies or institutions.

Sexual Violence

Sexual Violence is used in this report as an umbrella term to refer to a variety of sexually aggressive behaviours which includes but is not limited to the definition contained in the Criminal Code of Canada (see APPENDIX C). Due to the limitations of this definition, the VAW community uses the following broader definition:

Sexual Assault is an unwanted act of a sexual nature that is imposed on another person without their consent. It is a crime defined in the Criminal Code of Canada. This may include:

- Any kissing, fondling, touching, oral sex, anal sex, and sexual intercourse without consent;
- Forcing someone to engage in sexual intercourse or any other sexual act; and,
- Continued sexual contact without consent. The Criminal Code describes consent and the specific instances where consent is not obtained (APPENDIX C).

Sexual Abuse is an act of violation, power, and domination. Sexual abuse is any kind of sexual contact forced on a child or an adult.

- It can include unwanted sexual touching, rape or attempted rape, date rape, incest, forcing someone to have sexual intercourse, forcing someone to engage in any sexually related activity, and sexual exploitation through pornography or prostitution.
- A child or woman can also be sexually abused without being touched; for example, if they are forced to watch sexual acts, movies, or read pornographic material.

Sexual harassment is a form of sexual violence that includes any unwanted attention of a sexual nature. Sexual harassment includes suggestive remarks, sexual jokes, displays of suggestive images, leering or whistling, unwanted physical contact, demand for sexual favors, and physical assault. When sexual harassment leads to sexual assault or stalking, it falls under the Criminal Code (section 273 for sexual assault and section 264 for criminal harassment). Otherwise, it falls under Human Rights Law and civil law. There is no legislation prohibiting sexual harassment in public places which is the most common type of harassment women experience (Johnson, 1996).

Woman Abuse in Intimate Relationships

Woman Abuse in Canada

Woman abuse can be found in every province, territory, city, and community within Canada (Statistics Canada, 2011). It affects women from all socio-economic statuses, ethnicities, and religions. In Canada:

- More than 178,000 women reported to Statistics Canada's 2009 General Social Survey on Victimization (GSS) that they had been assaulted or sexually assaulted by a former or current partner in the 12 months prior to the survey.
- Almost 1.2 million women reported having been similarly assaulted sometime in the previous five years.
- Over half of woman abuse survivors (57%) reported being victimized more than once by the same partner.
- In 2009, only 23% of all women abuse survivors indicated they had contacted the police.
- Survivors often experience multiple victimizations before contacting the police: almost two-thirds of woman abuse survivors (63%) reported having been victimized more than once and more than one-quarter (28%) had been victimized more than 10 times before contacting the police.
- The most common reason survivors did not report the abuse was the belief that the incident was a personal matter that did not concern the police (82%) (Statistics Canada, 2011).

Woman Abuse in Ontario

- More than 450,000 Ontario women reported to Statistics Canada's 2009 GSS that they had been assaulted by their partner sometime in the previous five years prior to the 2009 survey (Statistics Canada, 2011).
- Ontario has the second highest police-charging rate in the country at approximately 90% of cases compared to 77% nationally (Statistics Canada, 2008).
- Domestic violence (i.e., woman abuse) represents 14% of all persons charged by the police for violent crimes in Ontario, and women (12%) continue to outnumber men as survivors (3%) 4 to 1(Statistics Canada, 2008).
- Among cases of domestic violence in Ontario, in 2006 there were 44 homicides or attempted homicides, 189 sexual assaults, and 1,777 major assaults (Statistics Canada, 2008).
- The most frequent charges filed in Ontario domestic violence cases include: common assault (64%), major assault (15%), uttering threats (8%), and criminal harassment (8%) (Statistics Canada, 2008).

Pets and Woman Abuse

By Rochelle Stevenson, Masters student, University of Ottawa

Pets can become involved in woman abuse, used by the abuser in the commission of emotional and mental abuse. Threats or harm to the pets can be used to control and manipulate the woman. Threats by the abuser about what would happen to the pet should the woman leave can be used to control her behaviour, forcing her to stay in, or even return to, the abusive relationship. Often the pets are one of the only sources of love and companionship for the woman, so harming the pet directly harms the woman. The more important the pet is to the woman, the easier it is for the abuser to use the pet to emotionally abuse or control their partner. Estimates vary, but shelter samples have yielded statistics that from 56% (McIntosh, 2004; Faver and Strand, 2003) to over 70% (Ascione, 1998) of women entering shelters report pet abuse as a component of the abuse of human family members. When considering the number of women who are not asked about pets on entry to the shelter or never go to a shelter to escape abuse, the number of women and pets that are victimized may be much higher.

Ottawa Police[2]

In 2009, the Ottawa Police Service (OPS) responded to 1,292 occurrences of domestic violence where charges were laid or warrants sought. In 2010, the OPS responded to 1,279 similar occurrences. Of these combined 2,571 domestic violence occurrences, 2,204 men were charged in cases with a woman survivor. This means that 86% of all domestic violence cases involved a man perpetrating violence against a woman. This rate is higher than the national average of 83% (Statistics Canada, 2008). Men who were repeat domestic violence offenders (charged by the police at least once previously) were responsible for 38% of these occurrences.

In many cases, domestic violence does not represent a single charge but a combination of charges which reflects the severity and complexity of the issue. The following chart represents only a few of the commonly used charges (see APPENDIX C for Criminal Code definitions and/or additional information regarding charges).

Table 1.1 Common charges laid by the Ottawa Police Service against male perpetrators in Ottawa woman abuse cases.

Charges Laid Against Men in Domestic Violence Cases, Ottawa	2009	2010
Assault		
Common Assault	744	667
Assault with a Weapon or Causing Bodily Harm	254	217
Aggravated Assault	39	25
Sexual Assault (within a domestic violence case)		
Sexual Assault	17	22
Sexual Assault with a Weapon or Causing Bodily Harm	2	2
Aggravated Sexual Assault	0	1
Breaches		
Breach of Peace Bond	44	9
Breach of Probation/Parole	298	305
Breach of Restraining Order	2	1
All Other Breaches	558	406
Other Charges		
Uttering Threats	338	296
Criminal Harassment	191	149
Mischief	308	282
Homicide (Manslaughter & Murder)*	0	0
Attempted Murder	3	3
Choking	4	1
Forcible Confinement	69	43
Firearms	53	16

Source: Ottawa Police Service

**The zero homicides recorded by the Ottawa Police Service is in contrast to the homicides reported in a separate section of this report.*

Police statistics represent only the violence and abuse that is reported to them. For a more complete picture of woman abuse, we extend our focus to community agencies. Many women seek out community-based agencies for support but never report to the police, and many seek help from family and friends and never contact social service or health agencies or the police.

[2] *Data from the Victim Crisis Unit was not available for this report as they were updating their data collection systems.*

Sexual Assault and Partner Abuse Care Program at the Ottawa Hospital

The Ottawa Hospital Sexual Assault and Partner Abuse Care Program (SAPACP) is coordinated through the Emergency Department of the Civic campus. The Program was launched in 1994 and is one of 35 such programs in partnership with the Ontario Network of Sexual Assault and Domestic Violence Treatment Centers. The SAPACP consists of a Coordinator/Advanced Practice Nurse, a Follow-Up Nurse, and many staff who are specially trained as Sexual Assault Nurse Examiners (SANE) or in the process of becoming SANE trained. Staff members are available for health care services, crisis intervention, evidence collection and documentation, and safety planning, as well as for support for emotional and social concerns.

The SAPACP provides both emergency and non-emergency services to two groups in the Ottawa and surrounding area:

- Survivors of domestic violence or assault, or any physical or emotional abuse by a spouse or other domestic or intimate partner; and,
- Survivors of sexual assault (including drug facilitated sexual assaults or any inappropriate sexual touching) to clients over 16 years of age.

Although there is no provincial mandate for the wait time once clients present to the emergency department, the SAPACP is committed to seeing these patients within one hour of the SANE registered nurse on call being notified of the client's consent to see them.

From April 2009 - March 2010, the program saw 56 acute (emergency) clients who had been physically assaulted by their partner within the previous 72 hours. Only 63% involved the police. Almost all (98%) clients were women. The program also conducted 1,271 follow up calls, 18 follow-up health visits, and notified the Children's Aid Society in 9 cases.

What Can We Do to Prevent Woman Abuse?

By Bailey Reid, OCTEVAW and Laurie Rektor, Family Services à la famille Ottawa

The Neighbours, Friends and Families (NFF) Campaign is a provincial campaign that aims to end violence against women through public awareness. By educating communities about the warning signs, risk factors and resources, we can all help to keep women safe. OCTEVAW and the NFF Campaign now have a partnership to focus on woman abuse in the workplace through Bill 168. NFF resources can be found online at www.neighboursfriendsandfamilies.ca and www.octevaw-cocvff.ca.

In Love… and In Danger (ILID) is a community program of Family Services à la famille Ottawa, offered in partnership with the Ottawa Carleton District and the Ottawa Catholic School Boards. ILID is a teen dating violence prevention program, focused on promoting healthy and safe relationships. In the fall, the program brings teams of students from Ottawa's high schools together for a full day of dynamic and interactive learning about dating violence and woman abuse. Each team develops a project to implement at their own school that will educate their peers about dating violence prevention. In the spring, the student teams participate in a second full day conference during which they present their project and deepen their knowledge of intimate partner violence. For more information go to www.familyservicesottawa.org/english/ilid.html

The Fourth R is a bilingual high school-based program aimed at reducing bullying, partner violence, sexual violence, drug/alcohol abuse, and risk behaviours, (including alcohol-related sexual assault) by involving students, teachers, parents and community members. Programming is delivered to students in grade 9 health class as part of the curriculum requirements of the Ontario Ministry of Education (Johnson & MacKay, 2011).

Women's Shelters

There are seven main shelters in the City of Ottawa that were established to provide housing and support to women and their children fleeing violence and abuse: Chrysalis House, Harmony House, Interval House, La Présence, Maison d'amitié, Nelson House, and Oshki Kizis Lodge. All but Harmony House are first stage or emergency housing which allow a woman to stay for approximately 3 months[3]. Harmony House is a second stage or transitional shelter, which can accommodate a woman for up to one year. Additionally, Evelyn Horne Emergency and Transitional Housing offers support for young women aged 12-24, including support for those who have experienced violence. Women's shelters in Ottawa offer a variety of services including counselling, support groups, children's groups, safety planning, and above all safe refuge from violent partners or ex-partners. Most shelters are open to all women; however, Maison d'amitié serves francophone women and their children and the Minwaashin Lodge Aboriginal Women's support Centre (through Oshki Kizis Lodge) provides culturally specific comprehensive support services to First Nations, Metis, and Inuit women and children. In addition to the shelter, Minwaashin Lodge provides outreach services to homeless Aboriginal people, cultural programs, counselling, addictions counselling, elder programming, children's and youth programming, employment support and assistance, and family and transitional support workers to assist women in navigating and accessing other services in the community.

Five of the seven shelters were able to participate in this project. They were able to provide information not only about their services but also about the characteristics of women who accessed their services in 2009 and 2010.

Table 1.2 Number of clients served by five Ottawa shelters during 2009 and/or 2010.

	Chrysalis House	Harmony House		Interval House	Oshki Kizis		Maison d'amitié	
	2010	2009	2010	2009	2009	2010	2009	2010
Total Number of Clients Housed	141	48	46	92	142	134	142	136
Women Housed	72	26	23		109	90	74	72
Children Housed	69	22	23		32	44	68	64
Total Other Clients Served/Services Provided	N/A	133	124		16,800	17,700	N/A	N/A
# of calls for information or aid	1,319	2,600		3,083	N/A		3,111	2,854
# of applications received	N/A	100		100-300	N/A		2,067	1,947
Shelter size	25 units	10 units		20 units	21 units		30 units (2 locations)	

Note: Shelters do not record information in a consistent format. N/A indicates areas where the given shelter has not provided this breakdown of information. That does not mean that these shelters do not offer this service, only that the data provided for this report was not sufficiently detailed to report numbers in those categories.

In 2010, four of the Ottawa shelters housed 427 women and children. Of these, 41% were children as the majority of women accessing shelters have more than one child. Not all women seeking refuge can be assisted. Shelter space is extremely limited in Ottawa and women and children are routinely turned away due to lack of available space. For example in 2009, Maison d'amitié refused 1,925 woman (57%) and children (43%), and in 2010, they had to turn away 1,811 women (54%) and children (46%).

Women who access shelters come from all backgrounds. The most common age bracket was 26-35. Almost half of those housed in shelters were children. Table 1.3 shows the breakdown of age groups by shelter. Mother tongue varied considerably with English being the most dominant language, followed by French, Arabic, and Spanish. The majority of women were Canadian citizens, followed by landed immigrants and permanent residents. Table 1.4 provides additional demographic information by shelter.

[3] *Note: Chrysalis House does not place a time limit on its clients' duration of stay.*

Table 1.3 Age categories of clients by shelter.

	Chrysalis House	Harmony House		Interval House
	2010	2009	2010	2009
Children	42%	46%	50%	N/A
Women:				
Under 20	1%	2%	2%	1%
20-25	16%	10%	13%	22%
26-35	17%	21%	15%	39%
36-45	12%	13%	13%	23%
45-50	5%	6%	4%	13%
50 and over	5%	2%	2%	2%

Note: Average age of women housed at Maison d'amitié was 32 in 2009 and 34 in 2010.
Average age of children housed at Maison d'amitié was 6.2 in 2009 and 6.8 in 2010.

Table 1.4 Client demographic information for women by shelter.

		Chrysalis House	Harmony House		Interval House
		2010	2009	2010	2009
	Total Women	100%	100%	100%	100%
First Language					
	Arabic	9%	0%	4%	20%
	Creole	1%	0%	0%	0%
	English	77%	92%	70%	46%
	French	12%	4%	13%	13%
	Indonesian	1%	0%	0%	0%
	Kirundi	2%	0%	0%	0%
	Mandarin	1%	0%	0%	0%
	Portuguese	3%	0%	0%	0%
	Russian	5%	0%	0%	0%
	Somali	3%	4%	0%	10%
	Spanish	6%	0%	13%	0%
	Other	N/A	N/A	N/A	12%
Naturalization Status					
	Citizen	77%			71%
	Landed Immigrant/ Permanent Resident	20%	N/A		21%
	Refugee	0%			4%
	Visa/Visitor	1%			1%
	Not Specified	2%			0%

Note: Of women housed at Maison d'amitié in 2009, 71% were born outside of Canada and in 2010, 76% were born outside of Canada.

As seen in Table 1.5, all women accessing shelters reported emotional/psychological abuse, followed by physical violence reported by between 34% and 80% of women. Women typically experience more than one form of abuse and often experience all forms of abuse. Harmony House recorded higher prevalence of all types of abuse than the other shelters. This may be due to its unique status as a second stage or transitional shelter. Given the longer duration of a woman's stay at Harmony House, she may develop stronger relationships with shelter staff which in turn may allow her to feel more comfortable disclosing past incidents of violence.

Helping Women Go Back to Work

By Louise Grace, Dress for Success Ottawa

Dress for Success Ottawa works with local community organizations to promote the economic independence of disadvantaged women from diverse backgrounds, including women who have experienced violence. Dress for Success provides women with professional attire and a network of support and career development tools. Programs are designed to lift a woman's self-confidence by providing her with clothing appropriate for a job interview and the tools to help her navigate through work while balancing day-to-day life.

Women who find employment after working with Dress for Success are welcome to join the Professional Women's Group (PWG). One aspect of the PWG is the Mentoring program, which is designed to assist women during their time of transition into work. All programs are designed to give women the opportunity to succeed and gain financial independence. For more information: www.dressforsuccess.org/Ottawa

In addition to providing safe housing, shelters also receive phone inquiries, requests for information, and follow-up calls. Of the five shelters that provided data, three shelters received over 7,000 calls/inquiries about services. Averaged across the seven shelters, it is possible to extrapolate that over 14,000 phone calls were received in one year, averaging 40 calls per day total or approximately 5-6 calls per shelter per day. Shelters also help women develop safety plans to prepare strategies for protecting themselves and their children during episodes of violence, when getting ready to leave, at their new home, while obtaining protection orders, at work, in public places, and so on. In an average year, four of the participating shelters assisted over 1,000 women to develop safety plans appropriate to their specific situations.

Table. 1.5. Types of violence experienced by shelter clients.

Type of Violence	Chrysalis House	Harmony House	Interval House
Emotional/ Psychological/Verbal	100%	100%	100%
Physical	34%	80%	34%
Sexual	8%	60%	16%
Financial	15%	70%	15%

Housing Needs

Women fleeing violence are amongst those given special consideration for receiving housing through rent-geared-to-income (RGI) city and provincial housing initiatives. Special Priority Placements (SPP) are provincially mandated and not gender specific; they are available to anyone who is being abused by a family member with whom they have lived, even if they no longer reside with that person and are planning to permanently separate. In keeping with this, The Social Housing Registry of Ottawa reports that 504 households in 2009 and 550 households in 2010 were housed from the centralized waiting list with SPP. These numbers reflect individuals and families who are fleeing abusive partners or a violent family member (such as a parent or a child in the case of elder abuse). These figures likely understate the housing needs of women fleeing abuse as the waiting list for social housing exceeds the number of available spaces.

The City of Ottawa has created a priority category of Urgent (Safety) Status. In order to be accorded this status, an individual must demonstrate that they, or someone in their household, are experiencing an ongoing, extraordinary threat to their personal safety. This could include aggressors with whom the victim has had a relationship. The Social Housing Registry of Ottawa reports that 183 households in 2009 and 152 households in 2010 were housed from the centralized waiting list with Urgent (Safety) Status. Again these numbers represent all households given priority placements and not just women fleeing violence. For both SPP and Urgent (Safety) Status, the individual must have documented proof that they meet the criteria for special consideration before they and their family members can be accorded the priority.

In addition to these initiatives, Action Housing, a charitable organization devoted to assisting low-income individuals and families to find and maintain safe, affordable, and adequate rental housing, opened 433 files for women who were survivors of woman abuse in 2009. These women come to Action Housing primarily to find accommodations and occasionally for follow-up services related to the violence they experienced.

Community Resources

Woman abuse and sexual assault survivors can also seek assistance from various community services that include community health and resource centres, counselling services, and legal clinics, as well as organizations dedicated specifically to the needs of diverse women. Ottawa has 6 community health centres and 8 community resource centres. These organizations provide a wide range of services that vary based on the type of organization and target population. This report documents statistics from two community resource centres, one community health centre, and one community charity organization.

Community Resource Centres

The Coalition of Community Health & Resource Centres of Ottawa includes a total of 14 centres across the city geared to assist individuals who live within their catchment area (i.e., neighbourhood). However, only 4 out of the 14 centres provide services related to VAW: Western Ottawa Community Resource Centre (WOCRC), Carlington Community Health Centre, Nepean Osgood Rideau Resource Centre, and Eastern Ottawa Resource Centre. The Western Ottawa Community Resource Centre includes the VAW Counselling Program located at WOCRC, Carling Family Shelter (CFS), Nepean Rideau and Osgoode Community Resource Centre (NROCRC), Pinecrest-Queensway Community Health Services (PQ), and Chrysalis House (CH).

Community Resource Centres serve a diverse clientele. One of the participating resource centres provided the following demographic and offence breakdown, as seen in Table 1.6 and Table 1.7.

These community resource centres have thousands of client interactions each year and serve hundreds of women and children. In 2009-2010, the Eastern Ottawa Resource Centre:

- Served 2,011 women seeking VAW services;
- Ran 11 support groups;
- Served 40 children as part of the Children Who Witness Violence (CWWV) program; and,
- Provided 237.5 hours of direct service towards the school-based anti-violence program.

Additionally, in 2010 Eastern Ottawa Resource Centre received 744 calls via the regional English Helpline and 1,365 via the Francophone support line FemAide for a total of 2,109 calls.

- Similarly, in 2010 the Western Ottawa Community Resource Centre made:
- 2,992 VAW counselling contacts (i.e., number of times counselling was provided not number of women receiving it);
- 867 transitional housing support program contacts;
- 274 CWWV (adults) total contacts; and,
- 122 CWWV (children) total contacts.

Community Health Centres

Community Health Centres are community-governed organizations that provide primary health care, health promotion, and community development services. Centres employ physicians, nurse practitioners, nurses, dietitians, health promoters, counsellors, and other health professionals.

Carlington Community Health Centre offers individual counselling for women with a history of abuse and/or for women currently in an abusive relationship. They offer support groups for women that address signs of abuse, types and effects of abuse, healthy relationship skills, and safety planning. In addition to these services, women can receive practical help with the aid of a Transitional Housing Support Worker in areas such as court accompaniment, accessing legal aid advice, connecting to resources, applying to Ottawa housing, and advocacy. In 2009 and 2010, approximately 800 women and 30 children were served in relation to violence. Woman abuse does not occur in isolation and the women who experience it may also face co-occurring concerns.

For example, the Somerset Community Health Centre coded almost 4,500 individual problems, complaints, issues, and needs that co-occurred with woman abuse in 2009 and over 3,500 in 2010. As seen in Table 1.8, the most commonly reported co-occurring issue in 2009 was an inability to acquire transportation, possibly influenced by the OC Transpo strike that occurred that year. Homelessness was the next most common co-occurring issue. Women may be residing within a women's shelter, emergency housing, with friends or family, or living on the streets. In 2010 the most common co-occurring reason for accessing the health centre was a visit for observation/health education/advice/diet, followed by landed immigrants dealing with language issues.

Table 1.6 Demographic profile of Western Ottawa Community Resource Centre's clients.

Age	%
0-11	6
12-15	2
16-18	1
16-24	3
25-34	23
35-50	39
51-65	9
66+	3
Undisclosed	15
Total	100

Language	%
English	72
French	12
Arabic	3
Spanish	3
Somali	2
Russian	1
Chinese	1
Polish	1
Portugese	1
Undisclosed	6
Total	100

Geographical Location	%
Rural	6
Undisclosed	1
Urban	93
Total	100

Gender	%
Female	96
Male	4
Total	100

Sexual Orientation	%
Heterosexual	66
Gay/Lesbian	0
Bisexual	1
Undisclosed	33
Total	100

Naturalization Status	%
Canadian Citizen	63
Landed Immigrant	10
Refugee	2
Undisclosed	25
Total	100

Table 1.7 Offence breakdown as reported to Western Ottawa Community Resource Centre

Type of Violence*	%
Emotional	80
Physical	61
Verbal	59
Sexual	18
Financial	27
Known Weapons	2
Undisclosed	4
*Not mutually exclusive	

Incident Timeframe	%
Current	30
Past Year	28
Historical	18
Undisclosed	25
Total	100

Police Contacted	%
Yes	57
No	33
Undisclosed	10
Total	100

CAS Involved	%
Yes	38
No	45
Undisclosed	17
Total	100

Observations from the Frontlines

While this report is designed to consolidate statistics, insight can also be gained from the observations of frontline workers that are not always captured in statistics. One service provider noted the following about the clients served at their agency:

- Approximately half of the women reported that they have contacted or someone had previously contacted the police.
- Many women who share custody with their ex-partner report that they are still being controlled by them during the exchange of the child, by relaying messages to the child, threats of challenging custody or access orders, and by withholding child support.
- Many women are underrepresented in the clients we served (e.g., Aboriginal women, queer women, and women who have been trafficked).
- Women tend to experience multiple, if not all of the following types of abuse: physical, sexual, emotional, mental, environmental, social, and financial abuse.
- A small portion of the client base is mandated either through the legal system or the Children's Aid Society.
- Women often share their stories of police reporting and feeling re-victimized by the police (i.e., judgments, stereotypical assumptions, double charging, verbal abuse, sexism, and racism).
- Often women who have a negative reporting experience are reluctant to report again thus jeopardizing their safety while leaving them with a sense of hopelessness within about the justice system.
- Many women report not feeling safe once they flee their abuser and protection orders do not make them feel any safer.
- Most clients suffered negative consequences due to the abuse, including mental health problems, such as depression, anxiety, post-traumatic stress disorder, and low self-esteem, as well as physical health problems, such as backaches, blurred vision, arm pain, weight loss, and night terrors.
- The women who remain in abusive relationships disclose that many people do not understand; they therefore face plenty of judgment especially from friends and loved ones family, which serves to further isolate them.
- A substantial portion of women do not realize that they are in an abusive relationship.
- Most women who have children have reported that their child has been impacted affected in some manner due to the violence.

Table 1.8 Top 10 Co-occurring issues, complaints, or reasons for accessing Somerset Community Health Centre

Top 10 Reasons 2009	Top 10 Reasons 2010
1. Inability to acquire transportation	1. Visit for observation/health education/advice /diet
2. Homelessness	2. Immigrant with language difficulty
3. Visit for prescription renewal	3. Anxiety
4. Visit for observation/health education/advice/diet	4. Feeling stressed out
5. Feeling stressed out	5. Legal problem
6. Feeling depressed	6. Visit for therapeutic counselling/listening
7. Consequences of partner abuse	7. Homelessness
8. Depression	8. Past history of substance abuse
9. Past history of being abused	9. Feeling depressed
10. Anxiety	10. Past history of being abused

Woman Abuse and Poverty

Women who escape violence also face a variety of other barriers and struggles. The interconnectedness of woman abuse and poverty is well documented (WACT, 2009). As seen in Table 1.9 and Table 1.10, 48% of women accessing the community health centre fall below the low-income cut-off for a single person living in Ottawa. Women seeking assistance often have children. Therefore, 54% of women seeking assistance would fall below the cutoff if they each had one child and 56% if they each had two children.

Table 1.9 Demographic breakdown of Somerset's partner abuse clients 2009-2010

	%
Female	94
Male	6
Under 20 years of age	1
20-30 years of age	17
30-40 years of age	40
40-50 years of age	24
50+ years of	20
0-$14,999	45
$15,000-$19,999	3
$20,000-$24,999	6
$25,000-$29,999	2
$30,000-$34,999	4
$35,000-$39,999	3
$40,000-$59,000	5
Greater than 60,000	6
Refuses to answer	27

Financial Abuse: What is it?

By Kim Dubé, Masters student, University of Ottawa

Financial abuse is not a well-known or well-understood type of intimate partner abuse, even by the women who experience it. It can take many forms, including preventing the women from getting or keeping a job, confiscating her pay cheque, denying her access to the family finances, or putting all bills in her name thus making her responsible for all finances (YWCA, 2009). In the case of financial abuse, money becomes a tool used by an abuser to further control the woman and exercise power over her. Financial abuse can have serious and long-term effects on the abused woman. Women can become trapped in a cycle of poverty, dependent on their spouse for their living, and making it difficult to leave the relationship. They can experience physical, psychological, verbal abuse alongside the financial abuse (YWCA, 2009).

Despite some progress, women still earn less than men regardless of their occupation, age, or education. Women earn 72.5 cents for every dollar a man earns and the gap becomes even greater for Aboriginal women, women of colour, and women with disabilities (FAFIA, 2009. Women working in the education, health care, sales, clerical, service, and administration fields consist of 70% of the female working force. These jobs, although they involve heavy responsibilities and skills, are undervalued and underpaid (Canadian Labour Congress, 2010). Traditional "women's jobs" compared with traditional "men's jobs" of the same value are often underpaid when they should be receiving despite many attempts by those in traditional occupations to achieve equal pay equity. As long as they pay minimum wage, without specific laws employers can choose to pay women as little as possible for their work (CLC, 2010).

Pay equity issues are closely related to economic dependency affecting women's ability to leave a violent relationship especially one where financial abuse is the main type of abuse (YWCA, 2009). As a province, Ontario has not invested sufficient amounts into social housing, income security, or and other services to help women escaping violence live independent of violent men. As a result, many women remain trapped in violent relationships (CLC, 2010; YWCA, 2009). They do not have the means to protect themselves and their children due to a lack of resources such as affordable housing, shelters, employment insurance, adequate counselling, feeling of security and protection, and government support. These women then stay in abusive relationships often fearing for their safety and the safety of their children (YWCA, 2009).

Table 1.10 Low-income cut-offs (1992 base) before tax in 2007 Dollars Source: Statistics Canada (2009)

	Population of Communithy of Residence	
Family Size	**500,000+ (Ottawa)**	**Rural Areas**
1	21,666	14,914
2	26,972	18,567
3	33,159	22,826
4	40,259	27,714
5	45,662	31,432
6	51,498	35,452
7+	57,336	39,470

I'm a guy… what can I do?

By Bailey Reid, OCTEVAW

Men have an important role to play in the prevention of all forms of violence against women. Men are role models for younger men and boys in their lives. They can speak up when they hear sexist jokes, support women who tell them they have been physically or sexually assaulted, start initiatives in their own communities, and support the work of women's groups to end violence against women. For more information on how men can become involved, visit www.octevaw-cocvff.ca or www.whiteribbon.com.

Family Services à la famille Ottawa

Family Services à la famille Ottawa is a community agency with a history of responding to the needs of people in the community. They work with individuals, communities, and families who are in distress or at risk by providing counselling, education, and advocacy. In 2009, they served 307 adults and 31 children who witnessed or experienced family violence and, in 2010, they served 239 adults and 30 children. In total, 464 adults and 54 children were served during 2009-2010. Of the adult clients served, 52% experienced woman abuse, 31% experienced some other forms of violence, and 12% experienced sexual abuse. Of the services provided by Family Services, 69% of adult clients utilized individual counselling, 26% utilized transitional supports, and 23% utilized group counselling.

Catholic Family Service Ottawa

Catholic Family Services Ottawa offers a support program for Francophone women who have experienced woman abuse regardless of their religion, culture, or sexual orientation and whether they have left their violent partner or are still living in that situation. For the 2009-2010 fiscal year, 115 women received counselling or participated in a support group, 132 women accessed the Transitional Housing Support Program (bilingual), and 37 women and 40 children accessed the Child Witness Program. Similarly in the 2010-2011 fiscal year, 113 women received counselling or participated in a support group, 104 women accessed the Transitional Housing Support Program (bilingual), and 45 women and 50 children accessed the Child Witness Program.

Marginalized Women

Marginalized women, those relegated to an unimportant or powerless position within society, are particularly vulnerable to violence and often face additional barriers to accessing services. Ottawa is fortunate to have a number of services that provide specialized assistance for these survivors.

The Elizabeth Fry Society of Ottawa is devoted to helping women and female youth who are, or may be, at risk of coming into conflict with the law. In the **2010-2011 fiscal year, 2,038 women seen by Elizabeth Fry Ottawa reported they were victims of abuse at some point during their lifetime, representing 18% of their total client population. For women in the residential program who are receiving treatment while living at the Elizabeth Fry facility, over 90% report being victims of childhood or woman abuse.** Thus, for criminalized women reintegrating from prison, the statistics regarding abuse and violence are significantly higher than clients in the community, which replicates the known link between the victimization of women and incarceration.

Amethyst Women's Addiction Centre offers alternative addiction services to women. Amethyst is grounded in the feminist belief that women's experiences with alcohol, drugs, and gambling cannot be separated from their experiences and status as women. They make direct links between the unequal position of women in society, the various forms of violence against women, and substance use and/or gambling. From April 2009 to March 2011, Amethyst had 671 open admissions of women over 16 years of age. Of these women, 46% had been diagnosed with a mental health problem in the previous 12 months by a qualified mental health professional and 76% had been diagnosed with a mental health problem in their lifetime. The presenting issue at admission was physical abuse for 3% of women, sexual abuse for 7%, and other abuse for 2%. However, during treatment, 22% of women reported experiences of violence as an adult (including

Supporting Survivors of Woman Abuse in Same Sex Relationships

By Hannah McGechie, Carleton University

Woman abuse is often limited to discussion of male-on-female violence; however, the Masters of Social Work Students at Carleton University are completing a research project assessing the capacity of anti-violence programs in the Ottawa area to provide services to LGBTTQ individuals and families who have experienced intimate partner violence or sexual violence. Through qualitative interviews, these students are exploring service providers' knowledge and comfort working with LGBTTQ clients. They are also looking at specific barriers these clients face in accessing anti-violence services, the existing gaps in service provision, as well as the social, economic, and political structures affecting the LGBTTQ community. The goal of this research project is to spark a dialogue amongst service providers and act as a building block for further research with the LGBTTQ community.

both physical and emotional), 20% reported experiences of violence as a child (including both physical and emotional), and 14% experienced sexual violence (as an adult [33%], child [24%] or both [43%]).

The Ottawa Community Immigrant Services Organization (OCISO) is a non-profit organization that assists immigrants and refugees with settlement and integration issues. Among their services, OCISO provides a counselling program supporting women who have experienced abuse and in 2010, provided counselling to 140 women from 41 different countries. The majority of clients are visible minorities and are almost exclusively newcomers (though they also serve immigrants who arrived in Canada as young children or are first generation immigrants).

Domestic Violence Courts

Ontario's Domestic Violence Court (DVC) Program is the most extensive DVC program in Canada. It is designed to facilitate the prosecution of and early intervention in domestic assault cases, provide better support to victims, and increase offender accountability. In a DVC program, teams of specialized personnel, including police, Crown Attorneys, Victim/Witness Assistance Program (VWAP) staff, probation services, Partner Assault Response (PAR) program staff, and community agencies work together to ensure priority is given to the safety and needs of domestic assault victims and their children. There is now a Domestic Violence Court Program in each of the province's 54 court jurisdictions.

COURT WATCH

- By Danielle Alarie, OCTEVAW

The Woman's Abuse Council of Toronto (WACT) first introduced Court Watch in 1995 as a pilot project based on a similar program initiated by Mother's Against Drunk Driving. The project was developed to identify the successes and the challenges within the specialized DV court and advocate for change. In 1997 and 1998, the project concluded that: a) DV courts had more sensitive questioning of witnesses; b) appropriate sentencing of perpetrators was occurring; and c) DV courts were an effective reform (WACT, 2005).

Observing a court process regularly is an effective method of examining the justice system responses and procedures around the handling and prosecution of cases. In addition, many individuals and agencies in the Ottawa community have a vested interest in how our the justice system works and want to participate in a meaningful way to improve the experiences of victims in the DV court. In Ontario, the DVC program was created to improve support to victims and to increase offender accountability. Court Watch is one way in which the local community can hold the justice system accountable to those specific objectives. Recording information allows for concrete and clear recommendations to be brought forward to policy makers, which can lead to positive change.

In response to the need for accountability, OCTEVAW has established a Court Watch program. The purpose of Court Watch is to collect quantitative and qualitative data during DV court proceedings (one component of the entire DVC program) from the perspective of an outside observer and to examine the functioning of the DV Court, case dispositions, and sentencing of offenders.

The goals of the Court Watch Program:

- To increase community and public presence in the DV court;
- To increase public awareness and understanding of how woman abuse cases are responded to within the DV court; and, to work collaboratively with the justice system to improve offender accountability and victim support and safety within the DV court.

Results from the Court Watch project are expected in 2012-2013.

New Directions

New Directions is a partner assault response (PAR) program funded by the Ministry of the Attorney General. Administered by Catholic Family Services of Ottawa, a non-profit, community-based organization, New Directions runs a 16-week counselling program in addition to providing outreach to survivors. The majority of clients are mandated by the Ottawa DVC to participate although the program also accepts clients who attend voluntarily. New Directions works with individuals on probation, peace bond, bail, cases where charges are pending, and early intervention cases. It offers 8 men's groups (7 English and 1 French), 2 women's groups, 1 group for men who are not mandated by the courts, 1 gay men's group or individual counselling (based on demand), and a father's group. There is also a heavy focus on partner outreach (contact and support for survivors whose current or former partners are in the program) that includes information packages, telephone calls, one-on-one meetings, drop-in groups, referral, and advocacy.

In 2009:

- 666 men and 72 women were referred to New Directions.
- Of the men referred, 46 (7%) were voluntary (no criminal court involvement), 608 (91%) were referred from the Domestic Violence Court, and 12 (2%) from Federal Parole.
- 526 men attended intake (20 refused admission at intake).
- 501 men started a program.
- 364 men completed the program (16 weeks).
- In total, 1,085 contacts were made to 324 partners.

In 2010:

- 618 men and 94 women were referred.
- Of the men referred, 40 (6%) were voluntary, 567 (92%) were Domestic Violence Court referred, and 11 (2%) were Federal Parole referred.
- 554 men attended intake (26 refused admission at intake).
- 533 men started programs.
- 396 men completed the program (16 weeks).
- 1,101 contacts were made to 375 partners.

Legal Clinic

The University of Ottawa's Legal Clinic works with survivors of woman abuse by helping them to prepare criminal injury compensation applications, as well as providing representation to women who have been charged with IPV. In both 2009 and 2010, the clinic handled approximately 50 woman abuse cases.

Children's Aid Society (CAS) / Violence Against Women Integrated Services Project

Western Ottawa Community Resource Centre in collaboration with Ottawa's CAS has undertaken to lead the development and implementation of an integrated CAS/VAW team, which provides services to women and children in families where children may be in need of protection because of their exposure to woman abuse. The Child and Family Services Act stipulates that a child who witnesses violence by one parent against the other is a child in need of supervision. The project is a joint initiative of the VAW sector (VAW Management member agencies) and the Ottawa CAS. In 2010, the CAS/VAW team worked with 20 mothers who were survivors of woman abuse. Of those mothers, 55% spoke English, 15% spoke French, and 15% spoke Arabic. All women lived in an urban environment. In working with the mothers, the CAS/VAW team made 183 contacts.

Sexual Violence

Sexual Assault in Canada

- In 2009, police recorded 20,931 cases of sexual assault against individuals over 16 and 2,620 against children in Canada (Statistics Canada, 2010d).
- 81% of all sexual assaults reported on the GSS involved sexual touching, unwanted grabbing, kissing, or fondling and the remainder were sexual attacks, which involved the use of threats or physical violence (Statistics Canada, 2010e).
- Sexual assaults are most commonly committed by someone known to the survivor. Of the police-reported sexual assaults in 2009, the accused was most often an acquaintance (46%), a family member (24%), partner (8%), or a current/former spouse (5%). Strangers were responsible for only 18% of all reported sexual assaults (Statistics Canada, 2011c).

Sexual Assault in Ontario

In 2009, 265,000 individuals (men and women) in Ontario reported that they had been sexually assaulted (Statistics Canada, 2010e).

Ontario's Sexual Violence Action Plan

Source: Ontario's Sexual Violence Action Plan, 2011

In March of 2011 the provincial government and the Ministerial Steering Committee on Violence Against Women released Ontario's Sexual Violence Action Plan. The plan presents a collaborative approach to preventing sexual violence and supporting survivors through public education initiatives, training programs, and enhancing service response. The main components of the program are outlined below:

Preventing sexual violence

- Invest $5.2 million to develop and implement public education campaigns to prevent sexual violence against women.

Improving services

- Invest $1.6 million to support the development and distribution of training/education programs for service providers.
- *Sexual Assault Centres*
  - Provide $3 million in funding to support the province's Sexual Assault Centres.
  - Additional support to develop and deliver specialized training programs for sexual assault centre staff on supporting women with addictions, mental illness, and trauma.
- *Sexual Assault/Domestic Violence Treatment Centres*
  - Support the development and implement standards of care and promote awareness of services provided by the province's Sexual Assault/Domestic Violence Treatment Centres.
  - Support the development of service standards for hospital emergency departments including those for responding to victims of drug-facilitated sexual assault.
  - Support the development and delivery of training on the standards for staff at treatment centres and hospital emergency departments.
  - Support the development and distribution of education materials to first responders, community agencies, health professionals, universities, colleges, workplaces, and the general public.
- *Helping survivors navigate the system of supports*
  - Support the development of resources to help survivors and others understand the service delivery system.
  - Ensure resources are available province wide, both online and in print, and translated into multiple languages.
- *Improving supports for Aboriginal women*
  - Continue to identify initiatives and make investments that benefit Aboriginal women who are victims of violence, including sexual violence.

- *Improving access to services for Francophone women*
  - Access to French-language programs and services will be addressed within all components of the Action Plan.
  - Continue to identify priorities and opportunities to improve policies, programs, and services to better address the unique needs of Francophone women.
- *Improving access to language interpretation*
  - Invest over $3.7 million to expand the Language Interpreter Services program for women who have experienced sexual assault as well as those who have been sexually exploited through human trafficking.
- *Responding to victims of human trafficking*
  - Invest $1.95 million to launch a number of anti-human trafficking initiatives to prevent victimization, enforce human trafficking laws, vigorously prosecute alleged offenders, and ensure victims have the supports and services they need.
  - Establish a human trafficking advisory committee made up of survivors, police services representatives, victim service providers, and other experts.

Strengthening the criminal justice response

- *Responding to sexual assault*
  - Review and update the Sexual Assault Investigation Guideline.
  - Review and update the Victim Assistance Guideline.
  - Provide enhanced training for justice personnel to improve their understanding of the impact of sexual assault on victims, appropriate use of evidence, testimonial aids, and expert witnesses.
  - Provide support for the development of educational modules and resources on sexual violence for the judiciary.
- *Holding offenders accountable*
  - Expand the PAR program curriculum to include a mandatory component that addresses sexual violence in intimate relationships.
- *Legislative reform*
  - Seek amendments to the Criminal Code of Canada that will make it an offence to distribute intimate visual recordings of a person without that person's consent.

Ottawa Police and Courts

In 2009-2010, there were a total of 1,047 sexual assault cases reported to the Ottawa Police Service, as seen in Table 2.1. (For more information and Criminal Code definitions of charges see APPENDIX C). Of these, 306 (29%) were classified as unfounded, meaning "the police investigation has established that a crime did not happen or was not attempted" (Statistics Canada, 2002, p. 2.3). OPS report that they also include cases that cannot be followed up under this classification and are working with an Ottawa researcher to further investigate this finding. Overall, 46% of the remaining 741 sexual assault cases in 2009-2010 were solved and charges were laid in 28% of cases.

Table 2.1 Sexual assaults reported to Ottawa Police in 2009-2010

	Reported	Unfounded	Unfounding Rate	Actual	Cleared by Charge	Cleared by Other	Solvency
		2009					
Sexual Assault Aggravated	3	1	33%	2	1	0	50%
Sexual Assault Weapon	8	1	13%	7	4	0	57%
Sexual Assault	346	107	31%	239	63	25	37%
Sexual Assault <16 years of age	93	25	27%	68	20	24	65%
Sexual Assault Interference	14	6	43%	8	2	5	88%
Sexual Assault Invitation < 14 years of age	3	0	0%	3	1	3	133%
Sexual Assault Exploitation	5	3	60%	2	0	0	0%
Sexual Assault Incest	5	1	20%	4	2	0	50%
Sexual Assault Anal Intercourse	5	2	40%	3	1	0	33%
Total Sexual Assault	482	146	30%	336	94	57	45%
		2010					
Sexual Assault Aggravated	5	0	0%	5	4	0	80%
Sexual Assault Weapon	6	1	17%	5	6	0	120%
Sexual Assault	406	123	30%	283	58	53	39%
Sexual Assault <16 years of age	116	28	24%	88	36	18	61%
Sexual Assault Interference	17	5	29%	12	5	4	75%
Sexual Assault Invitation < 16 years of age	3	1	33%	2	1	0	50%
Sexual Assault Exploitation	3	0	0%	3	0	2	67%
Sexual Assault Incest	4	1	25%	3	3	0	100%
Sexual Assault Anal Intercourse	5	1	20%	4	2	0	50%
Total Sexual Assault	565	160	28%	405	115	77	47%
Total 2009 & 2010	1047	306	29%	741	209	134	46%

Note: Solvency rates may be greater than 100% if charges were laid on a file the year after the offence occurred. For example, if the assault occurred in late 2009 and charges were laid in early 2010.

Statistics Canada (2008) estimates that only 1 in every 10 sexual assaults is reported to the police. As seen in Table 2.2, it is possible to extrapolate what the real picture of sexual violence in Ottawa looks like based on this finding.

Table 2.2 Projected "true" number of sexual assaults from 2009 - 2010 based on Statistics Canada (10%) reporting.

Police Cases	Reported Total	Projected Total
Sexual Assault Aggravated	8	80
Sexual Assault Weapon	14	140
Sexual Assault	752	7,520
Sexual Assault <16 years of age	209	2,090
Sexual Assault Anal Intercourse	10	100
Total Sexual Assaults	993	9930

In 2009, Ottawa courts tried individuals on 190 sexual assault charges and 140 other sexual offences for a total of 330 charges. During this time, the court disposed of (cleared through the system) 281 sexual violence charges (Ontario Court of Justice, 2010). Similarly in 2010, the court received 477 sexual violence charges (304 sexual assault charges and 173 other sexual offences) and was able to dispose of 396 (Ontario Court of Justice, 2011). As individuals are often charged with more than one offence, they may plead guilty or be convicted of one charge and have another charge withdrawn. However, there are no

published figures on how many of these cases lead to a guilty verdict on a municipal level. In Ontario during 2009-2010, 578 people were found guilty of sexual assault. Of those, 309 (53%) were sentenced to prison, 86 (15%) were given a conditional sentence, 484 (83%) were sentenced to probation, 9 (2%) were sentenced to pay a fine, 4 (1%) were sentenced to make restitution, and 445 (77%) were given other sentences (Statistics Canada, 2011b). For sexual assaults, the average number of days from the booking of the first court appearance to the final court appearance in Ottawa was approximately 391 days in 2009 and 267 days in 2010 (Ontario Court of Justice, 2010; 2011). Individuals who were charged with a sexual offence appeared before the court an average of 13 times in 2009 and 11 times in 2010 (Ontario Court of Justice, 2010 and 2011).

Sexual Assault and Partner Abuse Care Program at the Ottawa Hospital

From April 2009 to March 2010, the program saw 139 acute (emergency) clients who had been sexually assaulted within the previous 72 hours. Of these cases, only 53% involved the police. The majority of the clients were women (96%).

A recent study of drug-facilitated sexual assault (DFSA) in Ontario (Du Mont et al., 2010) found that in 74% of suspected DFSA cases with a toxicological finding, at least one central nervous system active drug and/or alcohol was found. The researchers believe this finding to be an underestimate due to the delay in survivors coming to a sexual assault treatment centre and the short half-life of some "date rape drugs". The majority (86%) of survivors had voluntarily consumed alcohol, 26% had taken over-the-counter medication, 29% had taken prescription medication, and 26% had taken street drugs at the time of the incident. Toxicology reports found unexpected substances (those not voluntarily taken by the survivor) in 49% of all suspected drug-facilitated cases and 64% of all cases where there was a positive toxicology finding (such as alcohol). The following unexpected drugs were found:

- Cannabinoids (e.g. marijuana) in 40% of cases;
- Cocaine in 32% of cases;
- Amphetamines in 13.8% of cases;
- MDMA (i.e. ecstasy) in 9.2% of cases;
- Ketamine (i.e. a known date rape drug) in 2.3% of cases; and,
- Alcohol in 1.1% of cases.

Of all individuals who presented to a sexual assault treatment centre on suspicion of having been the survivor of a DFSA, 40% were students. Almost all were women (96%) and the average age of survivors was 25.8 years of age (Du Mont et al., 2010).

Addressing Sexual Assaults within the University Community

By Cheryl Lynn Macaulay, Sexual Assault Support Services at Carleton University

Sexual violence is a social issue that all universities must address. Carleton University continues to work with members of the campus and Ottawa communities to provide those who have experienced sexual violence with the support and services they need. The university's efforts include education and awareness programming, a more integrated collaboration with support service providers in the community, and a commitment to apply best practices.

Carleton University is one of the few Canadian campuses to employ a Coordinator for Sexual Assault Support Services who offers sexual assault education and training, individual short-term counselling, information and referrals, and safety planning to anyone in the Carleton community who has experienced sexual violence. Through the Coordinator, Carleton offers training on the issue of sexual harassment and sexual assault, and works with Health and Counselling Services, as well as with campus and community-based organizations, such as Carleton's Womyn's Centre, student governments, the Ottawa Coalition to End Violence Against Women, and the Coalition for a Carleton University Sexual Assault Centre. Education and awareness activities have included Sexual Assault Awareness Week on campus and the "Man Talk" Conference at Carleton. Training about sexual assault and sexual assault support services is provided to staff, faculty, and students, including frosh facilitators, residence fellows, athletics staff, and new student safety constables.

Carleton University's Health and Counselling Services and the Department of Equity Services both support the principles of the Ottawa Sexual Assault Protocol (OSAP) and support the OSAP Committee in its efforts to maintain a comprehensive and effective community response to sexual violence. For more information, please visit www.carleton.ca/equity.

Community Resources for Sexual Violence

Community Resources

In addition to the community health and resource centres and women's agencies previously discussed, women also have access to dedicated sexual assault services in Ottawa. These include the Ottawa Rape Crisis Centre, the Sexual Assault Support Centre of Ottawa, Centre d'aide et d'lutte contre les agressions à caractère sexuel (CALACS), and local and provincial crisis lines. In addition to telephone support, many agencies offer face-to-face counselling either individually or in groups, provide advocacy and court accompaniment for survivors, provide information and referral services, educate the public, and liaise with community organizations.

Like woman abuse, sexual violence does not occur in isolation and can leave survivors feeling traumatized long after the assault. Table 2.3 illustrates the top 10 common issues sexual assault survivors reported to one community health centre during 2009-2010. Homelessness refers to the survivor not having a permanent address and includes staying at a shelter.

Ottawa Victim Services - Supporting Survivors

By Pamela Pizarro, Ottawa Victim Services

Ottawa Victim Services is dedicated to helping those victimized by crime or tragic circumstances. Over 75% of the clients served by the agency are women who have been victimized by violence. As a frontline agency, Ottawa Victim Services sees firsthand the impact violence against women has on the community, as well as the difference that strong supports can make. Each of Ottawa Victim Services' four programs (victim crisis and referral services, Supportlink, court accompaniment, and victim quick response program) uniquely supports women who have experienced violence to ensure that their immediate needs are met and that long-term support can be put into place.

Table 2.3 Top 10 Sexual assault co-occurring issues, complaints, or reasons for accessing Somerset Community Health Centre

	Top 10 2009		Top 10 2010
1.	Homelessness	1.	Immigrant with language difficulty
2.	Immigrant with language difficulty	2.	Visit for observation/health education/ advice/diet
3.	Visit for observation/health education/advice/diet	3.	Past history of substance abuse
4.	Depression	4.	Legal problem
5.	Visit for prescription renewal	5.	Anxiety
6.	Anxiety	6.	Visit for urine test
7.	Feeling stressed out	7.	Fear/concern about pregnancy
8.	Feeling depressed	8.	Homelessness
9.	Pernicious anemia	9.	Feeling depressed
10.	Visit for local injection/infiltration	10.	Feeling stressed out

Numerous individuals are available to assist survivors in their recovery. The same community health agency provided the following breakdown of service providers as seen in Table 2.4.

Table 2.4 Service providers for women accessing a community health centre in regards to a sexual assault

2009 Accessed Sexual Assault Support Services Provided By	% of Encounters	2010 Accessed Sexual Assault Support Services Provided By	% of Encounters
Other	24	Nurse	28
Outreach worker	22	Social worker	25
Social worker	18	Nurse Practitioner	17
Nurse	16	Physician	11
Physician	11	Other	7
Nurse practitioner	4	Outreach Worker	5
Outreach/counselor worker	3	Student/trainee	2
Physician Assistant	1	Outreach/Counsellor Worker	1
Acupuncturist	1	Acupuncturist	1
		Dietitian/Nutritionist	1

Crisis Line

FemAide is a 24-hour crisis line for francophone women seeking support, active listening, and crisis intervention. It is a local and provincial line and it is operated by the Eastern Ottawa Resource Centre and maison d'amitié, and with service agencies in Toronto and Sudbury. In 2009, FemAide received 2,920 (71%) calls from women seeking support, 89 (2%) calls for information, and 53 (1%) calls from women in crisis or at risk (i.e., having suicidal thoughts). In 2010, they received 3,008 (84%) calls for support, 177 (5%) calls from women in crisis, and 15 (<1%) calls for information. As shown in Table 2.5, callers most commonly reported being victimized by the system (17%) and having been sexually assaulted (13%). In 2009, 388 women reported being sexually assaulted and 770 women in 2010 reported similar experiences. Not all of these calls were regarding current incidents as 43% of those who had been sexually assaulted or abused had been assaulted at 16 years of age or younger as shown in Table 2.6.

Table 2.5 Abuse reported by FemAide crisis line survivors

Type of Abuse Experienced*	2009	%	2010	%	Total	%
Financial abuse	16	0%	19	1	35	0
Psychological/emotional abuse	93	2	96	3	189	2
Physical abuse	27	1	49	1	76	1
Verbal abuse	24	1	58	2	82	1
Sexual abuse	67	2	87	2	154	2
Criminal harassment (stalking)	3	0	16	0	19	0
Social isolation (control)	9	0	25	1	34	0
Threats	5	0	17	0	22	0
Confinement	2	0	12	0	14	0
Discrimination	54	1	99	3	153	2
Harassment	149	4	132	4	281	4
Sexual harassment	67	2	204	6	271	4
Sexual harassment in the Workplace	82	2	258	7	340	4
Intimidation (bullying)	71	2	113	3	184	2
Intimidation via the internet (cyberbullying)	1	0	1	0	2	0
Victimized by the system	538	13	770	21	1,308	17
Elder abuse	20	0	4	0	24	0
Sexual assault	388	9	588	16	976	13
Gender-based violence	41	1	181	5	222	3

**Responses are not mutually exclusive; Calls do not total 100% as not all calls received are related to abuse.*

Table 2.6 Context of sexual assault/abuse as reported by survivors to FemAide

Type of Sexual Abuse	2009	%	2010	%	Total	%
Ritual abuse (cult)	18	0	3	0	21	0
Sexual assault (adult)	481	12	356	10	837	11
Sexual assault during childhood (16 years of age or younger)	1799	44	1516	42	3315	43
Gang rape	2	0	8	0	10	0
Date rape	84	2	10	0	94	1
In the context of war	1	0	3	0	4	0
Total		58		52		55

Survivors also reported a number of side effects from the violence they experienced. As shown in Table 2.7, survivors most commonly reported diseases (47%), isolation (33%), and psychological distress (31%) as consequences resulting from violence.

Table 2.7 Self-reported consequences of violence reported to FemAide

Self Reported Consequences of Violence*	2009	%	2010	%	Total	%
Illness (physical, psychological)	1858	45	1749	49	**3607**	**47**
Isolation (boredom/indifference/detachment)	998	24	1569	44	**2567**	**33**
Psychological distress (anxiety, fear, paranoia, grief etc.)	1127	27	1271	35	**2398**	**31**
Memories – flashbacks	1300	32	751	21	**2051**	**27**
Loss / change of job	577	14	730	20	**1307**	**17**
Lacking self esteem	700	17	469	13	**1169**	**15**
Intimacy issues	574	14	553	15	**1127**	**15**
Depression	751	18	369	10	**1120**	**15**
Sleep problems	683	17	369	10	**1052**	**14**
Poverty (financial problems)	246	6	671	19	**917**	**12**
Food problems	309	7	232	6	**541**	**7**
Lack of autonomy - dependency	206	5	268	7	**474**	**6**
Suicidal thoughts/suicide attempts	261	6	76	2	**337**	**4**
Legal problems (custody, alimony, legal, etc.).	113	3	144	4	**257**	**3**
Self-mutilation	235	6	13	0	**248**	**3**
Isolation (no access to resources, geography)	121	3	65	2	**186**	**2**
Other	52	1	130	4	**182**	**2**
Unable to talk about it	61	1	101	3	**162**	**2**
Fear for her physical safety	90	2	25	1	**115**	**1**
Addictions (alcohol, gambling, drugs, drugs)	20	0	74	2	**94**	**1**
Requiring access to a shelter	53	1	17	0	**70**	**1**
Homeless person (roaming or no fixed address)	40	1	3	0	**43**	**1**
Sexually transmitted infection	2	0	2	0	**4**	**0**
Pregnancy (fear of pregnancy)	2	0	1	0	**3**	**0**

**Responses are not mutually exclusive*

Intersections of Sexual Violence and Sexual and Reproductive Health

By Mel Pagliaro, Planned Parenthood Ottawa (Intern)

Non-consensual sex exists on a continuum ranging from verbal tactics to sexual assault and is associated with numerous sexual and reproductive health outcomes. Effects on sexual health include sexualized identities (i.e., premature sexuality, increased vulnerability to being targeted by sexual predators, etc.), sexually transmitted infections (STIs), pelvic and/or abdominal pain, painful urination, painful intercourse, genital bleeding and/or tissue damage, vaginal discharge, ovarian cysts, bladder infections, and menstrual problems (Coy, Lee, Kelly, & Roach, 2010; Williams, 2006). Additional issues include discomfort with gynecological exams, arousal dysfunction, sex-related anxiety, phobias or aversions, and/or difficulties with sexual relationships (Williams, 2006). Worldwide data suggests that unplanned pregnancies occur in 4% of rapes, although this statistic increases with continuous or repeated sexual abuse (Coy et al., 2010). Sexual violence survivors may not have the opportunity to negotiate contraception due to being forced to hide contraceptives or birth control methods being tampered with by the abuser (Coy et al., 2010). While some women are forbidden from preventing pregnancy, others are forced to have abortions. Miscarriages and fertility problems may also occur (Williams, 2006).

Women's bodily autonomy and ability to make decisions regarding their sexual and reproductive health are compromised by sexual violence. To address this, risk and prevention programs could cover healthy relationships, sex/contraceptive negotiations, non-penetrative consensual sexual activities, the non-consensual sex continuum, and media literacy (Coy, Lee, Kelly & Roach, 2010). Health care professionals could administer screening tools to inquire about circumstances around pregnancy or STIs and gauge degree of consent (Coy et al., 2010, World Health Organization, 2006). These tools can be further used to determine the need for the detection, diagnosis, and treatment of STIs, as well as offer pregnancy options, counselling, and resources if necessary. Health care professionals can facilitate peer support groups, mediate pregnancy and/or STI disclosures, and liaise with other individuals who work with survivors to counteract barriers they face (Coy et al., 2010; World Health Organization, 2006). These strategies will empower people to negotiate sex, navigate consent, decrease unplanned pregnancies, broaden their perspectives of sex, reduce subscriptions to rape myths, and improve their overall physical and mental health.

Information and Referral Line

Incorporated in 2002, Canadians for Choice (CFC) is a pro-choice, non-profit charitable organization dedicated to ensuring reproductive choice for all Canadians. CFC envisages a world where individuals – regardless of age, ability, race, gender, sexual orientation, place of residence, or socio-economic and other status – have access to the information, resources, and services required to make and exercise informed choices on all aspects of their sexual and reproductive health and rights. CFC supports and works toward preventing unwanted pregnancies, promoting contraception, educating women, men, and youth, and ensuring that families have the necessary resources to raise healthy, happy children. As part of their services, CFC operates an information and referral line. Since its inception in October 2006, they have received 10 calls regarding recorded instances of abuse, sexual assault, and coercion. These calls include cases where:

- A rape crisis centre in the United Sates was seeking a Canadian abortion provider for a client;
- The father of a 16-year old girl who was forced to have an abortion by her partner was seeking support for his daughter;
- A woman called because her boyfriend was forcing her to have an abortion;
- A worried mother called about her pregnant daughter who was possibly in an abusive relationship;
- A woman from Manitoba who was in a violent relationship and 20 weeks pregnant was seeking an abortion;
- A survivor of a drug-facilitated sexual assault in PEI who had learned she was 20 weeks pregnant as a result of her attack;
- A woman in an abusive relationship who was worried, scared, and just wanted to talk to someone;
- A concerned family member called about a girl who was being forced by her parents to continue an unwanted pregnancy;
- The Ottawa Morgentaler Clinic called to discuss a 14 year-old girl who needed to travel for an abortion. She is a new refugee from Djibouti who was gang raped by police in her country and was 21 weeks pregnant; and,
- A woman who was 10 weeks pregnant and whose abusive husband had thrown her out of the house.

Barriers to Accessing Abortion Services

Even though abortion is legally available to all women in Canada, it is not always accessible. Currently, only 16% of Canadian hospitals (1 in 6) provide accessible abortion services (Canadians for Choice, 2010). There are numerous barriers women face in accessing abortion services, particularly those fleeing abusive relationships:

- *Judgmental gatekeepers and bad referrals* – This includes health care professionals, counsellors, and other service providers that withhold health care options or make clients feel judged or ashamed for requesting information about abortion services.
- *Voicemail* - Many hospitals in Canada use a voicemail system for clients that want to book appointments. For women living with an abusive partner or parents, or who have just left an abusive relationship, voicemail can act as a strong barrier to accessing abortion services.
- *Cost and trave*l – Given the inaccessibility of abortion services, women may have to incur travel and other costs (such as lost wages) to have these services performed. For those fleeing abusive relationships, recently separated, or living in poverty, the costs required may prevent women from accessing services.
- *Anti-choice groups* – Some anti-choice groups operate "crisis pregnancy centres" that are often faith-based organizations whose main goal is to dissuade women from having abortions by promoting parenting or adoption as the only moral choices available.
- *Myths about abortion and sexual health* – Myths related to abortion and violent relationships can have a severe impact on a woman's perception of her reproductive and sexual health options. It may discourage a woman from exercising her options or make her feel shame or guilt about the choices she makes, whether it is to stay in an abusive relationship or to end or continue a pregnancy with that partner.

Source: Canadians for Choice (2010)

Building Prevention: Sexual Violence, Youth, and Drinking

By Jennifer Fraser, PhD student, University of Ottawa

Community partners in Ottawa concerned about the incidence of alcohol-related sexual violence among young people, decided to investigate what is being done in our community to prevent it and launched a public awareness campaign based on an initiative developed in Edmonton. Crime Prevention Ottawa, the Ottawa Rape Crisis Centre, and OCTEVAW explored prevention strategies from the perspective of service providers and youth through focus group discussions. The results of the study, published in "Building Prevention: Sexual Violence, Youth, and Drinking", showed that youth express contradictory attitudes and beliefs about sexual violence and the role of the victim. They also experience "blurry lines" about sexual activity and consent in general but more so when alcohol is involved. Both youth and service providers had many suggestions for how to improve prevention strategies in the City of Ottawa. One promising approach to prevention is the "Don't Be That Guy" campaign launched in May 2011 that uses provocative images to appeal to potential perpetrators of alcohol-related sexual violence. Posters from this campaign are being placed in bars and restaurants in the Ottawa area.

For more information visit: http://www.octevaw-cocvff.ca/en/building-prevention

Femicides

A femicide refers to a homicide (murder) case in which the death of a woman can be linked to woman abuse.

Homicide in Canada

- In Canada during 2009, 610 homicides were recorded by police. Of these, 160 victims were women, representing 26% or 1 in 4 of all homicide victims (Statistics Canada, 2010; Statistics Canada 2010b).
- Homicides typically involve male perpetrators. In 2009, 485 men were accused of perpetrating a homicide, which represents 80% of all homicides and 89% of all homicides for which a suspect has been identified (Statistics Canada, 2010b).

Spousal Homicides in Canada

- Over the past 10 years, police identified just over 1,500 homicides committed by family members, accounting for about one-third (35%) of all solved homicides (Statistics Canada, 2011).

- In total, 65 spousal homicides were reported in 2009; 49 women, 15 men, and 1 same-sex spouse were killed by current or former spouses (Statistics Canada, 2010).
- Of the 49 women killed, 14 were murdered by a separated or divorced spouse compared to only 2 of the 15 male victims, making women more likely to be murdered by an ex-spouse (Statistics Canada, 2010).

Homicide in Ontario

- In 2009, 178 homicides were reported in Ontario (Statistics Canada, 2010c).
- Of the 93 cases reviewed from 2003-2009 by the Ontario Domestic Violence Death Review Committee, 45% were homicides, 38% were homicide-suicides, 10% were attempted homicide-suicide, 4% were multiple homicide-suicide, and 3% were multiple suicides (DVDRC, 2009).
- The most common cause of death for victims was stabbing/sharp force (32%), followed by gunshot wounds (26%), and all other forms (42%) (DVDRC, 2009).

Table 2.1 The most common risk factors for homicide as identified by the Domestic Violence Death Review Committee (2009)

(Please see Figure 2.1 in Appnedix E on page 54)

Ottawa Homicides

- **In 2009, three women were murdered in Ottawa; one of these women was murdered by a spouse.**
- **In 2010, four women were murdered, one by her estranged boyfriend and one by her estranged husband.** The other two murders were not linked to woman abuse.

Snapshot Research Pilot

Background

The Snapshot research project was an original data collection undertaking piloted in the fall of 2010 under the umbrella of the larger "Hidden From Sight" project. The first "Hidden From Sight" report (2009) identified a number of challenges using pre-existing data such as the issue of double counting women who seek services from more than one agency and the need to collect demographic information on clients. In order to address these and other challenges, OCTEVAW designed a new questionnaire (see Appendix D) and accompanying reference manual (see Appendix D), which were distributed to all member agencies. The goals of the Snapshot research project were to:

- Provide a more comprehensive profile of the women being served by community agencies;
- Better understand how Ottawa women respond to violent incidents and the services they contact for support; and,
- Identify the demographic profile of women being served to highlight potential barriers some women face in obtaining services and supports.

Member agencies were asked to complete one questionnaire for each client they served during the data collection week, which ran from Monday September 27 to Friday October 1, 2010. Participation in this side project was voluntary and participation in the Snapshot research project was not required for participation in the larger "Hidden From Sight" project. In total, 8 agencies collected data for the Snapshot, 7 serving survivors and 1 serving perpetrators of violence (for participating agencies see Appendix B).

Clients Served

During the 5 day period from September 27 to October 1, 2010, 7 Ottawa agencies served 128 survivors of violence (114 women and 14 children under the age of 18). Because these survivors could not be identified by name due to confidentiality requirements, it is not possible to determine how many individual women and children were served and some double counting may have occurred.

Age

The children served ranged from 2 to 15 years of age and included 7 girls and 7 boys. The women served ranged in age from 18-84 years of age. The average age of all clients served was 39 years. The breakdown by age can be seen in Table 4.1. Clients were fairly evenly distributed with 18-29 year olds, 30-39 year olds, and 40-49 years olds each making up approximately one-quarter of the total women served.

Table 4.1 Breakdown of women served by age category

Age Group	Number of Women Served	%
18-24	11	10
25-29	12	11
30-39	27	24
40-49	29	25
50-59	21	18
60-69	10	9
70+	3	3
Not Specified	1	1
Total	**114**	**100%**

Language

The majority of clients spoke English (51%) or French (19%) as their mother tongue, but 29% of clients primarily spoke another language at home. The breakdown of other first languages can be found in Table 4.2. As for language of service, 76% preferred to receive services in English, while 23% preferred French.

Table 4.2. Breakdown of other first language

Language	Number of Individuals	%	Language	Number of Individuals	%
Arabic	5	4	Lingala	1	1
Bahasa	1	1	Mandarin	1	1
Belgian	1	1	Ndebele	1	1
Chinese	1	1	Portuguese	3	2
Creole	1	1	Russian	2	2
Farsi	2	2	Somali	6	5
Greek	1	1	Spanish	5	4
Kirundi	1	1	Vietnamese	1	1

Origin

The majority (79%) of those accessing services were Canadian citizens. The clients served also included landed immigrants (10%), refugees (4%), and those on a work visa (2%). The breakdown of client origin can be found in Table 4.43. Of all clients served, 27% were visible minorities and 4% identified as Aboriginal.

Table 4.3 Client origin by area of birth

Area	Number of Individuals	%
Canada	82	65
Other North America	3	2
South America	6	5
Europe	11	9
Africa	17	13
Asia	6	5
Australia	1	1

Location of Residence

The women and children who accessed services were distributed throughout the city and surrounding areas. Agencies were asked to record the first three digits of the clients' home postal code. Overall, 105 clients provided this information. Table 4.4 provides the breakdown by area. The most common postal codes were K2B and K2M from the West end of Ottawa. This finding should not be taken as an indication that there is more violence in these areas, but that several of the agencies that participated in the Snapshot were located on the West end of Ottawa. Rather than targeting specific areas of the city, the postal codes should be read as indicating that violence occurs in all neighbourhoods regards of socio-economic status or ethnic composition.

Table 4.4 Distribution of clients served by first three digits of home postal code

Postal Code	Approximate Area	Number of Individuals	
J8Z	Gatineau (Hull North)	1	1%
K0A	Rural - National Capital Region	2	2%
K0G	Rural - Rideau Lakes Area	1	1%
K1B	Blackburn Hamlet/Pine View/Sheffield Glen	3	3%
K1C	Orléans	2	2%
K1G	Riverview/Hawthorne/Canterbury/Hunt Club Park	3	3%
K1H	Alta Vista/Billings Bridge	1	1%
K1K	Overbrook, Forbes, Manor Park, Viscount Alexander Park, Finter Quarries	3	3%
K1L	Vanier/McKay Lake area	6	6%
K1N	Lower Town/Byward Market/Sandy Hill/University of Ottawa	8	8%
K1P	Parliament Hill	1	1%
K1R	Centretown	2	2%
K1S	The Glebe/Old Ottawa South/Old Ottawa East/Carleton University/Dow's Lake area	2	2%
K1T	Blossom Park/Greenboro/Leitrim	3	3%
K1V	Heron Gate/Heron Park/Riverside Park/Hunt Club/Riverside South/Airport	2	2%
K1Y	Civic Hospital/Island Park/Hintonburg/Mechanicsville/Champlain Park	1	1%
K1Z	Westboro/Carlington	5	5%
K2A	Highland Park/McKellar Park/Carlingwood	3	3%
K2B	Britannia/Pinecrest	10	10%
K2C	Queensway/Copeland/Carlington/Carleton Heights	6	6%
K2E	Ottawa West	3	3%
K2G	Davidson Heights/Nepean	6	6%
K2H	Bells Corners/Arlington Woods	3	3%
K2J	Barrhaven	3	3%
K2K	Beaverbrook/South March	3	3%
K2L	Katimavik-Hazeldean/Glen Cairn	2	2%
K2M	Bridlewood	10	10%
K2P	Centretown	2	2%
K2R	Fallowfield Village/Cedarhill Estates/Orchard Estates	1	1%
K2S	Stittsville	1	1%
K4A	Fallingbrook	1	1%
K4K	Rockland	1	1%
K7A	Smiths Falls	3	3%
P0M	Algoma, Sudbury District, and Rural Greater Sudbury	1	1%

Current Living Arrangements

Clients were also asked about their current living arrangements. More than one-third of all clients were renting on their own (with or without children), while 16% of respondents were residing with a family member, and 14% of clients were currently residing in a shelter. Of those residing with others (either renting or owning accommodation), many were residing with the perpetrator of violence. The complete breakdown by age can be found in Table 4.5.

Table 4.5 Current living arrangement by age (percentage of total clients)

Age Group	Rent (alone)	Rent (with others)	Own (self)	Own (with others)	Social Housing	Shelter	With Parents	Homeless	With Other Family
Children	1	0	0	0	1	0	10	0	0
18-24	2	1	0	0	1	3	2	1	1
25-29	5	0	0	0	1	3	0	0	0
30-39	8	3	2	2	3	2	0	0	1
40-49	11	1	1	3	1	6	0	0	1
50-59	7	3	3	3	0	1	0	0	0
60-69	3	2	1	2	0	0	0	0	1
70+	2	0	0	0	0	0	0	0	1
Total	38	10	6	10	6	14	12	1	4

Other Demographic Characteristics

Other demographic characteristics of interest include marital status (Table 4.6) and level of education completed (Table 4.7). These findings suggest that clients are most often separated from their husband or common-law spouse (39%), followed by being single (26%), and divorced (17%). Clients were almost all heterosexual (92%), as only 4%[4] self-identified as being homosexual. Almost half of all clients had a high school education or less (47%), while 53% had completed some form of post-secondary education.

Table 4.6 Marital status of clients

Marital Status	Number of women	%
Single	33	26
Common-Law	6	5
Married	13	10
Separated	49	39
Divorced	22	17
Widowed	4	3
Total	127	100

Table 4.7 Highest level of education completed by clients

Highest Level of Education Completed	Number of Individuals	%
Less than high school	30	26
Completed high school	25	21
Some college/university	13	11
Completed college	13	11
Completed university	22	19
Post-graduate (some/completed)	6	5
Total	117	100

[4] 2% did not provide an answer for this question. All non-responses were on children's questionnaires.

Findings

Relationship with the Accused

Clients reported varying types of individuals as the perpetrator of violence. Husbands (50%) and boyfriends (16%) were cited most often. Incidents of child abuse and senior abuse were also identified. Overall, the average duration of the relationship between the survivor and the accused was 12.8 years. In cases of senior abuse, where a survivor's adult child was the perpetrator, relationships were often the longest. Many of the accused perpetrators were reported to be repeat offenders (67%) with past histories of violent or abusive behaviour. A complete breakdown of the varying components of the survivor and accused relationship is shown in Table 4.8.

Table 4.8 Breakdown of survivor-accused relationship

Relationship with the Accused (i.e. The accused is the survivor's …)	Number of women	%	Average Duration of the Relationship (in years)	Number of Accused with a History of Violent/ Abusive Behaviour	%
Current boyfriend	12	10	2.3	8	67
Current Husband	18	14	17.0	11	61
Ex-Boyfriend	8	6	2.3	6	75
Ex-Husband	22	18	15.8	17	77
Husband (separated)	22	18	12.5	15	68
Roommate	2	2	N/A	1	50
Mother's Partner	1	1	1.0	1	100
Ex Common-Law Partner	11	9	8.7	4	36
Child/Son or Daughter In-Law	5	4	39.4	5	100
Same-Sex Partner	2	2	17.5	1	50
Common-Law Partner	6	5	8.0	3	50
Polygamous Husband	1	1	1.5	1	100
Parent	12	10	10.3	10	83
Sibling	2	2	34.0	1	50
Total	125	100	12.8	84	67

Details of the Offence

As shown in Table 4.9, women experienced multiple forms of abuse. Financial abuse was reported most often (75%), followed by emotional/verbal/psychological abuse (73%), physical abuse (65%), and sexual abuse (19%). Emotional/verbal/psychological abuse was highest amongst spouses (current, separated, and former). After removing groups with only one or two reports, ex-boyfriends were more often physically abusive than other groups. Sexual violence was most often reported in the context of woman abuse in an intimate relationship. Finally, financial abuse was much more commonly reported than expected given past research. For example, financial abuse was reported in 100% of cases where an ex-boyfriend was identified as the perpetrator of violence and 83% of cases where a current-boyfriend, common-law partner, or parent was identified as the perpetrator.

Table 4.9 Type of abuse by perpetrator

Relationship with the Accused (i.e. The accused is the survivor's…)	Emotional/ Verbal/ Psychological Abuse		Physical Abuse		Sexual Abuse		Financial Abuse	
	No.	%	No.	%	No.	%	No.	%
Current boyfriend	8	67	9	75	2	17	10	83
Current husband	16	89	12	67	3	17	14	78
Ex-boyfriend	6	75	8	100	2	25	8	100
Ex-husband	19	86	15	68	7	32	17	77
Husband (separated)	14	64	13	59	5	23	17	77
Roommate	1	50	2	100	0	0	2	100
Mother's Partner	0	0	1	100	0	0	1	100
Ex Common-Law Partner	9	82	8	73	2	18	7	64
Child / Son or Daughter In-Law	3	60	3	60	0	0	1	20
Same-Sex Partner	1	50	1	50	0	0	1	50
Common-Law Partner	4	67	4	67	2	33	5	83
Polygamous Husband	1	100	1	100	0	0	1	100
Parent	10	83	5	42	0	0	10	83
Sibling	1	50	1	50	1	50	2	100
Total	93	73	83	65	24	19	96	75

Table 4.10 provides a breakdown of the type of abuse experienced according to the age of the survivor. Children were most often exposed to emotional/verbal psychological abuse (79%), as were young adults 18-24 years of age. Clients aged 60-69 was the group that most commonly reported physical violence and financial abuse. Sexual violence was highest for women aged 25-29.

Table 4.10 Type of abuse by age of survivors

Age of the Survivor	Emotional/ Verbal/ Psychological Abuse		Physical Abuse		Sexual Abuse		Financial Abuse	
	No.	%	No.	%	No.	%	No.	%
Children	11	79	6	43	1	7	0	0
18-24	9	82	7	64	1	9	1	9
25-29	8	67	9	75	5	42	3	25
30-39	20	74	20	74	5	19	2	7
40-49	20	69	20	69	7	24	3	10
50-59	18	86	13	62	6	29	6	29
60-69	6	60	8	80	0	0	7	70
70+	2	67	1	33	0	0	2	67
Total	95	74	84	66	25	20	24	19

Police Involvement

Police were contacted in 64% of cases and an additional 6% were intending to contact the police. Charges were laid in 73%[5] of cases clients reported to the police.

[5] *As reported by the clients. Not confirmed with OPS.*

Timing of the Abuse

Among clients seeking assistance, 21% reported a current (within the last 30 days) experience of abuse, 38% reported abuse that had occurred within the last year, and 33% were seeking services in connection with a historic incident that occurred more than one year ago. The breakdown of abuse by timing can be found in Table 4.11.

*Table 4.11 Type of abuse by timing**

Time of the Abuse	Emotional/ Verbal/ Psychological Abuse		Physical Abuse		Sexual Abuse		Financial Abuse	
	No.	%	No.	%	No.	%	No.	%
Current	19	70	15	56	5	19	4	15
Past Year	34	71	34	71	8	17	8	17
Historic	37	86	32	74	10	23	12	28
Total	90	70	81	63	23	18	24	19

*Percentages reflect the percentage of cases within that timeframe. For example, 19 of the 27 clients reporting a current abuse experienced emotional/verbal/psychological abuse. Categories are not mutually exclusive.

Assistance/Support Sought

Women were asked about other services they had accessed at any time (not just within the data collection period). Thirty-nine percent of clients reported sustaining physical injuries, while 62%[6] received medical attention as a result of accessing services. Overall, 81% of clients reported requiring or seeking psychological/emotional support. As shown in Table 4.12, clients accessed a number of services. Only 10% reported that the current service they were visiting was the first place they had gone for assistance. Clients most commonly contacted the police (58%), followed by friends and/or family (45%), a community resource centre (41%), and a women's group or group (37%). Thirty-two percent of all clients had accessed a shelter.

Table 4.12 Breakdown of other services accessed

Additional Services Accessed	Number	%
Police	75	58
Friends/family	57	45
Community resource centre	52	41
Psychological/counselling service	52	41
Women's group/agency	47	37
Other community resource	42	33
Women's shelter	41	32
Medical facility	35	27
Government program/department/agency	23	18
Religious figure/community	22	17
Sexual assault centre	3	2

Offenders

New Directions, the partner assault response program, participated in the Snapshot research project and collected data about offenders that entered the program during the data collection week. At the time of the Snapshot, 17 men were attending the voluntary program, 159 men were attending the court-ordered program, 2 women were attending the voluntarily program, and 15 women were attending the court ordered program. Additionally:

- 136 court-ordered men had been referred but had not yet attended an intake appointment, 64 of which had an intake appointment scheduled;
- 94 court-ordered men had completed intake and were waiting to start a group;

[6] *Some services will provide medical care regardless of clients reporting injury.*

- 10 court-ordered women had completed intake and were waiting to start a group; and, 2 voluntary women had completed intake and were waiting to start a group.
- As of October 1, 2010, New Directions was working with a total of 435 individuals at various stages of the program.

During the Snapshot week of September 27, 2010, 18 men and 2 women were referred to New Directions. Their demographic information is presented in Table 4.13. Referrals were from the DVC where participation in a partner assault program was listed as a condition of probation (50%). Clients tended to be from Canada and under 30 years of age. Table 4.13 also includes the status of each client with New Directions as of December 31, 2010. Only 60% of clients were still in or planning to attend (were on waiting lists) programming as of December 2010. Two clients (10%) had their files closed while the files of the six remaining clients remained open, but no start date had been set.

Table 4.13 Breakdown of male New Directions clients from the week of September 27, 2010

	Number	%		Number	%
Referral Type			**Visible Minority**		
Early Intervention Programs Referral	5	25	Yes	5	25
Probation/Parole Referral	10	50	No	8	40
Voluntary	2	10	Not specified	7	35
Condition of Peace Bond	1	5	**Employed Outside the Home**		
Family Court Order	1	5	Yes	6	30
Attending/Will be attending the program as of Dec. 2010			No	5	25
Yes	12	60	Not specified	9	45
No (Failed to appear for intake)	2	10	**Mother Tongue**		
Not specified	6	30	Arabic	1	5
Country of Birth			English	9	45
Somali	2	10	Thai	1	5
Canada	10	50	Albanian	1	5
Thailand	1	5	Not specified	8	40
Yugoslavia	1	5	**Duration of Relationship with Survivor**		
Not specified	6	30	One year or less	3	15
Age			2-5 years	1	5
20-29	6	30	6-10 years	7	35
30-39	3	15	10-15 years	1	5
40-49	3	15	Not specified	8	40
50-59	1	5	Contact With Victim		
Not specified	7	35	Yes	3	15
Education			Yes, through third party	1	5
Less than high school	5	25	No	9	45
Completed high school	2	10	Not specified	7	35
Some college/university	1	5	**Has Children**		
Completed college	3	15	Yes	4	20
Completed university	2	10	No	2	10
Some/complete post-graduate studies	1	5	Not specified	14	70

Implications

One of the limitations of the "Hidden From Sight" research methodology is the inability to account for double counting in the data provided by agencies. For example, if a woman visited a shelter, contacted the police, and received care at the Ottawa Hospital all during the week of September 27, 2010, she would have been counted three times in the data. The Snapshot questionnaire included the question, "Is this the first service you have accessed?" The results of this question indicated that only 10% of clients served were unique. The other 90% had visited additional services and therefore may be counted more than once in the data if the services they contacted were among the eight agencies participating in the Snapshot. This is an important finding for improving the research methodology. Given the prevalence of overlap in service access, it is recommended that for future projects a unique identifying number be collected for each client to more accurately assess the number of women being served and to track how they navigate the web of services available to them.

Additionally, the collection of demographic information such as number of children, household and personal income, and other personal resources available to these women may make it possible to determine the profile of women who access certain services, determine groups who are under-represented among service users, and improve women's experiences with local services.

Overall, the pilot project was successful in collecting data not previously available through the original "Hidden From Sight" research model. Feedback from participating agencies and those that were unable to participate will be valuable for improving future approaches to research in this area.

Recommendations

The following recommendations were proposed by OCTEVAW in the first volume of the "Hidden From Sight" (HFS) report and remain relevant to improving data collection in this area. Based on the findings of the second volume, the recommendations have been revised to reflect clear, measurable and attainable goals for OCTEVAW member agencies and the greater community.

A. Standardized Reporting and Data Collection

1. Justice System

- **Work in conjunction with the Ottawa Police Service to improve the identification and recording of woman abuse crimes, particularly homicides.**

The first volume of the HFS report identified a counting error in the Ottawa Police Service (OPS) data. Women who were murdered by a spouse or partner were recorded in the general homicide data and not in the partner assault data. While the deaths were not misrecorded, there is some benefit to including them in the partner assault data. By including these deaths with partner assault data, a more accurate portrait of partner violence is presented and community groups and researchers can more easily undertake a gendered analysis of crimes and have a more thorough understanding of the underlying factors contributing to crime. This knowledge can be used to inform policy development and improve prevention initiatives and programs.

- **Advocate for an increase in the level of detailed data released by the court system to the public.**
- **Utilize the Court Watch program to increase the transparency of and publish case resolutions within the local Domestic Violence Court.**

Continuity in tracking data from the police through the court system is essential to gauge whether the criminal justice system is effectively responding to cases of woman abuse or sexual violence. In order to assess the process, the public must be made aware of how many cases of woman abuse or sexual violence are reported to the police, what proportion of those cases lead to charges being laid and against whom, what proportion of accused persons face a preliminary hearing and to a court hearing and trial, and the dispositions and sentences in cases where the accused was found guilty.

The Ministry of the Attorney General is responsible for the court system in Ontario, including the Domestic Violence Courts. Very little data is released to the public regarding case outcomes. OCTEVAW is committed to collecting data via the Court Watch program regarding court decisions and to release it publicly. It is anticipated that results from the Court Watch program will be released in late 2012 or early 2013.

2. Government Departments

- **Advocate for increased communication and collaboration among government ministries to allow VAW cases to be tracked from the time charges are laid until the end of an individual's contact with the criminal justice system.**

Due to current privacy laws, the sharing of relevant information about partner violence cases among government ministries is challenging. Data that tracks an individual's progress through the criminal justice system are needed to assist service providers to provide the necessary checks and balances to ensure the system is responding appropriately and justly to survivors of woman abuse and sexual violence.

- **Standardization of requirements for data collection and reporting for VAW community agencies.**

One of the greatest challenges in preparing this report was navigating the different methods by which participating organizations collect data. Generally speaking, statistics are collected by agencies with diverse funding bodies and/or diverse provincial department funding which vary in their reporting requirements. While similarly focused organizations (for example women's shelters) offer comparable services, they do not track the women they serve in the same manner. Some organizations record the number of women who access the service; others record the number of calls but not individuals while others record the total hours of service provided. Secondly, working definitions vary among organizations. As an example, sexual assault can be measured in single recent assaults, historical assaults for which women currently seek support, or individual support visits related to a sexual assault. Lastly, there was varied data and categorization of that data regarding the demographic characteristics of women accessing services. Improving data collection tools and determining the information needed should be developed by working together across ministries and agencies for the purposes of public education, program development, capacity building, accountability, and advocacy.

- **Begin dialogue with government and community stakeholders to examine the possibility of creating a community-managed centralized database of VAW data that would allow for real-time data monitoring.**

OCTEVAW will continue to explore new ways to track violence against women locally including projects such as the Snapshot. An alternative approach to the Snapshot would be to create and maintain a community-based violence against women database that agencies could contribute to and researchers could pull data from. The first step in undertaking such a project is to begin a dialogue process with community and government agencies to assess the feasibility of the project, including funding requirements, technological requirements, privacy and confidentiality concerns, types of data required, and so forth. OCTEVAW will begin discussions with relevant agencies to determine whether a community database is considered to be important and beneficial and whether the project is sufficiently feasible to warrant further investigation.

B. Further Research

OCTEVAW's Advocacy Committee has recently added research to its mandate as a sign of the coalition's general commitment and strong belief in the importance of data collection and uncovering new information related to all forms of violence against women. While OCTEVAW's research funding is limited, the "Hidden From Sight" Advisory Committee has identified a number of projects that are necessary to address gaps in current local knowledge. OCTEVAW is committed to supporting interested researchers and facilitating research projects wherever possible.

1. Expand the Snapshot project

The Snapshot piloted by OCTEVAW as part of this report yielded promising results. The methodology should continue to be refined based on feedback from researchers and participating agencies. In addition to quantitative data, other data sources such as qualitative assessment, case studies, and an environmental scan of available services may contribute significantly to future projects.

2. Measure recidivism rates of various participation profiles of men who participated in a PAR program.

A longitudinal study of woman abuse recidivism is necessary to determine the effectiveness of current PAR programming. Ideally, outcomes for PAR participants should be analyzed based on level of participation (i.e., in the program, referred but did not attend, attended but did not complete, and completed programming) as well as type of participation (i.e., mandated by court order and voluntary attendance). Multiple sources of evidence regarding effectiveness must be incorporated into an evaluation, including data from police to measure re-arrest, data from courts to measure re-conviction, data from the PAR program to measure re-admission, and interview data from victims to identify violent and abusive behaviour that was not reported to police.

C. New Areas of Interest

It is vital that future research continue to expand its focus to identify new trends and changes in the nature of VAW. It is also important to identify and examine additional barriers that women face in accessing services.

The following research topics are examples of areas that surfaced during the course of completing this report. It is by no means an exhaustive list of all new and possible VAW research areas:

1. Other types of family violence:
   (a) Teenage abuse of mothers
   (b) Elderly woman abuse
   (c) "Honour-based" violence against women
2. Alcohol-facilitated and drug-facilitated sexual assault
3. Implications of post-war and conflict violence on immigrant women
4. Human trafficking
5. Barriers to reporting
   (a) Barriers to reporting to police
   (b) Women experiences of re-victimization by the system
   (c) Barriers to bringing perpetrators to justice as a result of police decisions and court rulings
   (d) Financial abuse as a barrier to service access
6. Classifying sexual assaults as unfounded

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APPENDIX A:

Call For Participation

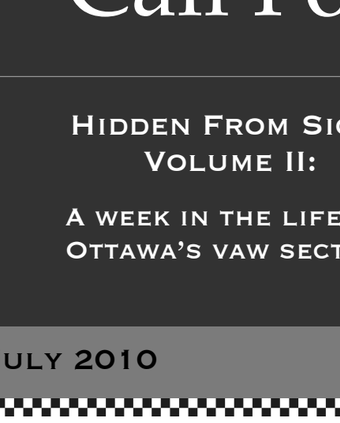
HIDDEN FROM SIGHT VOLUME II:

A WEEK IN THE LIFE OF OTTAWA'S VAW SECTOR

JULY 2010

IMPORTANT DATES

SEPT 27 – OCT 1, 2010	SNAP SHOT DATA COLLECTION PERIOD
NOV 2010 – MAR 2011	EXISTING STATS DATA SUBMISSION PERIOD
MAY 2011	FINAL REPORT RELEASED



HIDDEN FROM SIGHT

- Hidden from Sight Volume I was a project designed to consolidate existing violence against women (VAW) data collected by local agencies and to educate the public on the prevalence of VAW in Ottawa.
- OCTEVAW pioneered a new research model and created a written report mapping the trends of violence within the city.
- Given the success of the first report, OCTEVAW has secured funding to replicate the report for the 2009-2010 timeframe and expand upon the project with the inclusion of a snapshot component.

We are currently reaching out to agencies/groups/ institutions that may work with women who experience violence and would be interested in contributing to the second volume of this report!

CONTACT US

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Trina Forrester, Research Coordinator research@octevaw-cocvff.ca

OCTEVAW is an unincorporated, non-profit, non-partisan organization composed of a network of member organizations and individuals located within the City of Ottawa and surrounding regions. Our members include women abuse and rape crisis agencies, victim services, child protection services, hospital and police representatives, the crown, probation and parole, health and counselling services, academic researchers and other concerned community members.

Mission:
OCTEVAW is a coalition of organizations and individuals dedicated to ending violence against women and, through leadership, education, advocacy and political action, to promoting a coordinated response to women and their children who have experienced abuse

Vision:
OCTEVAW aspires to a future in which:

- no woman in our community need fear for her safety and well-being, or that of her children;
- respect for the inherent worth and dignity of all women is reflected in our public institutions;
- all members of the community are united in supporting efforts to ensure a permanent end to violence and abuse of women and their children in Ottawa.

Values:
In working collaboratively to achieve equality of rights, fair access to services and resources, and social justice for women and their children who have experienced abuse, OCTEVAW adheres to feminist, anti-racist, anti-oppression and pro-choice principles, and is committed to celebrating diversity, inclusiveness and the dignity of all women and their children.

Membership

OCTEVAW welcomes participation and input from all sectors and from all people. We are especially dedicated to ensuring accessibility and inclusivity of all women, including survivors of violence. Women who may have specific needs or requests regarding involvement are encouraged to contact the OCTEVAW office.

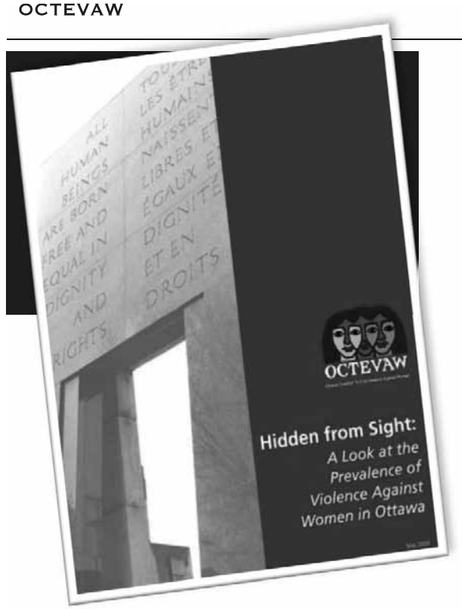
Voting Member:
There are three types of voting members:

1. **Agency Members** Agency members designate at least one representative from their agency to join any OCTEVAW standing committee. All agency members are allocated one vote each.
2. **Individual Members** Individual members can join any OCTEVAW standing committee and are allocated one vote each.
3. **Honorary Members** The OCTEVAW Steering Committee may consider granting honorary membership to individuals who, by virtue of their past contributions or achievements in ending violence against women and children, merit the title "Honorary Member." Honorary members are allocated one vote each.

Non-Voting Member
Individuals and organizations who do not meet all the criteria for membership are encouraged to contribute to, and participate in OCTEVAW Standing Committees as well.

For information regarding membership please contact ed@octevaw-cocvff.ca

OTTAWA COALITION TO END VIOLENCE AGAINST WOMEN (OCTEVAW)
WWW.OCTEVAW-COCVFF.CA



Hidden From Sight Project

"It's especially gratifying for the Community Foundation to see the way OCTEVAW has been able to use the public interest created by Ottawa's Vital Signs to delve deeper into an issue that has been largely hidden from the broader community for too long"

Barbara McInnes,
Community Foundation of Ottawa

OCTEVAW has received funding from The Community Foundation of Ottawa to replicate and expand on the original Hidden from Sight report.

Goals:

- Consolidate available statistics regarding violence against women (woman abuse and sexual violence) and children, as well as corresponding services in the Ottawa area for the 2009 & 2010 calendar years.
- Double the number of participating agencies/institutions (goal is 32 agencies)
- Follow up on the recommendations made in Vol. I (where possible)
- Development of a one-week snapshot of VAW response in Ottawa
- Create a comprehensive report on the state of violence against women to serve as a resource for advocacy, public education and service planning.

The data collected for this report will focus on 5 main themes:

- Woman Abuse/Intimate Partner Violence/ Domestic Violence
- Sexual Assault
- Homicide/Femicide
- VAW Response Services (Snap Shot)
- Inclusion of women from groups that tend to be under represented in existing data including Aboriginal women, women from conflict and post-conflict situations, women involved in the sex trade, rural women, amongst others.

Hidden From Sight Vol. I Available NOW at:

www.octevaw-cocvff.ca/en/pdf/reports/Hidden_from_Sight.pdf (English)

and

www.octevaw-cocvff.ca/fr/pdf/reports/Hidden_from_Sight.pdf (French)

How You Can Get Involved

Who can particpate?

Any community group/not for profit organization/agency or institution that works with women, particularly those escaping or experiencing violence, are invited to submit data for this project.

How do I particpate?

Our goal is to amalgamate data already collected by your group with data collected by similar agencies/organizations. The first step is to seek the approval or your board or governing agency to release your existing data to us. In an effort to maintain the confidentiality and privacy of your clients, we ask that no names or identifying information be included in any data you send to us for this project (for more ethical considerations see the Ethics section on pg. 5). Once you have received the consent of your governing body to participate you can email, fax or arrange for a pick up of your data with the project coordinator.

What kind of data are we collecting?

Demographic information of clients served

- Age
- Gender
- Language Spoken
- Sexual Orientation
- Geographic Location (ex. Orleans, the Glebe, Vanier or postal codes)
- Disabilities

Number of Individuals accessing service

- Number of individuals accessing the service
- Number of calls for information or aid
- Number of times an individual accesses a service
- Was this the first service they accessed?

Reason for accessing service/chief complaint

- Type of violence experiences (physical, sexual, emotional, financial, etc.)
- Counselling (if voluntary or court mandated)
- Medical Attention
- Relationship between survivor and perpetrator

Referrals

- Had the individual been referred from another organization?
- Was the client referred to another service/agency/organization for additional aid?
- If yes where?
- Were the police contacted?

Current Resources

- Number of staff, volunteers, etc.
- Number of shelter beds versus average number of women seeking aid
- Wait times for a client to receive assistance

Any information on children who witness/experience family violence

- Any demographic information
- Number of children served

These are just examples of the kind of information you may be collecting for your own purposes or for your funders. This list should not be considered exhaustive and if you have other data that may be of interest to this project, please feel free to forward it on.

How will my data be used?

In order to better understand how your data will be represented in the final report, please consult the first volume of Hidden from Sight available online at www.octevaw-cocvff.ca/en/pdf/reports/Hidden_from_Sight.pdf.

Will my organization be singled out?

Only those institutions/programs that are government mandated (police, PAR programs, hospital programs) are named in the final report. Shelters, community groups, resource centres and similar groups are never singled out. For example, the report will state, "One Ottawa resource centre reported that…" but not specify which centre. Of course, if you would like to have your agency singled out/highlighted, accommodations can always be made.

ETHICAL CONSIDERATIONS

Due to the sensitivity of the data this project will be collecting, we ask that you please follow all ethical guidelines outlined by your service, institution or organization. There are two main ethical concerns to bear in mind for this data collection project: confidentiality and legality.

Confidentiality

The confidentiality of the individuals accessing services must be maintained. Therefore, we ask that absolutely no names be included in the data sent for this project. This includes those individuals who may have consented to have their names appear in any other research projects and/or published report, as they have not consented to be named in this report.

Legality

We ask that all administrative channels be followed prior to sending any data for this project. While we appreciate the enthusiasm of members to participate, we want to ensure that proper procedure for your organization is followed. Please confer with your colleagues, supervisor, ED, board of directors or legal consultant as necessary.

DATA FORMAT

Data can be emailed to the Research Coordinator in an excel, word, powerpoint, or .pdf document.

The more detailed the information the more useful it is for the purposes of this project. For example, it is better to send a break down of the number calls by month or quarter than to say there were 4000 calls in a year. It is ideal to send a data file that contains more than one piece of information about an individual, however, we are aware this may not always be possible. We will work with whatever level of breakdown or detail that is possible. Please do not hesitate to send us whatever data you have available regardless of the level of detail.

TIME FRAME

This project is collecting data from the 2009 and 2010 calendar years. If time and/or resources are limited for data assembly, then we would prefer the most recent data you have.

SNAP SHOT PROJECT

The Snap Shot Project is an original data collection project being run under the umbrella of the larger Hidden from Sight project. Participating agencies will be asked to fill out a form for each client they serve during the one-week data collection period. This will allow us to have unique insight into Ottawa's VAW response and answer many questions that arose out of the first report. Participation in this side project is voluntary and participation in the snap shot is not required to participate in the larger Hidden from Sight project.

If you are interested in learning more about the upcoming snap shot project please contact our Research Coordinator at research@octevaw-cocvff.ca

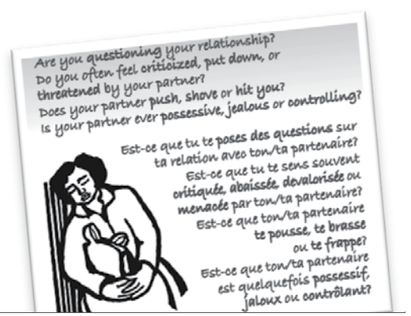
WHAT IF I HAVE QUESTIONS/CONCERNS OR NEED HELP?

Our Research Coordinator is always available to answer any questions, alleviate any concerns and help ensure you are able to participate in this project as easily as possible.

Please feel free to contact:

Trina Forrester
Research Coordinator
research@octevaw-cocvff.ca

Erin Williams
Executive Director
613-725-3601 x105
ed@octevaw-cocvff.ca



APPENDIX B: List of Agencies Contacted

- Action Housing
- Amethyst Women's Addiction Centre
- Bethany Hope Centre
- Canadians for Choice
- Carlington Community Health Centre
- Catholic Family Services Ottawa
- Children's Aid Society
- Chrysalis House
- City of Ottawa – Social Services Department
- Comite Réseau
- Council on Aging of Ottawa
- Dress for Success Ottawa
- Eastern Ottawa Resource Centre
- Elizabeth Fry Society of Ottawa
- Equity Services - Carleton University
- Family Services à la famille Ottawa
- Femaide
- Harmony House
- Hunt Club/Riverside Community Services Centre
- Immigrant Women Services Ottawa
- Interval House of Ottawa
- Jewish Family Services of Ottawa - Shalom Bayit
- Maison d'amitié
- Minwaashin Lodge - Aboriginal Women's Support Centre
- Military Family Resource Centre
- Ministry of Community Safety and Correctional Services - Probation and Parole
- Nelson House of Ottawa-Carleton
- Nepean, Rideau and Osgoode Community Resource Centre
- New Directions
- Ottawa Community Housing
- Ottawa Community Immigrant Services Organization
- The Housing Registry
- Ottawa Police Service, Partner Assault Unit
- Ottawa Police Service, Sexual Assault and Child Abuse Unit
- Ottawa Police Service, Victim Crisis Unit
- Ottawa Rape Crisis Centre
- Ottawa Victim Services
- Pinecrest-Queensway Health and Community Services
- Pink Triangle
- Planned Parenthood
- Sexual Assault Network
- Sexual Assault & Partner Abuse Care Program (Ottawa Hospital)
- The Social Housing Registry of Ottawa (The Registry)
- Somerset West Community Health Centre
- The Metivta of Ottawa
- University of Ottawa Community Legal Clinic
- Victim Witness Assistance Program
- Women's Initiative for Safer Environments
- Western Ottawa Community Resource Centre
- Youville Centre

List of Participating Agencies

- Action Housing
- Amethyst Women's Addiction Centre
- Canadians for Choice
- Carleton University Equity Services and Social Work Department
- Carlington Community Health Centre
- Catholic Family Service Ottawa - Francophone Anti-Violence Program* and New Directions*
- Children's Aid Society*
- Chrysalis House*
- Dress For Success
- Eastern Ottawa Resource Centre
- Elizabeth Fry Society of Ottawa
- Family Services à la famille Ottawa* and In Love and In Danger project
- Femaide
- Harmony House
- Interval House of Ottawa
- Maison d'amitié
- Minwaashin Lodge - Aboriginal Women's Support Centre
- Nepean, Rideau and Osgoode Community Resource Centre**

- Neighbours Friends and Families Campaign
- Ottawa Community Immigrant Services Organization
- Ottawa Police Service, Partner Assault Unit
- Ottawa Police Service, Sexual Assault and Child Abuse Unit
- Ottawa Victim Services
- Pinecrest-Queensway Health and Community Services*
- Planned Parenthood Ottawa
- Sexual Assault & Partner Abuse Care Program
- (Ottawa Hospital)
- The Social Housing Registry of Ottawa
- Somerset West Community Health Centre
- University of Ottawa Community Legal Clinic
- University of Ottawa, Department of Criminology
- Western Ottawa Community Resource Centre*Agency participated in Snapshot project and "Hidden From Sight"

**Agency participated in Snapshot project only

APPENDIX C: Glossary of Legal Terms

Criminal Code Definitions of relevant assault charges:

Assault (266) **Assault with a weapon or causing bodily harm** (267)

Every one who, in committing an assault,

(a) carries, uses or threatens to use a weapon or an imitation thereof, or

(b) causes bodily harm to the complainant.

Aggravated assault 268.

(1) Every one commits an aggravated assault who wounds, maims, disfigures or endangers the life of the complainant.

Criminal Code Definitions of relevant sexual violence charges:

Meaning of "consent"

273.1 (1) Subject to subsection (2) and subsection 265(3), **"consent"** means, for the purposes of sections 271, 272 and 273, the voluntary agreement of the complainant to engage in the sexual activity in question.

Where no consent obtained

(2) No consent is obtained, for the purposes of sections 271, 272 and 273, where

(a) the agreement is expressed by the words or conduct of a person other than the complainant;

(b) the complainant is incapable of consenting to the activity;

(c) the accused induces the complainant to engage in the activity by abusing a position of trust, power or authority;

(d) the complainant expresses, by words or conduct, a lack of agreement to engage in the activity; or

(e) the complainant, having consented to engage in sexual activity, expresses, by words or conduct, a lack of agreement to continue to engage in the activity.

Subsection (2) not limiting

(3) Nothing in subsection (2) shall be construed as limiting the circumstances in which no consent is obtained. 1992, c. 38, s. 1.

Consent no defence (150.1) (1) Subject to subsections (2) to (2.2), when an accused is charged with an offence under section 151 or 152 or subsection 153(1), 160(3) or 173(2) or is charged with an offence under section 271, 272 or 273 in respect of a complainant under the age of 16 years, it is not a defence that the complainant consented to the activity that forms the subject-matter of the charge.

Sexual assault (271).

Sexual assault with a weapon, threats to a third party or causing bodily harm (272). (1) Every person commits an offence who, in committing a sexual assault,

(a) carries, uses or threatens to use a weapon or an imitation of a weapon;

(b) threatens to cause bodily harm to a person other than the complainant;

(c) causes bodily harm to the complainant; or

(d) is a party to the offence with any other person.

Aggravated sexual assault (273). (1) Every one commits an aggravated sexual assault who, in committing a sexual assault, wounds, maims, disfigures or endangers the life of the complainant.

Sexual interference (151). Every person who, for a sexual purpose, touches, directly or indirectly, with a part of the body or with an object, any part of the body of a person under the age of 16 years.

Invitation to sexual touching (152). Every person who, for a sexual purpose, invites, counsels or incites a person under the age of 16 years to touch, directly or indirectly, with a part of the body or with an object, the body of any person, including the body of the person who so invites, counsels or incites and the body of the person under the age of 16 years.

Sexual exploitation (153). (1) Every person commits an offence who is in a position of trust or authority towards a young person, who is a person with whom the young person is in a relationship of dependency or who is in a relationship with a young person that is exploitative of the young person, and who

(a) for a sexual purpose, touches, directly or indirectly, with a part of the body or with an object, any part of the body of the young person; or

(b) for a sexual purpose, invites, counsels or incites a young person to touch, directly or indirectly, with a part of the body or with an object, the body of any person, including the body of the person who so invites, counsels or incites and the body of the young person.

Inference of sexual exploitation (1.2) A judge may infer that a person is in a relationship with a young person that is exploitative of the young person from the nature and circumstances of the relationship, including

(a) the age of the young person;

(b) the age difference between the person and the young person;

(c) the evolution of the relationship; and

(d) the degree of control or influence by the person over the young person.

Other Charges:

Criminal harassment (264) (1) No person shall, without lawful authority and knowing that another person is harassed or recklessly as to whether the other person is harassed, engage in conduct referred to in subsection (2) that causes that other person reasonably, in all the circumstances, to fear for their safety or the safety of anyone known to them.

Breaches

A breach is a violation of any condition set out by the judge in sentencing or other condition set out by the court:

Recognizance - Obligation to appear before the court

Undertaking - Enforcement of judgment to do or abstain from doing any act

Remand - send the accused to custody in prison by warrant (CC s.516-s.5.17)

Peace Bond - protection order granted in cases where an individual has reasonable fear that someone will cause injury to them or a family member, damage their property or commit a sexual offence against them (CC s.810)

Probation/Parole - conditions outlined for probation or parole

Restraining Order - protection order that limits contact or sets other limits, usually in cases of domestic violence (Family Law Act – s.46(2), Children's Law Reform Act – s. 35(2), CC s.515(4)

Police and Court Recording Practices:

Unfounded - allegations baseless; groundless

Cleared by Charge – Charges were laid against an accused in the case. The case is considered solved.

Cleared by Other – Being cleared by other means includes police taking no further action, informal police warnings, referrals to community programs, formal police cautions, Crown cautions and referrals to extrajudicial sanctions programs (Ministry of Justice and Attorney General, 2010). The case is considered solved.

Charges Disposed – meaning a conclusion was reached e.g. charges were dismissed, withdrawn or stayed, or a finding of guilty or not guilty was made

APPENDIX D:

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OCTEVAW SNAPSHOT

DATA COLLECTION

What is the Snapshot Project?

Hidden from Sight Volume I was a project designed to consolidate existing violence against women (VAW) data collected by local agencies and to educate the public on the prevalence of VAW in Ottawa. OCTEVAW pioneered a new research model and created a written report mapping the trends of violence within the city. Given the success of the first report, OCTEVAW has secured funding to replicate the report for the 2009-2010 timeframe and expand upon the project with the inclusion of a Snapshot component.

The Snapshot Project is an original data collection project being run under the umbrella of the larger Hidden from Sight project. Participating agencies will be asked to fill out a form for each client they serve during the one-week data collection period. This will allow us to have unique insight into Ottawa's VAW response and answer many questions that arose out of the first report. Participation in this side project is voluntary and participation in the Snapshot is not required to participate in the larger Hidden from Sight project.

Goals

The Snapshot Component Strives to:

- Provide a more comprehensive profile of the women being served by our community partners.
- Better understand how Ottawa women respond to violent incidents and the services they contact for support.
- Identify gaps in the demographic profile of women being served to highlight potential barriers some women face in obtaining services and supports.

Time Frame

The data collection period for the Snapshot project is September 27, 2010 to October 1, 2010.

How Does the Data Collection Work?

We ask that you **complete one copy** of the "OCTEVAW SNAPSHOT DATA COLLECTION FORM" **for each client** you serve during the data collection week. The form is attached as .pdf document and can be photocopied for as many copies as you require during the data collection period. We ask that you have every member of your staff or volunteer group to participate in order to maximize data collection and ensure the accuracy of the data and its results.

Once the weeklong data collection period is over, all your completed forms can either be mailed to the OCTEVAW office or you can arrange for a pick up with the Project's Research Coordinator, Trina Forrester (research@octevaw-cocvff.ca).

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OCTEVAW Snap Shot Data Collection Form

Data Collection Site:

Date:

Information démographique Victime/Survivant

Gender: _____

Âge:_____

First 3 Digits of Postal Code:_____

Marital Status: _____

Current Living Arrangement:

_____

Country of Birth: _____

Ethnicity:_____

Religion: _____

Mother Tongue:_____

Preferred Language: English French

Naturalization Status: _____

Visible Minority: Yes No

Aboriginal Status: Yes No

Sexual Orientation: _____

Highest Level of Education Completed

_____

Currently Employed Outside the Home:

Yes No

Relationship with Accused

Relationship with Accused:_____

Duration of the Relationship: _____

Accused has History of Violence/Abuse:

Yes No

Details of the Offence

Date of Offence _____

Historic, Past Year or Current: _____

Type of Abuse: _____

Were Police Contacted:

Yes No

Does the Victim/Survivor Intend to Contact Police:

Yes No

Was an Arrest Made: Yes No

Were Charges Laid: Yes No

Assistance/Support Sought

Physical Injuries Sustained: Yes No

Medical Treatment Required/Sought:

Yes No

Psychological/Emotional Support Required/Sought:

Yes No

First Resource Contacted for Assistance:

Yes No

Other Resources Previously Contacted
(check all that apply)

- ☐ Women's Shelter
- ☐ Sexual Assault Centre
- ☐ Police
- ☐ Community Resource Centre
- ☐ Women's Group/Agency
- ☐ Government Program/Department/Agency
- ☐ Other Community Resource
- ☐ Friends/Family
- ☐ Religious Figure/Community
- ☐ Medical Facility
- ☐ Psychological/Counselling Service

APPENDIX E: Risk Factors
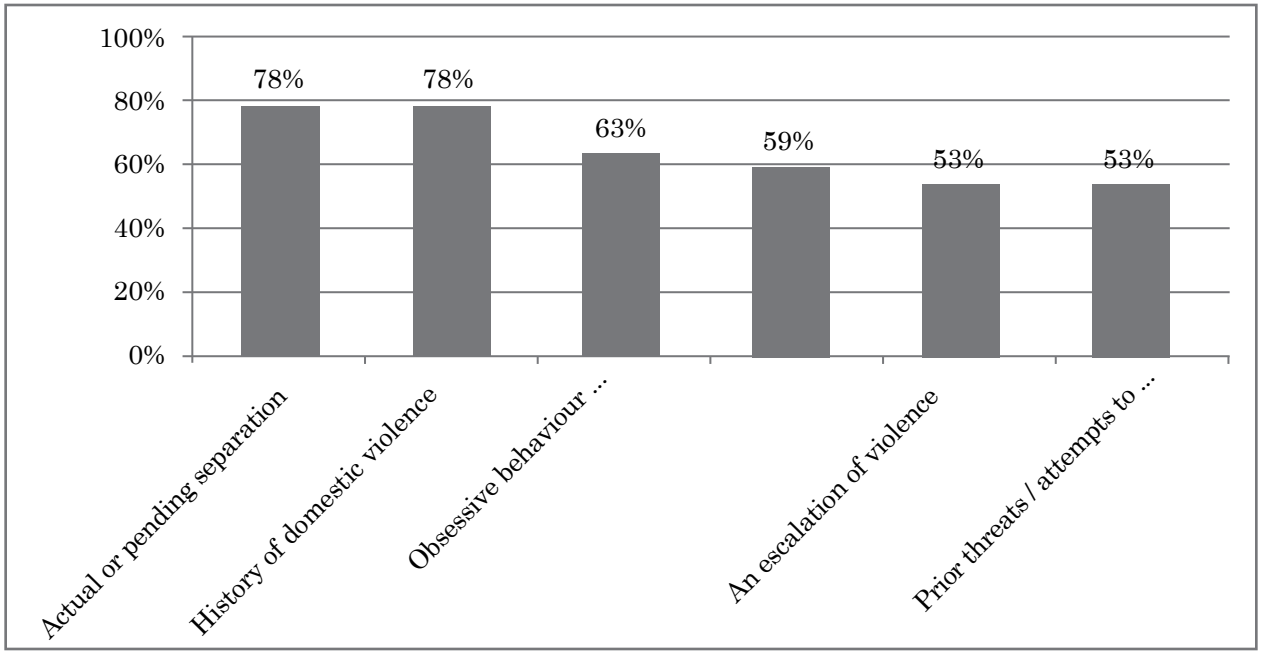
Table 2.1 The most common risk factors for homicide as identified by the Domestic Violence Death Review Committee (2009)