

# Addressing Sexual Violence & Intimate Partner Violence in Practice

Intimate Partner violence (IPV), and Sexual violence have a profound impact on women's health overall, and [mental health in particular](#). Healthcare providers are an important point of contact in helping women to recognize and break away from cycles of violence. But what can health care professionals do?

## **Assessing potential risk of Homicide**

If a patient discloses IPV or sexual violence to you, explore the following topics in relationship to the identified perpetrator:

- *A history of violent behaviour toward family members;*
- *A history of abusive behaviour toward intimate partners;*
- *Escalation of violence;*
- *Previous criminality;*
- *General antisocial attitudes;*
- *Substance abuse problems;*
- *Mental health problems;*
- *Relationship problems;*
- *Attitudes that support violence towards women?*

If the presence of some of these factors have lead you to feel concerned, inquire about/ note the following:

- *The patient's concerns about future violence by the accused;*
- *Access the identified perpetrator might have to weapons;*
- *Patients who have a biological child with a different partner;*
- *Patients who have been assaulted by the accused while pregnant; and*
- *Barriers for the victim in accessing support.*

## **Safety Planning**

If assessment has indicated that there is a pronounced risk to the patient should they return to their residence, a discussion should be had about the risks and possible alternatives. See resources section for more information about safety planning and VAW sector shelters if staying with friends or family is not an option.

Even where risk of homicide does not seem elevated, safety planning can help patients to feel supported and safe. In this way resiliency and self-determination can grow, better facilitating trust and safety for the future.

Canada has a broad definition of sexual assault. It includes all unwanted sexual activity, such as unwanted sexual grabbing, kissing, and fondling as well as rape.

Sexual activity is only legal when both parties consent. Consent is defined in Canada's *Criminal Code* in s. 273.1(1), as the voluntary agreement to engage in the sexual activity in question. The law focuses on what the person was actually thinking and feeling at the time of the sexual activity. Sexual touching is only lawful if the person affirmatively communicated their consent, whether through words or conduct. Silence or passivity does not equal consent. **The *Criminal Code* also says there is no consent when:**

- Someone says or does something that shows they are not consenting to an activity
- Someone says or does something to show they are not agreeing to continue an activity that has already started
- someone is incapable of consenting to the activity, because, for example, they are unconscious
- the consent is a result of a someone abusing a position of trust, power or authority
- someone consents on someone else's behalf

\*sources are accessible through embedded hyperlinks

### CREATE A SAFETY PLAN

	Keep a list of emergency numbers on your phone, computer, in your car, in your bag, at work and with a friend.		Keep a change of clothes for yourself and your children at work and/or with a friend.
	Have several places in mind to where you can flee - family, friends, police.		If you can, keep some cash aside for emergencies. Make sure you have your bank details available.
	How will you get away? Car? Taxi? Public transport? A friend?		Find a supportive family member, friend or colleague in whom to confide.
	Keep a copy of important documents on your phone, your computer, at work and with friends.		



## Victim blaming

Myths surrounding sexual assault and IPV can negatively affect patients, care providers, and their interactions.

Myth	Fact
Women provoke sexual assault by how they act or dress.	No behaviour or attire justifies sexual assault
Sexual assault is perpetrated by strangers.	Survivors most often know the perpetrator
Women who drink alcohol or use drugs are ask to be sexually assaulted.	Substances are involved in many sexual assaults, but are not the cause. The survivor is never responsible for the assault.
People lie about being the victim of sexual assault.	The false allegation rate of this severely under-reported crime is no higher than in many other crimes.
Only young women are sexually assaulted.	People of any age or gender can be sexually assaulted.

## Trauma Informed Care & Language

“Unfortunately, the behaviours and responses of those with trauma experiences are often misunderstood and labelled in stigmatizing and deficit-based ways.... Practitioners play a very important role in offering another way of understanding trauma responses” (BCCEWH 2013: 23)

### What are some things clinicians can do in practice?

- 1) Respond to disclosures by acknowledging a) that what happened was not the survivor’s fault, and b) highlight the strength and resilience of the survivor.
- 2) Emphasise collaboration and choice; give power back to the survivor wherever you can.
- 3) Use supportive language, and avoid making assumptions.
- 4) Keep information and pamphlets about IPV and sexual violence available in treatment areas.

FROM (Deficit Perspective)	TO (Trauma-Informed & Strengths-Based)
What is wrong?	What has happened?
Symptoms	Adaptations
Disorder	Response
Attention seeking	The individual is trying to connect in the best way they know how
Borderline	The individual is doing the best they can given their early experiences
Controlling	The individual seems to be trying to assert their power
Manipulative	The individual has difficulty asking directly for what they want
Malingering	Seeking help in a way that feels safer

## Ottawa Resources

[The Ottawa Hospital Sexual Assault and Partner Abuse Care Program](#) offers 24 hour service to people of 16 years or older. Please fax referral to 613- 761-4985 or call 613-798-5555 x 13770 to book an appointment.

[Amethyst Women’s Addiction Centre](#) offers “outpatient” style community based treatment for women. (613) 563-0363 [info@amethyst-ottawa.org](mailto:info@amethyst-ottawa.org)

The [Ottawa Rape Crisis Centre \(ORCC\)](#) offers counselling and support to survivors of sexual violence as well as public education. The crisis line number is 613-562-2333 or 613-562-2334 for an intake appointment and information.

The [Sexual Assault Support Centre of Ottawa \(SASC\)](#) supports all women through individual and group supports, as well as their phone line: (613) 234-2266. For other services they can be reached at [info@sascottawa.com](mailto:info@sascottawa.com) or 613-725-2160.

### Accessing VAW Shelters

There are six Violence Against Women (VAW) sector shelters in Ottawa (a complete [list can be found here](#)). For the safety of women and children, the locations of these shelters are confidential. Women may access a shelter by calling directly, through VAW [transition support workers](#), or through the City of Ottawa at 311. Should all the shelters be full, then a call to 311 becomes necessary, as they will assess whether the woman can be temporarily housed with friends or family, or if the city must her and her children in a motel.