

Health Effects of Abuse for Women in the Early Years After Leaving

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ISSUE: There is a poor fit between current health services and the many physical and mental health needs of women (survivors) in the early years after leaving an abusive partner.

CONTEXT:

- Secondary prevention services designed to manage the health effects of abuse/ trauma are needed to address the long term costs of abuse.
- Services for survivors of intimate partner violence need to address the effects of trauma/abuse experienced across the lifespan.
- Survivors' strengths are key to helping them manage the challenges they face after leaving, but they are often neglected.
- Barriers to survivor self-sufficiency can be eliminated through changes to policies, programs and services.

RESEARCH FINDINGS:

- Total costs attributable to violence were estimated at **\$13,162** annually, per survivor for *selected* government, non-profit, private and personal expenditures.
- Survivors experienced multiple debilitating but treatable health problems that persisted for years after leaving, contributed to days lost from work and regular activity, and caused survivors to use health and social services more frequently than their peers, but with little relief and continuing unmet needs.
- Cumulative abuse experienced over a lifetime (child abuse, sexual assault, intimate partner violence) influenced the physical and mental health of survivors.
- Survivors had many strengths (resilience, sense of mastery, social support, employment skills, family functioning).
- Barriers to survivor self-sufficiency were economic strain, employment challenges, custody and access issues, health effects of violence, ongoing abuse and harassment, and difficulty getting necessary help despite high service use.

CONCLUSIONS:

1. Women need targeted services beyond the crisis period of leaving the abusive relationship that focus on the secondary prevention of abuse-related health problems.
2. Health, legal and social services for abused women need to:
 - be timely, integrated, accessible and affordable
 - include 'system navigators' to help women to find and access appropriate services in a timely fashion
 - provide both early intervention and follow-up
 - be strengths-based, drawing on women's capacities
3. Policy makers and service providers require a solid understanding of trauma and trauma-informed care across the lifespan.