

IPV Epidemic Motion – City Council Nov. 28

Good evening – my name is Cindy McMann and I'm the Public Educator with G-W-Women in Crisis. Thank-you for the opportunity to speak in support of this motion on behalf of G-W Women in Crisis and the Guelph-Wellington Action Committee on Sexual Assault and Domestic Violence. Our position is straightforward: intimate partner violence is an epidemic and the sooner we call it that and treat it like it is, the sooner we can meaningfully address it.

The Government of Ontario has so far refused to use the term “epidemic” to refer to intimate partner violence (IPV) because “[i]ntimate partner violence (IPV) would not be considered an epidemic as it is not an infectious or communicable disease.” The Centers for Disease Control and Prevention, however, helpfully reminds us that a health issue doesn't have to be contagious to count as an epidemic (CDC). Obesity is often referred to as an epidemic by the medical establishment. The opioid crisis has been referred to as an epidemic (most notably, by the Government of Ontario). The word epidemic “can refer to a disease or other specific health-related behavior (e.g., smoking) with rates that are clearly above the expected occurrence in a community or region” (Mailman School of Public Health, Columbia U, 2021).

What, then, is “the expected occurrence” of rates of intimate partner violence in Guelph? What number of cases of IPV would be commonly acceptable here? We live in a country that values human rights in a community that cares about and for each other. The acceptable and expected number of cases is zero.

That is not (as you have heard) the number of cases we have here in Guelph. Last year at G-W WiC, we supported 998 women and 54 children across our programs and took 2,452 calls on our Crisis Line, and most people who experience IPV don't call a gender-based violence support centre for help. They don't call the police. This is the tip of the iceberg, and rates of violence are going up.

In Canada, rates of intimate partner violence were 19% higher in 2022 than they were in 2014 (StatsCan). There was a 27 per cent increase in femicides from 2019 to 2022 (Canadian Femicide Observatory for Justice and Accountability). 44% of women in Canada have experienced some form of IPV in their lifetimes (CWF). 54% of trans folks do (National Resource Centre on Domestic Violence). Our current systemic approaches to addressing IPV are not working.

We need to do better, and to do better, we need to do something different. We need to stop thinking about IPV as a private matter between couples. We need to recognize that the place to prevent IPV—to see it, to name it, to speak out about it, to step in and step up, to take action to support people when they're being harmed—is the community. This is community work.

And it's work that strengthens the community. Each person who survives violence experiences health impacts, as well as social and economic consequences that are wide ranging and uniquely damaging to them, but the impacts of IPV go well beyond the individual. They affect our entire city. The economic costs of IPV are enormous for our criminal justice system, our civil justice system, our healthcare system, our social service operations, our employers. The social and emotional costs of IPV on families, friends, co-workers, neighbours, support people, community members, children, are equally high.

No one knows this better than the County of Renfrew, where Carol Culleton, Anastasia Kuzyk and Nathalie Warmerdam were murdered by a man with a history of gender-based violence in 2015. The Coroner's Jury Inquest made 86 recommendations to various offices and levels of government to help

prevent femicides resulting from IPV from happening again. These recommendations are the result of a great deal of research and analysis and a great deal of soul-searching from a community in crisis and in mourning. They are a gift to the rest of us – a path forward to a more effective systemic response to IPV. It's time to lend Guelph's voice to the growing chorus of calls to enact the CKW Inquest's recommendations.

We have an opportunity here to take the initiative where the provincial government has failed to lead. We can leverage the strengths of our community plan to collaborate on effective strategies for prevention and survivor supports that turn rising rates of IPV around.

But we can only do that if we put the problem out in the open and name it for what it is. An epidemic. Thank-you.