

Health system preparedness to respond to domestic and sexualized violence

Results from a survey of 1,649 participants working in health services and policy in Nova Scotia, conducted from November 2023 to February 2024 in partnership with knowledge users across the health and anti-violence sectors as part of The Interprovincial Violence Against Women Project (The IPV Project)

Domestic and sexualized violence (the most common forms of violence against women, or VAW) have severe health consequences, making this violence a priority for health care and policy to prevent and address. We investigated knowledge and practices around domestic and sexualized violence among health professionals in Nova Scotia, which has the highest self-reported prevalence of intimate partner violence against women of all Canadian provinces. To our knowledge, this is the largest study of health system readiness to address domestic or sexualized violence in Canada to date.

Over 90% of participants worked in areas of high priority to addressing domestic and sexualized violence

Most commonly, mental health and addictions, primary healthcare, perinatal care, and emergency

Yet few reported that addressing this violence was part of their team's goals

Nearly 1 in 2 patient-facing participants reported seeing recent cases of domestic or sexualized violence in their work



Participants reported major gaps in knowledge and systems supports related to violence

Most reported no training on domestic or sexualized violence since March 2020, inadequate referral resources or knowledge of community resources, and no access to or collection of data on violence



Significant challenges to address related to sex and gender

Challenge engaging cis men to participate and nearly half the sample did not know female sex is the greatest risk factor for intimate partner homicide



Need for ongoing institutional support for large-scale, coordinated action to strengthen health system responses to violence in Nova Scotia, and across Canada

- Establish VAW and domestic and sexualized violence as a health system priority
- Develop and implement clear screening protocols appropriate to the clinical context and strong referral pathways to high-quality supportive services
- Provide appropriate time and resources
- Updated and continuing professional education on domestic and sexualized violence
- Interdisciplinary team collaboration



Source Yakubovich, A. R., Steele, B., Cullum, J., Johnson, C. P., Parker, L. N., Wilson, S. J., Green, R., Fashan, S., Burgess, S., & Rose, A. E. (2025). Health system preparedness to respond to domestic and sexualized violence: A cross-sectional survey in Nova Scotia, Canada. Preventive Medicine Reports, 103058.

