

APPENDIX A:

Synthesis of systems-level recommendations to strengthen the health and wellness of the gender-based violence workforce in Canada.

MARCH 2024



BUILDING SUPPORTS FOR THE
**GENDER-BASED VIOLENCE
WORKFORCE**



Ending
Violence
ASSOCIATION OF CANADA

Canada



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Synthesis of systems-level recommendations to strengthen the health and wellness of the gender-based violence workforce in Canada.

Gender-based violence (GBV), a crime that is ubiquitous across Canada, includes sexual violence, intimate partner violence, human trafficking, and other violent acts disproportionately (though not exclusively) experienced by women, transgender, and gender-diverse people. The provision of acute and longer-term recovery and other support services to survivors of GBV, as well prevention programming, interventions for perpetrators, and advocacy, policy, and research are provided by a diverse women-majority GBV workforce across the country (Wood et al., 2022).

GBV work is demanding, complex and often unsafe as workers are routinely exposed to trauma while carrying out their regular job duties. Such routine exposure to trauma and violence is like that of the first responder sector (e.g., emergency health care workers, police, corrections officers) (Rossiter et al., 2020). Unlike the first responder sector however, the GBV workforce lacks system-level supports such as access to adequate wages, health and pension benefits, reasonable workloads, and other supports necessary to lessen the harm they experience (Rossiter, et al., 2020). For GBV workers in rural, remote, and Indigenous communities where the stressors are even greater these supports are often even less available. The intersection of demanding and unsafe work with a lack of systemic supports, has contributed to an increasingly unhealthy and unwell workforce.

A growing number of research reports, advocacy tools and policy recommendations (e.g., grey literature documents) focused on improving the health and wellness of the GBV workforce are being produced from within the sector itself, as well as within other closely related sectors.³ However, this work has often been done in 'silos' due to the funding environment in Canada.⁴ The result is that the outcomes of this work and the expertise of the GBV sector on strengthening their struggling workforce remains diffuse and therefore largely inaccessible to both internal and external stakeholders (e.g., policymakers). It has further acted as a barrier to collective advocacy.

This synthesis uniquely brings together key recommendations for improving the wellness of the GBV sector extracted from Canadian documents that have been produced within the last five years.

The aim of this synthesis is to summarize and analyze these key recommendations as a means of providing easier accessibility to the work being done within the sector, and as a tool to assist with the development of collective advocacy and action.



³ We consider closely related sectors to include other women-majority workforces.

⁴ Silos occur because of the preponderance of short-term project funding rather than long-term core funding. Governments create 'competitions' between organizations for limited amounts of funding. The result is that organizations work on time-limited independent projects which can lead to duplication of work as well as a lack of coordinated action.

METHOD

Framework. This synthesis is primarily concerned with recommendations that can be enacted at the systems level, rather than those enacted at an organization or worker level. More traditional approaches to improving worker wellness have focused on recommendations that are enacted at the worker level, without acknowledging that what happens at the systems level creates the conditions in which organizational and worker level change either succeeds or fails.

For example, GBV workers are often told to engage in ‘self-care’ to mitigate the impacts of the trauma that they experience on the job. Often however, the act of self-care requires access to paid sick days or health benefits that cover the cost of counselling or therapy services; supports that many workers lack access to. In this example, increased funding for the sector at the systems level would provide organizations with the resources they need to provide workers with health benefits and paid sick days. This in turn would allow workers to access self-care supports to help mitigate the effects of trauma exposure.

Grey literature search. We first searched grey literature⁵ through Google using combinations of search terms related to the GBV workforce (e.g., gender-based violence work*⁶, intimate partner violence work*, sexual violence advocate), later expanding the search to include documents from other women-majority sectors in Canada including the ‘care economy’ (e.g., early childhood educators) and the non-profit sector more broadly. We limited the search to Canadian documents published within the last 5 years. Further, we consulted with an advisory committee comprised of experts in worker health and wellness from the anti-violence, non-profit, and academic sectors to ask for their recommendations on documents to include, as well ensure that we had not missed important materials.

Selection criteria. Documents were included in this synthesis if the central focus was on the GBV workforce or workforces in other sectors dominated by women in Canada, and if the document contained at least one recommendation on strengthening worker-wellness, was written in English, published within the last five years, and was available online.

Data abstraction. From the sample, we extracted the year the document was developed, province in which it was developed (if applicable), type of organization/workers (if applicable), and two sets of key recommendations – those specific to the GBV workforce, and those related to woman-majority workforces more generally. The data was placed into a data extraction sheet which was created for this project. In total, n=203 key recommendations were pulled from the documents included in the final sample. Of these n=203 recommendations, n=108 were included in the final analysis. Recommendations were included in the final analysis if they were able to be enacted at the systems level and they were specific to either the GBV or other women-majority workforces. They were excluded if they were not specific to the GBV or other women majority-workforces (e.g., recommendations calling for a higher minimum wage across all sectors) or if they were recommendations that were meant to be enacted at the organizational or individual level (e.g., create a wellness committee at your organization).

Data Analysis. We conducted a thematic analysis of n=108 recommendations. A thematic analysis in its simplest form is a way of looking for patterns or themes within a particular dataset through what is called an iterative process (e.g., reading and re-reading the recommendations) (Braun & Clarke, 2005). The dataset for this report comprised the key recommendations (n=108) that we collected from across the various documents produced within the GBV and woman-majority sectors related to strengthening the health and wellness of their workers.



Figure One: Levels of Recommendations

⁵ Grey literature are documents that produced outside of traditional publishers, such as reports, newsletters, advocacy tools etc.

⁶ The asterisk (*) at the end of each term is used as a means of broadening the search by finding words that start with the same letters.

FINDINGS

In the first stage of the thematic analysis, we organized the key recommendations into categories. Seven key categories of recommendations emerged from this process [See Table One]. They included recommendations related to funding, training, policy, advocacy, organizational support, equity & diversity, and research.⁷

| Categories | Example |
|-------------------------------|--|
| Funding | Funding should be adequate and include stable core funding for services that have been demonstrably effective in meeting the needs of women survivors of gender-based violence and that contribute to preventing gender-based violence, including interventions with perpetrators. |
| Training | Increased funding for training to provide workers with adequate knowledge and tools to work with populations with severe mental health and substance use concerns, as well as specific funding for mental health and addictions positions within shelters. |
| Policy | Encourage the development of social policy that recognizes all forms of gender-based violence as critical issues that require training and best practices across all sectors, so that anti-violence workers are not further harmed by the inadequate responses of other sectors (e.g., justice, health, housing) that respond to victims of crime and trauma, including gender-based violence. |
| Advocacy | Advocate for the inclusion of anti-violence workers in federal action and provincial and territorial initiatives to address posttraumatic and occupational stress injuries among public safety personnel. |
| Organizational Support | Provide benefits for part-time, contract, and relief or casual staff, not just full-time staff. |
| Equity & Diversity | Adopt decent work and anti-racism/anti-oppression practices to help provide respectful, fair jobs where a diverse workforce can thrive. |
| Research | Fund further research on work related to occupational injuries in the anti-violence sector to increase knowledge about the short-term and long-term impacts of doing this work, including health implications, and inform evidence-based policy that addresses these impacts. |

Table One

In the second stage of the thematic analysis, we defined and named what we called ‘areas for action’. Four areas for action arose out of this analysis [See Table 2]. Under each of these areas for action, we placed recommendations from across the categories associated with achieving successful outcomes. For example, to achieve success within a particular area of action might encompass implementing funding, policy, and research recommendations. The number of recommendations that fell under each of the areas for action were recorded by the authors.⁸ For the full list of recommendations by area of action, please see page 32.

⁷ Though some recommendations could be placed under two or more categories, the authors used their discretion to choose the category they thought best fit the recommendation.

⁸ Again, while some recommendations could be classified under more than one area for action, the authors used their discretion to categorize each recommendation under the area that best fit.

SUMMARY & CONCLUSIONS

Gender-based violence is a crime that results in devastating impacts for individuals, families, and communities. Vital recovery services for survivors, as well as violence prevention programming, and interventions for perpetrators, are provided by a diverse woman-majority GBV workforce (Wood et al., 2022). GBV work is demanding, complex, and often unsafe, leading to occupational stress and an erosion of worker-wellbeing. At the same time, the GBV sector has long dealt with significant under-resourcing relative to other first responders.

This synthesis brings together systems level recommendations for improving the wellness of the GBV workforce in Canada. Importantly, these recommendations were collected from documents created by and for the GBV, and other women-majority, sectors. From these documents, we compiled a final sample of 108 recommendations which were first placed into categories related to function (funding, training etc.). This was followed by organizing the recommendations across categories into four main areas for action.

| Areas for Action | |
|---|-------------|
| The GBV sector receives annualized funding in line with other public services, as well as wage, benefit, and pension parity with those conducting similar work in the public sector | N=10 |
| Organizations in the GBV sector have stable permanent funding at levels adequate to ensure a strong and healthy workforce. | N=35 |
| A comprehensive GBV workforce strategy is developed which addresses recruitment and retention of workers, fair wages, professional and leadership development, equity, and diversity initiatives etc. | N=47 |
| Occupational health and safety concerns for GBV workers including trauma exposure and lack of appropriate mental health supports are recognized, researched, and addressed by all levels of government. | N=16 |

Table Two

The need for improved economic security and prosperity for GBV workers as the means to improve health, safety, and wellness, rather than a reliance on more traditional occupational health and safety tools (e.g., worker recommendations such as self-care) emerged as the central theme of our analysis. This corroborates previous work that has found that economic security is a critical determinant of worker-wellbeing and a protective factor for occupational stress (Schrag et al., 2022). Two of the four areas of action were directly related to improved and sustainable long-term funding for the sector while such funding was a significant component of the other two. In each of the four areas of action, recommendations for adequate, stable, and permanent funding were inextricably linked with the ability to provide decent work opportunities for the GBV workforce.

There is an urgent need for systemic change to strengthen the wellness of GBV workers through improving their working conditions. All GBV workers require decent work. As Wendt et al. (2020) argue: “[the GBV] workforce needs to be recognised and championed as a priority, not simply a footnote to service delivery or client outcomes”. Strong GBV workers are imperative to creating the conditions in which strong survivors can recover and thrive, and the necessary work of intervention and prevention can be carried out with the ultimate goal of ending GBV.

Area for Action

The GBV sector receives annualized funding in line with other public services, as well as wage, benefit, and pension parity with those conducting similar work in the public sector.
(N=10)

Recommendations

- IPV services are core programming and should receive annualized funding like other public services.
- Ensure adequate wages, benefits, and pensions comparable to public service sector doing similar work.
- Treat the nonprofit sector as a valued partner, on par with the way that other industries of similar size are treated.
- Redesign funding agreements with an equal pay for equal work principle so funding for nonprofit services is on par with that of municipalities, school boards, and hospitals and there is a set wage floor.
- Phase in wage parity with annual instalments for similar groups of frontline workers across municipalities, hospitals, schools, and community settings to achieve equal pay for equal work in four years.
- Convene relevant Ministers (including the Minister of Justice and Attorney General, Minister of Labour, Minister of Health, Minister of Families, Children and Social Development, Minister of Public Safety and Emergency Preparedness, Minister for Women and Gender Equality) to communicate with provincial counterparts to consider labour code amendments to address the wellness of anti-violence workers and the inclusion of PTSD injury supports parallel to those provided to system-based first responders, including the classification of anti-violence workers' post-traumatic stress injuries as a workplace injury eligible for presumptive coverage.
- Produce compensation reports and analysis across the sector and position levels, equivalency across other sectors.
- Create a home in government for the nonprofit sector, so that it won't get left behind.
- Highlight discrepancies between prevention strategies and workplace supports for system-based first responders and community-based anti-violence workers.
- Advocate for the inclusion of anti-violence workers in federal action and provincial and territorial initiatives to address posttraumatic and occupational stress injuries among public safety personnel.

Organizations in the GBV sector have stable permanent funding at levels adequate to ensure a strong and healthy workforce.
(N=35)

- Priority should be placed on providing adequate and stable core funding to organizations in the gender-based violence advocacy and support sector.
- All levels of government work together to ensure continuous (not short-term or project-based) funding for Survivor Advocates with specialized training in VAW/GBV, including DV and IPV to represent and advance survivor interests through legal systems including criminal, family, immigration and workplace and administrative tribunals.
- Dedicated funding to support community-based VAW/GBV advocates and workers to share their expertise, including in the advocate case review processes, policy development, training for law enforcement and justice system workers, and other forms of consultation.
- Realign the approach to public funding provided to IPV service providers with a view to removing unnecessary reporting obligations with a focus on service.
- Draw on best practices in Canada and internationally, and adopt and implement improved, adequate, stable, and recurring funding.
- Service providers provide one annual report for all funders across government to account for the funds received, articulate results and highlight key challenges, learnings, and accomplishments.

Area for Action

Continued from previous page

Organizations in the GBV sector have stable permanent funding at levels adequate to ensure a strong and healthy workforce.

(N=35)

Recommendations

- Enhanced funding for IPV service providers, including shelters, sexual assault support centres, victim services, and counselling services, considering urban and rural realities.
- Federal, provincial, and territorial funding to end gender-based violence be commensurate with the scale of the problem.
- Funding should be adequate and include stable core funding for services that have been demonstrably effective in meeting the needs of women survivors of gender-based violence and that contribute to preventing gender-based violence, including interventions with perpetrators.
- Services should be funded over the long term and should not be discontinued until it has been demonstrated that the services are no longer required, or an equally effective alternative has been established.
- Priority should be placed on providing adequate and stable core funding to organizations in the gender-based violence advocacy and support sector.
- Funding community-based resources and services, particularly in communities where marginalized women are located.
- Stable core funding that reflects the complexity and scope of services and demand.
- Increase resources for shelters, hotlines, and holistic wraparound supports (including provision of childcare, travel subsidies, mental health supports, employment supports, and food) to meet heightened demand.
- Provide core, sustainable, and flexible funding to strengthen community-based care and support for GBV survivors.
- Make bold investments into critical social infrastructure.
- Core and sustainable funding, as opposed to program funding, must be provided to national and regional Indigenous women's and 2SLGBTQQIA people's organizations.
- Recognize the public health role of sexual assault centre work and stabilize funding at levels commensurate with growing demand while retaining autonomy and community governance.
- Increase funding for anti-racism and anti-oppression training.
- Provide core funding to women-serving agencies and equity-seeking organizations to support continued advances in gender equity in Canada moving forward.
- Financial sustainability through adequate, long-term, and renewable, and core funding across all funders and simplify and streamline administrative process.
- More core and unrestricted funding opportunities
- Funders should cover all core operating costs associated with project-based funding.
- Reduce the application and reporting burdens associated with funding opportunities.
- Provide more long-term funding opportunities and eliminate gaps in funding renewal processes.
- Allow for more flexibility in moving funding between cost categories.
- Through National Action Plan on Violence Against Women and Gender-Based Violence, include a timeline, financial transfers to the provinces and territories, and financial resources and standards sufficient to ensure national levels of service and protection for all women and decent work for the workforce.

Area for Action

Continued from previous page

Organizations in the GBV sector have stable permanent funding at levels adequate to ensure a strong and healthy workforce.
(N=35)

Recommendations

- All governments should provide adequate, stable, equitable, and ongoing funding for Indigenous-centred and community-based health and wellness services that are accessible and culturally appropriate, and meet the health and wellness needs of Indigenous women, girls, and 2SLGBTQQIA people.
- Funding must be provided to Indigenous and community-led organizations that deliver victim services and healing supports.
- The federal government should ensure the long-term, sustainable, and equitable funding of Inuit women's, youths', and 2SLGBTQQIA people's groups. Funding must meet the capacity needs and respect Inuit self-determination and must not be tied to the priorities and agenda of federal, provincial, or territorial governments.
- Priority for funding should be given to advocacy organizations that promote gender equality, provide culturally appropriate and trauma-informed services, and that provide accessible and inclusive services.
- Increase access to funding to train frontline workers.
- Access to stable funding with increases that reflect inflation and cost of living.
- Increased funding for training is needed to provide workers with adequate knowledge and tools to work with populations with severe mental health and substance use concerns, as well as specific funding for mental health and addictions positions within shelters.
- In the long-term organizations need access to stable funding, with increases that reflect inflation and cost of living.

A comprehensive GBV workforce strategy is developed which addresses recruitment and retention of workers, fair wages, professional and leadership development, equity, and diversity initiatives etc.
(N=47)

- Create a comprehensive workforce strategy that will address and support fair wages/benefits by designing and implementing provincial/territorial wage grids.
- Support the sector in building a comprehensive labour force strategy (as exists for skilled trades) that bridges all aspects of care, for a resilient nonprofit workforce. The strategy should include pathways into the sector, promotion of care work, and access to training.
- As an element of workforce strategies, establish programs to incentivize careers for front line workers including significant tuition subsidies and wage replacements. These programs need to be high-quality, affordable, expedited, and offer paid experiential learning opportunities.
- Design and implement professional development opportunities that provide a clear path for frontline workers that leads to career advancement and leadership roles.
- Adopt decent work and anti-racism/anti-oppression practices to help ensure respectful, fair jobs where our diverse workforce can thrive.
- Develop a workforce strategy for [GBV] workers that ensures adequate compensation and dignified working conditions.
- Workers have salaries that are commensurate to education, experience, and market rate.
- Transparent pay scales and grid.
- Recognize the long-term role of the broader gender-based violence service sector in service response and violence prevention with stable permanent funding that supports decent work in the sector.
- Pay transparency across position levels.
- Transparency in job advertisements regarding salary and benefits.

Area for Action

Continued from previous page

A comprehensive GBV workforce strategy is developed which addresses recruitment and retention of workers, fair wages, professional and leadership development, equity, and diversity initiatives etc.

(N=47)

Recommendations

- Recognize the specialized knowledge and expertise of IPV service providers involved in perpetrator intervention and support the development of workforce capacity within the sector by developing and providing competency-based training opportunities.
- Comprehensive health benefits for all GBV workers.
- Training to ensure that all staff have the needed qualifications. Organizations also need to be able to provide training for areas of emerging needs, like supporting those with mental health and addictions concerns.
- Invest in public awareness campaigns aimed at addressing stigma and misconceptions associated with [GBV] Workers and encourage more people to join the sector.
- Involve women's sector in decision making, by always including women-serving agencies and especially equity-seeking groups in decision making at government levels. This should include advisory group roles, and compensation for organizations that recognize the expertise of the sector.
- Introduce [campaigns] that educate people about gender stereotypes and norms around [GBV] work.
- Advocate for Pay Equity and Pay Transparency legislation so its applicable to the sector.
- Establish better data gathering and analysis on the women's sector's challenges, led and informed by the sector in partnership with Women and Gender Equality (WAGE) to better understand the challenges the sector faces and to develop solutions that are based on the realities of these organizations. These data and analysis would help inform funding and programming gaps.
- Encourage the development of social policy that recognizes all forms of gender-based violence as critical issues that require training and best practices across all sectors, so that anti-violence workers are not further harmed by the inadequate responses of other sectors (e.g., justice, health, housing) that respond to victims of crime and trauma, including gender-based violence.
- Ensure gender-based analysis plus within data collection on the nonprofit and charitable sector that helps quantify the structural gaps in funding and support for women's sector organizations.
- Educate funders on the importance of administrative and professional development budget lines and cost of living increases, market wages, increase wages.
- To address retention, government should provide additional funding to reduce reliance on short-term contracts, increase wages, and increase the number of full-time positions with benefits.
- Access to ongoing general and multi-sectoral training for workers.
- Funding for services that allows for the hiring and retention of skilled and experienced staff so that [organizations] are not required to rely on volunteers and fundraisers to provide services to survivors.
- Funders provide for an adequate number of staff positions, including administrative and management staff, living wage salaries for all staff, including paid sick days and access to extended benefits.
- Recognize the long-term role of the broader gender-based violence service sector in service response and violence prevention with stable permanent funding that supports decent work in the sector.
- Government funding that allows for decent work for the nonprofit sector's workforce and create funding terms that do not reinforce negative gendered and racialized stereotypes about the sector.

Area for Action

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A comprehensive GBV workforce strategy is developed which addresses recruitment and retention of workers, fair wages, professional and leadership development, equity, and diversity initiatives etc.

(N=47)

Recommendations

- Staff benefits written into grant applications and proposals.
- Funders allow organizations to use project-based funding for employee benefits (i.e. parental leave top-ups, pension contributions, and health benefits), professional development, and, at a minimum, a living wage.
- Designing and implementing operational supply-side funding model that will increase salaries and ensure they are fair wages.
- Adoption of decent work and anti-racism/anti-oppression practices to help respectful, fair jobs where diverse workforce can thrive.
- Eliminate racial and gender pay gaps.
- Implement anti-racism and anti-oppression practices through pay transparency.
- Fair pay and competitive wages. At a minimum, living wage to all employees and cost-of-living increases.
- Employee benefits (i.e. parental leave top-ups, pension contributions, and health benefits) and paid sick and vacation time to all employees.
- Permanent employment, rather than contract employment (where possible)
- Provision of professional development opportunities
- Equipping [workers] with skills, tools, and resources on what is fair and resources on what is fair compensation and how to negotiate compensation.
- Wage tops ups and committing to inflationary increases every year.
- Benefits including access to counseling and psychotherapy.
- Paid time-off for vacation and sick leave.
- Retirement savings through a pension or RRSP matching program (some provinces have plans for the non-profit sector).
- Professional development opportunities including a clear path to career advancement.
- Benefits for part-time, contract, and relief or casual staff, not just full-time staff.
- Mental health or wellness days for all staff.
- Return to more traditional methods and provide staff support for recruitment, more flexible with qualifications when hiring (e.g., either no longer requiring particular degrees or accept experience in lieu of education or certifications or target non-traditional groups for hiring former clients, practicum students).

Occupational health and safety concerns for GBV workers including trauma exposure and lack of appropriate mental health supports are recognized, researched, and addressed by all levels of government.

(N=16)

- Communicate to the relevant federal government departments and leadership (including the Minister of Justice and Attorney General, Minister of Public Safety and Emergency Preparedness, Minister of Labour, and Minister for Women and Gender Equality) the significant impacts of trauma exposure for the anti-violence workforce.
- Advocate to the Minister for Women and Gender Equality the critical need to acknowledge the lack of prevention strategies related to occupational stress injuries for community-based anti-violence workers as an urgent gender equality issue.
- Encourage the federal government to support the development and delivery of training for anti-violence workers, including core training for new workers so they are better prepared to undertake trauma work, and have a better understanding of vicarious trauma, secondary traumatic stress, and posttraumatic stress injuries, and strategies to address these negative outcomes of working with victims of crime and trauma.

Area for Action

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Occupational health and safety concerns for GBV workers including trauma exposure and lack of appropriate mental health supports are recognized, researched, and addressed by all levels of government.

(N=16)

Recommendations

- Recommend that the Minister of Labour and the Minister of Health support research and initiatives to address the impacts of trauma exposure on community-based anti-violence workers as a workplace health issue.
- Fund further research on work related to occupational injuries in the anti-violence sector to increase knowledge about the short-term and long-term impacts of doing this work, including health implications, and inform evidence-based policy that addresses these impacts.
- Highlight discrepancies between prevention strategies and workplace supports for system-based first responders and community-based anti-violence workers, and advocate for the inclusion of anti-violence workers in federal action and provincial and territorial initiatives to address posttraumatic and occupational stress injuries among public safety personnel.
- Funding to ensure mental health supports for IPV service providers, as well as timely access to trauma supports immediately following a traumatic event.
- Recommend that the Minister of Labour and the Minister of Health support research and initiatives to address the impacts of trauma exposure on community-based anti-violence workers as a workplace health issue.
- Funders recognize the impacts of providing care on the anti-violence work force (e.g., burn out, vicarious trauma).
- Expand immediate access to mental health and substance use health supports for staff who are currently struggling.
- Enhance organizational capacity building to implement the National Standard for Psychological Health and Safety in the workplace through the development of a resource hub and funding for pro-active mental health action plans.
- Access to flexible funding to support the mental health of the workforce as an element of workforce strategies.
- Increase funding for community-based mental health services and supports delivered to frontline workers, including health promotion and mental illness prevention programs and strategies, peer support, self-guided mental health skills building, mental health first aid, social and emotional learning.
- Fund research on better practices related to clinical supervision and incident debriefing at the agency level.
- Access to mental health supports and fair amount of health and wellness days.
- Develop a Federal-Provincial-Territorial committee to examine the provision of better supports and funding for anti-violence organizations to prevent vicarious trauma, secondary traumatic stress, and posttraumatic stress injuries among anti-violence workers, including addressing provincial/territorial differences in wages, benefits, pensions, and FTEs.