Preventing violence against women in the workplace

An evidence review: summary report

VicHealth

Suggested citation

Acknowledgements

Creating Healthy Workplaces **evidence review series**

VicHealth commissioned five international evidence reviews to build a body of evidence and knowledge about effective workplace health interventions. Both full and summary reports are available for each of the five evidence reviews:
• Preventing race-based discrimination and supporting cultural diversity in the workplace
• Preventing violence against women in the workplace
• Reducing alcohol-related harm in the workplace
• Reducing prolonged sitting in the workplace
• Reducing stress in the workplace
www.vichealth.vic.gov.au/workplace

Cover photo
Building equal and respectful relationships between men and women at work is critical to preventing violence against women. Photo: Taras Mohamed

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VicHealth is playing a leading role in building the Australian knowledge base on effective workplace health interventions with our *Creating Healthy Workplaces* evidence review series. We hope that this report, and the series as a whole, becomes a focus for new conversations about workplaces and the critical role they play in the health of society.

> Jerril Rechter, CEO, VicHealth

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Foreword

Workplaces are important settings for health action and improvement. VicHealth has identified five areas where workplaces can begin to make advances, not only in improving the health of employees and preventing future problems, but also in enhancing productivity and reducing absenteeism and staff turnover. These five areas – race-based discrimination and cultural diversity, violence against women, alcohol-related harm, prolonged sitting and stress – are the subjects of VicHealth's *Creating Healthy Workplaces* evidence review series.

This report deals with violence against women and is a summary of the full evidence review, *Preventing violence against women in the workplace (An evidence review: full report)*, available at www.vichealth.vic.gov.au/workplace. Violence against women is a major public health problem and a violation of human rights. The findings show that violence against women has major impacts on women's physical and mental health as well as their ability to participate in the workforce, imposing a significant cost to organisations in lost productivity and the community as a whole.

As it is such a new and emerging area of work, the review found limited evidence demonstrating what works within a workplace setting to prevent violence against women. Current workplace activity addressing violence against women focuses on responding to violence *after* it has occurred, rather than stopping it before it starts. However, the research shows that violence against women can be prevented and organisations have a critical role to play. In fact, organisations now have a positive duty to eliminate discrimination, sexual harassment and victimisation under the *Equal Opportunity Act 2010*.

Most working-age Australians spend around one-third of their waking lives at work and there are real opportunities to influence people's health in this setting. Although work itself has many recognised health benefits, some individuals may experience poorer health because of poor working conditions.

The health problems of individual staff reverberate throughout the workplace, affecting co-workers, managers and businesses as a whole – not to mention families and communities.

VicHealth is thrilled to be playing a leading role in building the Australian knowledge base on effective workplace health interventions with our *Creating Healthy Workplaces* evidence review series. We invite you to read and consider the findings summarised in this report. We hope that this report, and the *Creating Healthy Workplaces* series as a whole, becomes a focus for new conversations about workplaces and the critical role they play in the health of society. While this report is not a definitive review, it introduces some key issues that require consideration when designing effective workplace health programs.

And finally, we hope that individual workplaces and employers are inspired to address violence against women in all its forms by building equal and respectful relationships between women and men and putting practical interventions in place in their organisations. Around the world, successful enterprises have found that implementing measures that enhance the physical and mental health of employees results in benefits far greater than the costs.

Jerril Rechter
Chief Executive Officer
VicHealth

Executive summary

The evidence review, *Preventing violence against women in the workplace (An evidence review: full report)*, found that violence against women has severe consequences not only for women experiencing violence but also for workplaces and the broader economy.

The prevalence of violence against women remains unacceptably high in Australia and a significant number of women experience violence in their workplace from known colleagues and peers; over 60 per cent of women report experiencing some form of violence at work and 75 per cent report experiencing unwanted or unwelcome sexual behaviour at work.

Violence against women results in major health, social and economic consequences for individual women, their families, organisations and society. It has significant effects on women's physical and mental health as well as their material and financial stability. These can include premature death, physical injuries, depression, anxiety and social isolation. There are also considerable economic costs to individuals affected, employers and society. While the full cost of violence against women is unknown, intimate partner violence alone cost the Australian economy an estimated $13.6 billion during 2008–2009.

Violence against women is associated with a range of adverse impacts on organisations. Violence against women increases staff turnover, absenteeism and presenteeism. It impacts negatively on workplace productivity, employee health and wellbeing, staff morale and the organisation's image and reputation.

Women most at risk of experiencing violence, or who are particularly vulnerable to the effects of violence once it has occurred, include young women aged 18–24, pregnant women, and those in the period prior to and following relationship and marital separation. Within workplaces, women employed in sectors involving direct services to the public (e.g. health, retail and hospitality) are at a particularly high risk of client-initiated violence.

Violence against women is preventable and organisations have a critical role to play. In order to effectively prevent violence against women, workplace interventions should:

- address the underlying causes and conditions that lead to violence
- target the causes of violence at three levels: individual/relationship, community/organisational and societal
- integrate primary, secondary and tertiary approaches
- promote respectful relationships and gender equality
- ensure effective leadership
- plan well and ensure participation
- work in partnership
- be integrated into policies and procedures
- promote knowledge sharing
- promote sustainable activities
- train staff and raise awareness.

1. Introduction

The workplace has been identified as a priority setting for health action and improvement in VicHealth's *Strategy and Business Plan 2009–2013*. Late in 2009 VicHealth established a new program, **Creating Healthy Workplaces**, to enhance and sustain workplace health promotion research, policy and practice in Victoria by building the evidence base on effective workplace health interventions.

VicHealth's *Creating Healthy Workplaces* program focuses on five factors that influence health:

- race-based discrimination and cultural diversity
- violence against women
- alcohol-related harm
- prolonged sitting
- stress.

In recognition of the limited research currently available to guide the design and delivery of interventions, VicHealth commissioned five international reviews to build the evidence base on effective workplace health interventions in relation to these five determinants of health.

This report is a summary of the full evidence review, *Preventing violence against women in the workplace (An evidence review: full report)*, available at www.vichealth.vic.gov.au/workplace. The key objective of the evidence review was to identify workplace interventions that prevent violence against women.

The review focused on interventions that target change at the organisational and systems levels. An organisational and systems approach involves a whole of workplace focus that includes all stakeholders and brings about change in the workplace culture and infrastructure as well as policy, procedures and practices.

Organisational and systems levels interventions represent an effective and sustainable approach to creating supportive and healthy workplace environments. They target and seek to change the influences on, or root causes, of ill health within the workplace (e.g. the working conditions and culture). Organisational and systems-focused interventions result in benefits to both the workplace and individual employees. In contrast, individually focused interventions can be effective at the individual level but don't always have favourable impacts at the broader organisational level. VicHealth's focus on interventions that target change at the organisational and systems levels will build upon and complement existing workplace health practices and evidence, which largely focus on effecting change at the individual employee level.

The workplace as a health promotion environment

Workplaces are an important environment for health action and improvement. VicHealth identifies the workplace as a priority setting in its *Strategy and Business Plan 2009–2013* because:

- Employment and working conditions are important social determinants of health. There is strong evidence linking fair, safe and secure employment arrangements with good health. Conversely, poor job security and conditions are associated with poor health.

- Workplaces play a critical role in the health of society. The workplace directly influences the physical, mental, economic and social wellbeing of employees, and in turn the health of their families, communities and society. Effective workplace health promotion can therefore result in a multitude of beneficial outcomes across all levels.

- The workplace provides an ideal setting and infrastructure to support the promotion of health to a large audience. Approximately two-thirds of working-age Australians are in paid work – many spending up to a third of every day at work.

In 2010, a research team from the University of Warwick, the University of South Australia and La Trobe University was commissioned to conduct the evidence review and identify:

- the impacts (health, social and economic) of violence against women
- the benefits to the workplace of preventing violence against women
- population groups that are most at risk
- workplace interventions that prevent violence against women, including:
  - the major components of effective interventions
  - principles, frameworks and models to guide the design and delivery of interventions
  - tools and resources to support implementation
  - case studies.

This report is a summary of the full evidence review, *Preventing violence against women in the workplace (An evidence review: full report)*, available at www.vichealth.vic.gov.au/workplace

2. Violence against women: definitions and prevalence

Violence against women is defined by the United Nations as 'any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life'.

For the purposes of this summary report, **'violence against women'** refers to all forms of violence that are perpetrated against women, including intimate partner violence, sexual violence and workplace sexual harassment.

> Violence against women is any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women.

Intimate partner violence, sometimes referred to as domestic violence, family violence or relationship violence, refers to violence occurring between people who are, or were formerly, in an intimate relationship. It includes behaviour that in any way controls or dominates a current or former intimate partner, causing them to fear for their own, or another family member's, safety or wellbeing. It can include physical, sexual, psychological, emotional or economic abuse, and stalking. It includes behaviours that children hear, witness, or are exposed to the effects of. This form of violence against women is largely perpetrated by men in the context of a known and intimate relationship.

Sexual violence refers to any sexual activity that occurs without a person's consent or free agreement, including offences of rape and indecent assault.

Workplace sexual harassment refers to behaviours of an unwelcome nature which occur in a work context that could reasonably be expected to make a person feel offended, humiliated or intimidated. It includes behaviour that occurs in a physical workplace, as well as in situations associated with employment (for example at social functions, conferences or in off-site work locations). Workplace sexual harassment includes sexual hostility (explicitly sexual verbal and non-verbal behaviours) and sexist hostility (insulting verbal and non-verbal behaviours that are not sexual but are based on gender), unwanted sexual attention (unwelcome, offensive interest of a sexual nature), and sexual coercion (demands for sexual cooperation in return for job benefits). Examples of workplace sexual harassment include jokes of a sexually offensive nature, questions about a person's sex life, repeated requests for dates, displaying sexually offensive posters or explicit emails and text messages.

Additionally, gender equality, gender equity and gender-based discrimination are critical concepts.

Gender equality refers to equal treatment of women and men in society and in formal laws and policies, as well as equal access to resources and services within families, communities and society. Gender equality is also the belief that the rights, responsibilities and choices of men and women should not be restricted by limitations set by gender roles and stereotypes, and that the differences between men and women's behaviour, aspirations and needs are considered and valued equally.

Gender equity refers to fairness and justice in the distribution of rights, responsibilities and resources between women and men according to their respective needs. Achieving gender equity often requires gender-specific programs and policies to end existing inequalities.

Gender-based discrimination refers to behaviours and practices that result in avoidable and unfair inequalities in society on the basis of gender. These inequalities can include different or unequal access to power, resources or opportunities that in turn result in inequalities in health, social and/or economic status.

> More than 60 per cent of women report experiencing some form of violence at work and 75 per cent report experiencing unwanted or unwelcome sexual behaviour at work.

The prevalence of violence against women remains unacceptably high in Australia. One in three women experience physical violence and almost one in five experience sexual violence in their lifetime, most often from an intimate partner. A significant number of women experience violence in their workplace from known colleagues and peers; more than 60 per cent of women report experiencing some form of violence at work and 75 per cent report experiencing unwanted or unwelcome sexual behaviour at work. However, the actual prevalence may be higher because there is evidence that many women do not seek help or report violence when it occurs. In addition, the Australian Human Rights Commission found that around one in five women who said they had not experienced sexual harassment then went on to report having experienced behaviours that may in fact amount to sexual harassment, providing further evidence that the actual prevalence of violence against women is likely to be higher.

3. The impacts of violence against women

Violence against women is a major public health problem and a violation of human rights. Violence against women results in major health, social and economic consequences for individual women, their families, organisations and society. It has significant effects on women's physical and mental health as well as their material and financial stability. There are also considerable economic costs to individuals affected, employers and society.

The effects of intimate partner violence on the health of individual women are well substantiated in a large body of research; these effects are similar for women who experience other forms of violence such as workplace sexual harassment. They are summarised in Table 1. There is also growing evidence of the effects of violence against women on women's employment outcomes and on organisations.

Table 1: Violence against women health outcomes

Health outcome group	Specific health outcomes
Physical	• Premature death • Disability • Illness • Physical injuries • Harm to reproductive health • Sexually transmitted infections (STIs)
Mental	• Depression • Anxiety • Low self-esteem • Eating disorders • Social isolation • Sleep problems • Suicidal ideation and attempts
Behavioural	• Smoking • Substance abuse

Physical health

A range of physical health problems affect women who have experienced violence, including premature death, physical injuries, harm to reproductive health and sexually transmitted infections.

In Victoria, research indicates that intimate partner violence alone is the leading contributor to death, disability and illness in women aged 15–44 years, representing a greater burden of disease than many other risk factors, including high blood pressure and cholesterol, smoking, illicit drug use and obesity.

Mental health

The mental health effects of intimate partner violence include depression, anxiety, low self-esteem, eating disorders, social isolation, sleep problems and suicidal ideation and attempts.

Behavioural outcomes

Violence against women can harm health indirectly by fostering a range of unhealthy and addictive behaviours. Women who have experienced violence have higher rates of smoking and substance misuse.

Employment outcomes

Violence against women can result in women losing their job, having to leave employment, or other issues in the workplace. Women who have experienced violence may have difficulty maintaining work performance, which can negatively impact their employment stability and career advancement. This can have a major effect on women's material and financial stability.

Impacts on organisations

Violence against women is associated with a range of adverse impacts on organisations. Violence against women increases staff turnover, absenteeism (an employee's time away from work due to illness) and presenteeism (decreased on-the-job performance due to the presence of health conditions). It impacts negatively on workplace productivity, employee health and wellbeing, staff morale and the organisation's image and reputation.

In workplaces where there is sexual harassment, there are higher levels of team conflict and hostility. Employees observing sexual harassment directed at others have their own job satisfaction affected, and their productivity is disrupted when the situation affects them directly or indirectly.

There are also safety threats to employees when perpetrators' tactics involve direct confrontation or stalking, either physically or through the use of technologies. These behaviours also affect productivity, the organisational climate and employees' sense of wellbeing.

> Violence against women increases absenteeism, presenteeism and staff turnover, and reduces workplace productivity, job satisfaction and staff morale.

In Australia the full cost of violence against women has not been calculated. However, intimate partner violence alone cost the Australian economy an estimated $13.6 billion during 2008–2009. The costs are projected to increase to $15.6 billion by 2021–2022 unless appropriate action is taken.

One US study estimates that the cost of workplace sexual harassment is US$22,500 per employee who is harassed, a cost which is borne mostly by the employer. This includes the costs of legal fees and settlements incurred in court cases, lost productivity and health costs. This is a conservative estimate: it assumes that the woman has disclosed workplace sexual harassment and is pursuing the situation; however, there is evidence that many women do not seek help or report violence when it occurs.

4. The benefits of preventing violence against women

Violence against women can be prevented by addressing the underlying causes of the violence, and organisations have a critical role to play. The significant health impacts and economic costs provide a compelling argument for action to prevent violence against women.

The specific benefits for workplaces in preventing violence against women include:

- proactively meeting legal obligations
- decreased staff turnover
- reduced absenteeism
- reduced presenteeism
- increased productivity
- improved health and wellbeing of employees
- reduced operating costs
- improved staff morale, including increased job satisfaction, employee loyalty and staff retention
- a positive image and reputation.

Economic benefits of preventing violence against women

The economic benefits of preventing violence against women are considerable. While the full cost of violence against women is unknown, intimate partner violence alone cost the Australian economy an estimated $13.6 billion during 2008–2009. By 2021–2022, intimate partner violence is projected to cost the Australian economy $15.6 billion annually of which $456 million will be borne by employers.

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5. Population groups most at risk

Population groups that are most at risk of experiencing violence against women, or who are particularly vulnerable to the effects of violence once it has occurred, include:

- young women aged 18–24 years
- women during pregnancy
- women in the period prior to and following relationship and marital separation.

The risk of experiencing violence against women differs across workplace settings and working conditions.

Where women are over-represented in employment involving direct service to the public (e.g. health and community services, retail and hospitality), they have a particularly high risk of experiencing client-initiated violence.

Industries with high representation of young women and/or female staff in junior positions (e.g. retail and hospitality) may be at risk for higher levels of workplace sexual harassment (where often the harasser is in a position of power over the person they harass) and sexual violence (where young women aged 18–24 are at particular risk).

Precariously employed women are at greatly elevated risk of workplace sexual harassment compared to women employed in permanent full-time jobs.

Young women aged 18–24 years, pregnant women, and women in the period prior to and following relationship and marital separation are most at risk of experiencing violence.

Targeted approaches to preventing violence may be beneficial for the following groups:

- communities affected by social and economic disadvantage (including rural areas affected by economic downturn and drought)
- refugee and new-arrival communities
- established culturally and linguistically diverse communities experiencing economic marginalisation either prior to or following arrival
- Indigenous communities
- young men who have limited attachment to the education system or labour force
- young men in violence-supportive peer and organisational cultures (such as some sporting environments and military/quasi-military organisations)
- women with disabilities, their families and carers
- young women with poor attachment to the school system and other sources of adult support.

6. Best practice: workplace interventions

Review method

The authors conducted an evidence review to identify workplace interventions that prevent violence against women, including:

- the major components of effective interventions
- principles, frameworks and models to guide the design and delivery of interventions
- tools and resources to support implementation
- case studies.

The review focused on interventions that had a whole-of-organisation and systems approach.

The review undertook a broad search of Australian and international peer reviewed and other literature in the areas of:

- prevention of violence against women
- promotion of gender equality and gender equity in the workplace
- workplace health promotion
- occupational health and safety – violence prevention
- intimate partner violence and work
- workplace sexual harassment.

Because the workplace as an environment in which to prevent violence against women is a relatively new one (most workplace activity addressing violence against women focuses on responding to violence after it has occurred, rather than stopping it before it starts), the review identified a limited number of workplace interventions that prevent violence against women, none of which were substantively evaluated.

The review draws upon this limited evidence base alongside the significant research demonstrating the effectiveness of interventions to prevent violence against women in other environments, and in current workplace health promotion more generally, to outline the key features of best practice approaches to preventing violence against women in the workplace.

Visit www.vichealth.vic.gov.au/workplace for a copy of the full evidence review: *Preventing violence against women in the workplace (An evidence review: full report)*.

Key approaches of best practice interventions

Research clearly shows that violence against women can be prevented. The most effective way to prevent violence against women – to stop it before it starts – is to address the underlying causes and conditions that lead to violence. This approach is outlined in VicHealth's *Preventing Violence before It Occurs: a framework and background paper to guide the primary prevention of violence against women in Victoria*.

> Building equal and respectful relationships between men and women at work is critical to preventing violence against women.

Preventing violence against women interventions can address the causes of violence against women by focusing on three themes for action:

1. promoting equal and respectful relationships between men and women
2. promoting non-violent norms and reducing the effects of prior exposure to violence
3. improving access to resources and systems of support.

Best practice interventions to prevent violence against women target the causes of violence at three levels: individual/relationship, community/organisational and societal. Organisations have a critical role in preventing violence against women. Additionally, interventions should integrate primary, secondary and tertiary approaches.

- *Primary prevention interventions are proactive* and target the underlying causes of violence before it occurs.
- *Secondary prevention interventions are corrective* and target 'at-risk' populations.
- *Tertiary interventions are reactive* and respond to, and minimise the effects of, violence once it has occurred.

Seven key prevention approaches that have the potential to reduce women's experience of violence include:

- direct participation programs
- organisational and workforce development
- community strengthening
- communications and social marketing
- advocacy
- legislative and workplace policy reform
- research, monitoring and evaluation.

Key features of best practice interventions

Promote respectful relationships and gender equality

• Promote gender equality and equal and respectful relationships between men and women.

• Take a whole-of-organisation approach to promoting gender equality and positive, respectful organisational cultures.

Ensure effective leadership

• Involve senior staff and management.

• Identify one or more workplace champions who have the authority to make decisions.

Plan well and ensure participation

• Survey and audit the workplace to identify strengths and areas for development.

• Be inclusive: seek ideas from all employees.

• Develop an action plan.

• Seek advice from trade unions, violence prevention and gender-equality experts if required.

• Build evaluation and assessment into the intervention.

Work in partnership

• Consult and partner with local community, health and women's services to gain support if required.

• Partner with workplaces in Australia and overseas that are also involved in the prevention of violence against women to share and learn from experiences and build commitment.

Integrate into policies and procedures

• Develop and/or review workplace policies and procedures that address gender equity and violence against women to ensure that they include entitlements and practices that are supportive of female employees.

• Develop strategies to promote a more inclusive, respectful workplace that explicitly values staff experiences, such as a code of conduct, training on communication and decision making, and democratic conflict resolution processes.

Promote knowledge sharing

• Incorporate evaluation in the planning stages to build the evidence base about 'what works' in preventing violence against women in the workplace and allow the organisation to share what it has learned.

• Work collaboratively with researchers and other workplaces to develop and disseminate new evidence and knowledge about how the workplace environment – and the working conditions and culture – can effectively prevent violence against women.

Promote sustainable activities

• Consider the longer-term development of a regulatory or promotional scheme that supports and monitors workplace interventions that prevent violence against women.

• Use different approaches to sustainability that are specific and relevant to the organisational culture and size.

Train staff and raise awareness

• Train staff and raise awareness in the workplace about interventions and their purpose, especially when introducing a new intervention.

• Incorporate bystander education components where possible. A bystander is somebody who observes an act of violence, discrimination or other unacceptable or offensive behaviour. Bystander approaches encourage individuals not directly involved to identify, speak out about or seek to engage others in responding to specific incidents of violence and/or behaviours, attitudes, practices or policies that contribute to violence.

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