

**Moving Toward Safety:
Responding to Family Violence
In Aboriginal and Northern
Communities of Labrador**

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the Provincial Association Against
Family Violence**

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1. Context and methodology

The federal Family Violence Initiative defines family violence as follows:

Family violence is a concept which includes intra- and extra-familial abuse of children, youth, and older persons; and abuse of women by their male partners. It can take a number of forms in addition to physical assault, such as intimidation, mental or emotional abuse, sexual abuse, neglect, deprivation and financial exploitation. The term “family” refers to a grouping of individuals who are related by affection, kinship, dependency, or trust.

The economic and social costs of family violence in our communities are significant. Efforts to address the problem in this province have typically included establishment of shelters for abused women and their children. The first such facility, Transition House (now Iris Kirby House), opened in St. John’s in 1981. Twenty years later, the number of shelters for abused women and their children in the province has grown to seven. Still, services are limited for women and children living with abuse in the province. The fact that many must find refuge in the homes of private citizens or seek protection from local community agencies is one measure of the need. Nowhere is this lack of resources more obvious than in the northern and Aboriginal communities of Labrador. Unfortunately, Aboriginal women are particularly vulnerable to abuse in their intimate and familial relationships. It has been estimated that one in three Aboriginal women in Canada is abused by her partner.¹

Further, family violence is only one aspect of the ongoing socioeconomic crisis in most Aboriginal communities. Suicide, substance abuse, poverty, poor health, unemployment and family violence are all inseparable. For these reasons, it must be recognized that attempts to address the problem of family violence cannot be effective unless accompanied by change at the systemic level.² This must include recognition and support for the contributions of Aboriginal women, who are still underrepresented as leaders in their communities and governments. In *Aboriginal Women in Canada* (1998), Stout and Kipling note the importance of establishing governmental structures to address “the attitudes and conditions which have contributed to Aboriginal women’s marginalization from civil society”. They go on to recommend identifying a variety of ways to facilitate and support women’s integration, in order to cultivate and encourage “their decision-making capacity, in all relevant political structures from the level of the household to that of the international arena.”³

¹ Manitoba: Aboriginal Justice Implementation Commission, *Report of the Aboriginal Justice Inquiry of Manitoba*. “The abuse of women and children” in Chapter 13 (“Aboriginal Women”).

² British Columbia: Ministry of Women’s Equity (1992): *Is Anyone Listening? Report of the British Columbia Task Force on Family Violence*.

³ MD Stout and GD Kipling for Status of Women Council Canada (1998). *Aboriginal women in Canada: Strategic research directions for policy development*.

A. Objectives

The primary objectives of this report are:

- To describe current practices;
- To explore existing models of service delivery in similar communities in Canada and other parts of the world;
- To identify alternatives to traditional shelter services for Aboriginal families and northern communities in Labrador; and
- To recommend elements of a framework for establishment of effective preventive measures.

The north and south coasts of Labrador will, at times, be discussed separately, since their needs, cultures, levels of isolation, and support services are markedly different. However, both areas share several concerns of primary importance:

- A lack of safe emergency accommodation.
- A lack of transportation services for women and children attempting to leave abusive situations.
- The need for prompt, effective police response to ensure that the transition to safety is supported and that risk to families and support workers is minimized.

B. Methodology

The process included a comprehensive literature review, identification of informants, development of questionnaire and interview content, informant contact and information analysis. The report was commissioned in February of 2002 and all data collection including the literature review and informant interviews occurred between February 2002 and May 2002.

(i) Literature review

The literature review helped to identify feasible models of service delivery in other parts of Canada and the world. Sources included local libraries and resource centres, as well as the Internet. Internet research gave an added benefit in facilitating regular, affordable contact with groups and individuals in other provinces and countries. Sources appear in Appendix 1.

(ii) Informant identification and information gathering

Informant identification and questionnaire completion occurred in three phases.

Phase I: Shelters / Transition houses
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Target: Canadian Aboriginal / northern shelter services and provincial transition house associations, chosen for similarity in location (relative isolation) and population size (less than 1500) to our own isolated northern communities.

The initial source of this contact information was the most recent (2000) directory of transition houses and shelters from the National Clearinghouse on Family Violence.⁴ These contacts frequently led to identification of additional, unlisted services and facilities, and were also helpful in identifying which of the other listed services met the study criteria. The formal questionnaire was administered to those meeting the criteria, as well as to a number of other agencies which were of particular interest for reasons ranging from especially high levels of community acceptance to unique programming. The informant list appears in Appendix 3.

Procedure: The Phase I questionnaire [see Appendix 2] includes specific questions about service delivery, budgets, funding sources, program effectiveness and informant's knowledge of other community-based, non-residential services addressing family violence in a particular community or province. Administrative staff were questioned whenever possible to ensure accurate financial information.

Findings: While most respondents were very helpful in describing their services and structure, it proved much more difficult to obtain financial information. "Best practices" were identified in a number of interviews, and were useful elements in development of a model for northern and southern Labrador. However, few of these "best practices" emerged from the smaller communities, most of which shared concerns about inadequacies in transportation, policing, funding, and safety (both shelter staff and individuals fleeing abuse). Overall, Phase I demonstrated clearly that, despite the considerable work already done in Canada to improve services to families who live with violence, services remain inadequate across the country, especially in areas with small population size.

Phase II: Provincial context and infrastructure

Phase II was undertaken in an effort to clarify the situation further by investigating related issues, including:

- Inuit self-government;
- Federal and provincial spending in the selected communities;
- The role of Newfoundland and Labrador Housing Corporation on the coast of Labrador;
- The network of community service infrastructure;
- The role and views of the several government departments and Non-Governmental Organizations (NGOs) directly concerned with family violence.

⁴ Health Canada, National Clearinghouse on Family Violence (2000). *Transition Houses and Shelters for Abused Women in Canada*.

The main goal was to develop a broad picture of service delivery in the areas of health, policing, shelter services and community-based systems in general. To this end, contact was made with reference individuals in the province who agreed to be part of a multisectoral “advisory group” for this study. Most were contacted by telephone, while others were interviewed in person. They included representatives of:

- Provincial Coordinating Committee, Violence Prevention Initiative [VPI]
- Labrador Regional Coordinating Committee, VPI
- Northern Regional Coordinating Committee, VPI
- Victim Services, Department of Justice
- Community and Aboriginal Policing
- Labrador and Aboriginal Affairs
- Newfoundland and Labrador Advisory Council on the Status of Women
- Health Labrador Corporation
- Newfoundland and Labrador Housing Corporation
- Mokami Status of Women
- New Generation Guardians
- Tongamiut Inuit Annait
-

Phase III: National and international women’s organizations

In this phase, contact was made with national and international women’s organizations whose constituency includes communities and populations similar in size and isolation to those of Labrador. This process helped to identify global best practices, as well as to glean further references for the literature review. Relevant contacts were made with agencies in Australia, the US (Alaska), and Russia.

(iii) Definitions

For the purposes of this report, the term *shelter* is used broadly to refer to any residential facility for abused women and their dependent children. The shaded box shows the various types of shelters as defined in Statistics Canada’s Transition Home Survey (2000).⁵

The term *Aboriginal* is used here to refer to members of the Innu Nation, Labrador Inuit Association and Labrador Métis Nation.

Types of shelters

Transition home - First-stage emergency housing. Short- or moderate-term (1 day to 11 weeks).

Second-stage housing - Long-term (3-12 months) secure housing with support and referral services designed to assist women while they search for permanent housing.

Safe home network - A network of private homes in rural or remote areas where there is no full-fledged operating shelter. It offers subsidiary very short-term (1-3 days) emergency housing.

Women’s emergency centre / shelter - Short-term (1-21 days) respite (temporary relief) for women and their dependent children.

Emergency shelter - Such shelters provide short-term (1-3 days) respite for anyone who needs it – for example, women fleeing abusive situations or persons temporarily left homeless after an eviction. These facilities may provide accommodation for both sexes. However, they typically offer few services other than basic room and board.

Family Resource Centre - Established by an Ontario government initiative, these centres serve a wide range of clients, providing accommodations, extensive information resources and referrals as needed.

Other - All other facilities / shelters not otherwise classified. This category may include Rural Family Violence Prevention Centres in Alberta, Interim Housing in Manitoba, and other types of emergency shelters. These services may not be exclusive to abused women.

⁵ D. Locke and R. Code for Statistics Canada (2000). *Transition Home Survey 1999-2000: National Fact Sheet*.

These and other terms and abbreviations can be found in the Glossary (Appendix 4).

C. Exploring the problem

(i) The prevalence of violence in Canadian Aboriginal and rural communities

Research shows that the incidence of violence is higher in rural and isolated areas than in urban centres.⁶ In Canada, some 30% of all homicides occur in rural settings⁷. MacLeod (1987) cites research indicating that a disproportionate number of the users of Canadian women's shelters are from rural areas.⁸

Geographical isolation in rural communities is a factor influencing the likelihood of assault, since some aspects of rural life may make women more vulnerable to domestic violence⁹. The availability of firearms in rural areas also appears to increase risk. A 1992 study prepared for the Department of Justice presents startling statistics indicating not only that domestic homicides involving firearms occur more frequently in rural areas, but that rural residents account for one-half of the victims of such homicides, wherever they occur.¹⁰

The common myths of rural "safety" and self-sufficiency help determine how violence against women is regarded, and hence what options are available for women who face it.¹¹ People in rural areas are often resistant to the idea that family violence exists among them. They see their communities as "safe", free from the dangers and social problems that afflict urban centres. Affected by these attitudes, an abused woman will typically internalize blame, feeling that the abuse must be her fault. In small communities with limited resources, great value is placed on self-sufficiency and there may be a stigma associated with seeking help. This stigma may be strengthened in areas where counselling services for families living with abuse are closely associated with community-based mental health services¹².

⁶ Centre for Rural Studies and Enrichment, St. Peter's College, Saskatchewan (2000). *Domestic violence and the experiences of rural women in east central Saskatchewan*; Manitoba Action Committee on the Status of Women (1985). *Concerns of farm women*; LaPrairie (1985). *Family Violence in Rural, Northern Communities: A proposal for Research and Program Development for the research division, Programs Branch, Solicitor General Canada*

⁷ C. Brookbank for federal Department of Justice (1995). *Spouse Abuse in Rural Communities: A Review of the Literature*.

⁸ Linda MacLeod (1987), *Battered but Not Beaten*. Ottawa: Canadian Advisory council on the Status of Women.

⁹ C. Nolan, National Committee on Violence Against Women [Australia] (1992). *Domestic violence in country areas of Australia: Discussion and resource kit for use in rural and Aboriginal communities*.

¹⁰ Dansys Consultants Inc. (1992), *Domestic Homicides Involving the Use of Firearms* for Department of Justice -- Title needed

¹¹ C. Hastings and K. MacLean (1999), *Implementing the NSW strategy to reduce violence against women in a rural context*. Address to Australian Association of Social Workers Conference, 1999.

¹² Centre for Rural Studies and Enrichment, St. Peter's College, Saskatchewan (2000). *Domestic violence and the experiences of rural women in east central Saskatchewan*.

It has been estimated that between 75% and 90% of women in some northern Aboriginal communities are abused.¹³ In 1991 The Aboriginal Justice Inquiry (AJI) of Manitoba reported that one in three Aboriginal women experience spousal abuse. In an AJI survey of Aboriginal women, 53% of respondents said that they had been physically abused; of those, 74% had not sought help¹⁴. A 1989 study by the Ontario Native Women's Association reported that 8 out of 10 Aboriginal women were abused. While this study focussed on Northern Ontario, it is statistically representative of other Aboriginal communities across the country.¹⁵ Meanwhile, a study of family violence in Aboriginal communities in British Columbia found that 86% of respondents experienced or witnessed family violence, and that women and children were most often the victims.¹⁶

The prevalence of family violence is often attributed to the effects of colonization – that process of territorial encroachment and subsequent subjugation of Aboriginal peoples which has been ongoing since the arrival of Europeans on this continent. From the Aboriginal perspective, colonization has meant not only loss of lands and resources, but also loss of self-direction and the severe disturbance of cultural ways and values, fostered and enforced by institutions such as the residential school system¹⁷. This situation has given rise to an all-too-familiar “community syndrome” featuring poverty, substandard living conditions, substance abuse, isolation and intergenerational abuse – taken together, a scenario in which family violence thrives.¹⁸

(ii) “Companion” studies

Three key studies relevant to family violence in Newfoundland and Labrador have provided some of the groundwork and direction used here, and should be regarded as companion studies to this report.

<h4>Labrador Inuit Health Commission (1992)</h4>
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Following extensive interviews with key informants regarding the need for family violence services and programs, this study assigned top priority to the following requirements:

1. Adequate shelter for abused women and their children.
2. Whole-family counselling and community awareness services, offered by well-trained

¹³ C. Dumont-Smith and P. Sioui Labelle (1991), *National Family Violence Abuse Study/Evaluation*. Ottawa: Indian and Inuit Nurses of Canada.

¹⁴ Manitoba Aboriginal Justice Inquiry (1999) Vol. 1, 483

¹⁵ Emma D. LaRocque (1994), "Violence in Aboriginal Communities." In *Royal Commission on Aboriginal Peoples, The Path to Healing*. Ottawa: Canada Communications Group, 1994.

¹⁶ Robert Kiyoshk for Helping Spirit Lodge Society, Vancouver (1990). *Beyond Violence*.

¹⁷ Emma D. LaRocque *op. cit.* (1994)

¹⁸ Nova Scotia: Department of Community Services (2002). *Fact Sheet 10: Family Violence in Aboriginal Communities*.

individuals.

3. Places of refuge for children of all ages, offering shelter, counselling and other support services.
4. RCMP stations in each community.
5. Development of a public awareness strategy.

The study outlined a four-year plan to respond to these priorities and to develop a framework for implementation.

Victim Services Branch, Newfoundland and Labrador Department of Justice (1996)

This report, *Providing Safe Housing to Women and Their Children: An Exploration of the Safehouse Model in Newfoundland and Labrador*, analyzes the present shelter system and provides a thorough review of the challenges facing abused women and children in rural areas. It concludes that, in order to be effective, safehouses must exist as part of a continuum of services. The value of networking with other anti-violence initiatives in the province is also stressed.

Tongamiut Inuit Annait [Inuit women of the Torngat Mountains] (1998)

As an extension to the 1996 Victim Services Branch report, this group representing Inuit women in Northern Labrador was commissioned to prepare a document which focussed on the need for safe houses in their communities. The report, *Safehouses in Northern Labrador*, provides profiles of each community to give a clear picture of the present situation and the gaps in service that exist.

D. The Labrador reality

Several elements of the Labrador setting are relevant to the search for solutions to family violence. These include the demographics of the area, changing sociopolitical organization, and the impact of isolation. An inventory of existing health, policing, shelter and other services relevant to family violence completes the contextual picture and highlights opportunities.

(i) Demographic diversity

Primarily, the Aboriginal population of Labrador comprises the Innu, Inuit and Métis peoples.

Northern Labrador

There are approximately 2100 Innu, represented by the Innu Nation, living in the communities of Davis Inlet and Sheshatshiu. Based on 2001 Census data, the communities of Rigolet, Makkovik, Hopedale, Nain and Postville are home to some 2600 members of the Labrador Inuit Association (LIA). (Many other LIA members live outside the north coast, primarily in Happy Valley-Goose Bay and Northwest River).

Southern Labrador

The Labrador Metis Nation claims 5000 registered members within Labrador, of which many are resident in Happy Valley-Goose Bay and Northwest River. This study examines the small communities along the south coast, from Cartwright to Forteau.

(ii) Changing sociopolitical organization

A land Claim Agreement in Principle (AIP) was ratified on 25 June 2001 between the Labrador Inuit Association (LIA), the Province, and Canada, signalling a major move toward Inuit self-government. Self-government would allow the Inuit to legislate their own programs and services in education, health, child and family services and social assistance. Negotiations are under way with a target of Fall 2002 for completion of the final agreement and Spring 2003 for ratification. While these dates are not far distant, any agreement would be followed by a longer process of devolution.

There are also significant changes in store for the Innu, who will soon be registered under the federal Indian Act. Under a federal-provincial agreement, Innu reserves will be created at Sheshatshiu (6.72 km²) and Natuashish (Sango Bay) (32.25 km²). Reserve creation at Natuashish is scheduled for December 2002; the target for reserve creation at Sheshatshiu is August 2003. The Government of Canada will assume funding responsibility for education, income support and child and family services on the reserves.

(iii) The double bind: Isolation and lack of privacy

Women who live in isolated areas in Newfoundland and Labrador are living with danger. While they are particularly vulnerable to family violence, their needs often go unaddressed because of the limited financial resources allocated to infrastructure in areas with dwindling populations.

Northern communities are faced with the obvious problem of geographical isolation. This is typically exacerbated by extreme weather conditions in the winter months. Distance is recognized as a major factor in reducing the effectiveness of law enforcement in rural areas.¹⁹ Isolation may also leave a woman and her children hours from the nearest shelter, with limited or no means of getting there. In small communities, there may be no road connections; flights may be sporadic; taxi services rarely exist.

Even if taxi service is available, a woman in a small northern community typically must call the driver at home, identifying herself and her destination and hence sacrificing anonymity and privacy. This lack of privacy, coupled with the scarcity of safe shelter and the strong family ties common in these communities, often serve not only to put women in dangerous situations but also to keep them there. Privacy is difficult to maintain in a small community, and the social stigma that can result from a lack of anonymity may actually mean a woman stays in an abusive relationship. Fear of further humiliation through community gossip and fear of ostracism or intimidation from supporters of the perpetrator may all be at work. Often, a victim is confronted with disbelief, anger and family denial or betrayal. Secrecy is expected and enforced²⁰.

In summary, the barriers facing rural women who need access to services have received much less attention than the plight of abused women in urban settings. Primarily, this reflects the low social profile of rural / Aboriginal women as a group, and low levels of public awareness about their lives and problems. Typically, they are absent from national, provincial or municipal forums, from research pools, from shelter and police statistical records. This situation is exacerbated by the minimization and denial so common in tightly knit communities – and elsewhere – with respect to family violence.

An Aboriginal woman fleeing to safety outside her own community may also face cultural misunderstanding and even racism. Shelters in non-Aboriginal communities may not have Aboriginal staff, and lack of cultural sensitivity can nullify well-meant attempts at intervention.

¹⁹ Emma D. LaRocque *op. cit.* (1994)

²⁰ Emma D. LaRocque *op. cit.* (1994)

(iv) Inventory of services in coastal Labrador**Accessibility / travel services*****North coast***

The north coast communities of Makkovik, Nain, Davis Inlet, Hopedale, Postville and Rigolet are all fly-in-only communities. North coast communities are serviced by ferries in the summer.

South coast

The Trans-Labrador Highway will be completed from the Straits north to Cartwright in the Fall of 2002, and funding has been committed to link Pinsent's Arm to the highway in 2003. This will leave Black Tickle, Norman Bay and William's Harbour as the only communities on the south coast not linked to the highway. Summer ferry services to these communities will be maintained.

Health services***North coast***

Aboriginal people on the north coast of Labrador are served variously by several distinct health care systems: Health Labrador Corporation (which serves the north coast, Cartwright, Black Tickle, central and western Labrador), Labrador Inuit Health Commission, Mushuau Innu Health Commission and Sheshatshiu Innu Health Commission. The First Nations and Inuit Health Branch (FNIHB) of Health Canada funds the last three of these. In addition, Health Canada has established a Labrador Health Secretariat in Happy Valley-Goose Bay as a response to the health crisis in the Innu communities in Labrador. This Secretariat will employ approximately 20 staff with an annual budget of \$2.2M for the next three years.

While the respective groups offer a broad range of services, and a single community may receive services from more than one system, multiplicity is not always an advantage when it comes to family violence. Efforts to address this serious problem are typically limited to sporadic public awareness sessions, along with piecemeal crisis intervention by public health nurses, addictions counsellors and mental health workers who, in the course of their regular duties, come into contact with families needing help.

A closer look at each of the four Labrador-based health care systems shows significant financial outlay together with obvious overlap in some areas:

- ***Health Labrador Corporation [HLC]***, a provincial body, provides a comprehensive range of services to twelve communities, including all those on the northern coast as well as Cartwright and Black Tickle in southern Labrador. Aside from acute (hospital) care, long-

term care and emergency medavac services, HLC also offers mental health, addictions, child / youth and family services, along with community nursing and child care. HLC employs 154 full-time staff with a 2001/2002 budget of \$35.1 million.

- The ***Mushuau Innu Health Commission [MIHC]*** serves the Innu of Davis Inlet. It is funded primarily by Health Canada’s FNIHB. Services are offered in the areas of addictions, public health nursing, diabetes education, mental health, family services and the distribution of non-insured health benefits. The 2001-2002 budget is \$4.6 million, of which about \$2.5 million represents one-time costs. The MIHC employs 12 full-time staff.
- The ***Sheshatshui Innu Health Commission [SIHC]*** provides a variety of health care services to the Innu of Sheshatshiu. Like the MIHC, it is funded primarily by the FNIHB. It too provides services in the areas of mental health, addictions, family services, diabetes care, public health nursing and NIHB benefits. The 2001-2002 budget for the SIHC is \$1.9 million. There are approximately 25 full of part time employees of the SIHC including those with the Family Treatment Program and the Labrador Innu Drug and Alcohol Abuse Program.
- The ***Labrador Inuit Health Commission [LIHC]*** is also funded by the FNIHB. Its primary responsibility is to oversee health care services to the Inuit in Labrador, including the isolated communities of Nain, Hopedale, Makkovik, Postville and Rigolet. LIHC services include but are not limited to public health nursing, home support, addiction services, mental health and family services. The LIHC has an annual budget of more than \$12 million and employs more than 160 people.

Clearly, the First Nations and Inuit Health Branch is already involved in service to many Labrador coastal communities. Further, its priorities (see shaded box) are in keeping with the move toward a collaborative approach in responding to family violence. The FNIHB should be a valuable partner in any proposed community-based initiatives to address family violence in Labrador’s

First Nations and Inuit Health Branch PRIORITIES
<ul style="list-style-type: none"> • To manage the cost-effective delivery of health services within the fiscal limits of the First Nations and Inuit health envelope. • To facilitate First Nations and Inuit in developing the capacity (infrastructure and processes) to foster and maintain healthy communities. • To support action on health status inequalities affecting First Nations and Inuit communities, according to their identified priorities.
<p>-- FNIHB Atlantic Region Orientation Manual July 2001</p>

Aboriginal communities.

South coast

Labrador's south coast communities are divided between two health jurisdictions, and are serviced by two different Regional Coordinating Committees of the province's Violence Prevention Initiative. All but two communities are part of the Grenfell Regional Health Services, and are serviced by the Grenfell Regional Anti-Violence Team based in St. Anthony.

Cartwright and Black Tickle are served by Health Labrador, and their Regional Coordinating Committee is *Labradorians for Peaceful Communities*, based in Happy Valley-Goose Bay.

Police services

Because of the life threatening nature of domestic violence, police are a critical point of contact for an abused woman.²¹ Police presence has increased in Labrador since the report *Safehouses in Northern Labrador* was released. However, it is still variable. A small number of communities on both the north and south coasts remain in need of full time policing. These communities presently rely on police from other areas who must drive or fly in when needed.

Of the communities that do have policing, most also have auxiliary or community constables. According to information supplied by NWT Justice, a community constable is a municipal bylaw enforcement officer. He/she receives special training and is then appointed as a "Supernumerary Special Constable" (Peace Officer) under the *RCMP Act*. This arrangement not only provides valuable assistance to regular police, but also allows residents to take an active part in making their community a safe place to live.

North coast

At the time *Safehouses in Northern Labrador* was published, the northern Labrador communities of Rigolet, Makkovik and Postville were dependent on a fly-in-only police service, with a minimum response time of two hours. At present, Postville is the only community in northern Labrador that does not have a regular RCMP officer stationed in the community. Postville is serviced by the police in Makkovik.

South coast

While police services do exist, many smaller communities are still serviced by police detachments based in neighbouring communities. Police stationed in Cartwright, Mary's Harbour and Forteau are responsible for more than nine other communities that are connected by road. Black Tickle, although a fly-in-only community, must rely on service from officers based in Cartwright. William's Harbour and Norman Bay are not connected to the highway, while Pinsent's Arm should be connected in 2003.

²¹ C. Brookbank for federal Department of Justice (1995), *op. cit.*

Shelter services

Shelters operating in Labrador include:

- ***Sheshatshiu: Nukum Munik Shelter.*** This shelter provides 24-hour service. It is funded by Indian and Northern Affairs Canada [INAC] and the Canadian Mortgage and Housing Corporation [CMHC], and is sponsored by the Sheshatshiu Innu Band Council.
- ***Nain: Nain Safe House.*** In 1996 the obvious need for a safe place for women and children living with abuse motivated a group of women to work toward securing a building for a shelter from the Health Labrador Corporation. There was an absence of coordination on a number of levels as the safe house was established without strong commitments of proper funding and support from federal or provincial sources.

This 24-hour shelter service has experienced a markedly high level of use for a community of only 1159 people (2001 Census). In its first year of operation, the shelter housed 130 women and children; all but three were first-time users of the service. In the first two quarters of the 2001/2002 fiscal year the shelter was occupied for 115 days.

Labrador City: Labrador West Family Crisis Shelter. This shelter provides a 24-hour crisis line and accommodation for two families for up to six weeks in the Labrador West area including the communities of Churchill Falls, Wabush and Labrador City. It is also available to women and children from other parts of Labrador. The shelter is in the process of rebuilding in order to increase its capacity and level of service.

Happy Valley-Goose Bay: Libra House. Libra House has been used by women and children from all coastal areas of Labrador.

A shelter in Hopedale was the first of its kind on the north coast, opening in 1995 in a rental unit and moving to a new NLHC-built unit the following year. It has since closed for lack of operating funds. An absence of preliminary commitments for yearly operating costs and the lack of coordination on a community and systemic level have led to its closure.

South coast

There is no shelter service for women in southern Labrador. Nor is there one in St. Anthony, which is the chief base for the area's health, legal and support services. While informants concurred on the need for emergency shelter, they also stressed the equally pressing need for increased community education.

The work of women's groups in Labrador communities

The literature makes it increasingly clear that services for abused women and their children can be effective only when skilled, experienced, motivated women are provided with the resources they need to take leadership of programs. This point is stressed not only by the women's groups in this province, but also by shelter coordinators and Transition House Associations across the country.

For some time, groups like *Tongamiut Inuit Annait* in northern Labrador and the *Mokami Status of Women* in Happy Valley-Goose Bay have struggled to secure funds to do the most basic work to respond to women's needs in Labrador. For a variety of reasons, they have had little support. Newly formed groups like the *Next Generation Guardians* in Davis Inlet are already facing similar challenges.

Informants were unable to identify a women's group currently active in such work in southern Labrador.

Housing

Affordable, safe housing is a basic need for women attempting to move away from abusive situations. The Newfoundland and Labrador Housing Corporation [NLHC] offers non-profit housing throughout the province. In Labrador, there are a total of 298 non-profit housing units, most with two to four bedrooms. Tenants are selected based on need and rent is geared to income on a sliding scale of 25% - 30%. Tenants also receive a heat subsidy from year to year. Of the 298 units, 104 are located in Labrador City, 96 in Happy Valley-Goose Bay, 63 in northern coastal communities, and 35 in southern coastal communities.

NLHC has developed a *Victims of Family Violence* policy which helps women and children who must flee abusive homes to find affordable places to live. Victims are given special priority in order to expedite the application and transfer request processes. In order to be eligible, a family must have a history of recurring abuse or have experienced a single incident of a nature that indicates the presence of serious danger. The family must be either still living in the abusive home situation, taking temporary refuge with friends or relatives, or living in an emergency / transitional facility.

Average annual referrals under this policy are considered low with two in Labrador West, three in Happy Valley-Goose Bay, five in northern Labrador and zero on the south coast.

Although the NLHC *Victims of Family Violence* policy is used frequently in the larger centres of the province, it is rarely accessed in Labrador.

NLHC also delivers the *Provincial Home Repair Program* to all of Labrador in the average amount of \$250,000 grant funding per year, which serves approximately 400 clients per year. This

program provides grant (up to \$6,500) and loan (up to \$13,500) funding to low-income homeowners to address emergency and critical repair needs.

The *Northern Coastal Labrador Strategic Initiative*, announced in March 2000, is a three-year program with a total financial commitment of \$23 million, of which \$7.4 million is to fund new housing as well as home renovations and repairs in Nain, Hopedale, Rigolet, Makkovik and Postville. This program is coordinated by the NLHC Happy Valley-Goose Bay office, with support from an advisory board that includes community representatives and officials from Municipal and Provincial Affairs, Works and Service and Transportation. In 2000-2001 this initiative provided \$2,447,939 to build 18 new homes, and \$867,611 to repair an additional 50 houses. In 2001-2002 expenditures rose to \$2,791,331 for 25 new homes and \$543,761 for repairs of 34 houses. Commitments for spending in 2002-2003 have not yet been made.

NLHC is also responsible for the *CMHC Shelter Enhancement Program* in the province (see Appendix 5). Its resources and policies would make it a valuable partner in any initiatives that may be recommended to ensure safe alternatives, to improve existing shelters in Labrador and to supply and maintain units for multi-service facilities.

Besides NLHC and CMHC, Torngat Regional Housing Association is a provider of public housing on the north coast, while Melville Native Housing Association is a provider in the Happy Valley-Goose Bay area.

Department of Justice – Victim Services Branch

The Victim Services [VS] Branch offers a range of services to adult victims of crime involved in the criminal justice system. At present there are ten Regional Offices in Newfoundland and Labrador. Labrador has a VS Regional Coordinator in Happy Valley-Goose Bay and a full time VS worker in Nain.

In an effort to address the problem of geographic isolation, the Branch has also implemented a program to train and utilize VS assistants. Assistants are trained to help with preparation of victim impact statements, accompany victims to court, and provide them with information, resource material and referrals as needed to VS Coordinators. Although their role is limited, the assistant program allows for increased community participation and enlistment of local resources. There are currently six VS assistants in Labrador. There are two in southern Labrador (one in Cartwright and the other in Port Hope Simpson). Labrador City-Wabush and Sheshatshiu have one and there are two in Davis Inlet. The VS Regional Coordinator in Happy Valley-Goose Bay provides these assistants with direction, consultation and supervision and retains overall responsibility for all cases where assistance is offered.

Department of Human Resources and Employment

When a woman leaves an abusive situation, emergency accommodation is only one of her pressing needs. Often, she also stands in desperate need of financial support, emergency transportation, furniture and clothing. The Department of Human Resources and Employment [DHRE] plays an important role in addressing these needs.

Recent policy changes, particularly in the area of transportation provision for victims of violence, have increased the likelihood of a timely, effective response. The DHRE now supports transportation outside the province, to shelters or from one shelter to another for safety reasons. In addition, transportation expenses to and from work for victims who must seek shelter outside the ir home community are now treated as a legitimate expense when calculating eligibility for a supplement. Transportation to support groups and help in moving furniture is also supported under the new policies. These measures are especially meaningful for women in isolated and remote communities.

Another significant policy change means that women who are receiving Income Support at the time they enter a shelter will continue to receive their benefits. A recent commitment to staff sensitivity training and role clarification will further enhance these services.

Taken together, these changes remove significant barriers to leaving abusive relationships.

2. Moving toward answers

A. Elements of successful approaches

The literature emphasizes the need for solutions that have the following characteristics:

1. A holistic approach.
2. Community-based and community-driven design and delivery.
3. Culturally appropriate design and delivery.
4. Active involvement of women.
5. Multisectoral collaboration and effective coordination.
6. 24-hour crisis response.

Strong individuals make strong families.

Strong families create strong communities.

-- McTimoney (1994)

1. The need for holistic solutions

McTimoney (1994) suggests that Aboriginal people see family violence as only one of many manifestations of community

dysfunction.²² Hence, any solution must be developed and implemented as part of a community-wide healing process. That is, solutions must be holistic, responding to the individual as part of a family, to the family as part of the community and to the community as part of the larger society. McTimoney reports that Aboriginal women, when asked, stress that the solutions must be delivered by Aboriginal people and must include traditional teachings and healing practices, which take into account the relation of all things to one another.

2. The need for community-based, community-driven solutions

Solutions must be “owned” by the community. Having lost so much, Aboriginal people are struggling to regain power and independence. Taking ownership starts with designing solutions that are community-based and community-driven, which can be adapted by the community to reflect its own culture and meet its own needs as community members define them.²³

3. The need for culturally appropriate solutions

Service delivery must be culturally appropriate to the populations being served. Resource materials, training and community education approaches must be in keeping with the collective characteristics of a community’s way of life: its perceptions and values, the beliefs and customs – both ritualistic and informal – that flow from them, and the language that expresses them.²⁴

4. The need for women’s full and active participation

This was pointed out strongly in the recommendation of the Royal Commission on Aboriginal Peoples (1996), which called for ensuring “full and equal participation of women ... in decision making bodies responsible for ensuring people’s physical and emotional security, including justice committees and boards of directors of healing centres”.²⁵

5. The need for coordination and collaboration

One of the fundamental issues that emerges throughout the literature is the need for community consultation and coordination. Clearly, multisectoral, interagency collaboration is essential in responding effectively to violence against women. For example, Porteous and Coombe (1999) recommended the establishment of interagency coordination committees, with a focus on safety and on promoting understanding of the individual roles of committee members.²⁶ A National

²² David McTimoney for Health Canada, National Clearinghouse on Family Violence (1994). *A Resource Guide on Family Violence Issues for Aboriginal Communities*.

²³ Robert Hart for Health Canada (1997), *Beginning a Long Journey: A review of projects funded by the Family Violence Prevention Division, Health Canada, regarding violence in Aboriginal families*.

²⁴ Ibid.

²⁵ Royal Commission on Aboriginal Peoples (1996). *Report of the Royal Commission on Aboriginal Peoples*, Vol 4. Ottawa: The Commission, c1996.

²⁶ T. Porteous and J. Coombe (1999), *Community coordination to improve women’s safety*. Caledon Institute of Social Policy / National Crime Prevention Centre *Crime prevention series*

Violence Consultation held by Pauktuutit in 2000 stressed the need for national coordination by a nationally funded committee of Inuit people working in the field. Its mandate would include reviewing initiatives and best practices, promoting public awareness and developing information tools and programs to prevent family violence.²⁷

Coordination is essential if true community participation and decision-making is to be achieved. It is also essential for the overall success of any intervention. For example, the New South Wales Aboriginal Health Strategy²⁸ has stressed that the quality of coordination and the strength of links among the health, safety and justice systems operating in a community will largely determine the degree of protection that can be offered.

The British Columbia Task Force on Family Violence (1992) pointed out that coordination must be discussed, defined, monitored and evaluated. In order for coordinating bodies to work effectively, issues of mandate, process, accountability and representation must be clarified²⁹.

In summary, the range of services available to people living with abuse must strive to create a continuum of service delivery, with the ultimate goal being a holistic, well-organized approach to family violence response and prevention. Such an approach would increase effectiveness, decrease repetition and overlap, allow for the identification of gaps in service and minimize confusion.

6. 24-hour crisis response

The safety of women and children must be an overriding principle in all services responding to family violence. Emergency shelter is essential. If it is unavailable in the immediate area, there must be systems to ensure safe transportation to the nearest shelter.³⁰ This includes policies and protocols to ensure minimum police response time³¹ and transportation agreements with the government departments that control such services.

B. Best practices: Existing models

An extensive literature review uncovered not only several models of interest but also a clear picture of the community and political contexts in which these models must exist in order to be effective. Client and staff safety are of primary importance. It is essential that systems providing

²⁷ Pauktuutit Inuit Women's Association (2000), *National Violence Consultation Report*.

²⁸ Hastings and MacLean (2002), *op. cit.*

²⁹ British Columbia: Ministry of Women's Equity (1992): *Is Anyone Listening? Report of the British Columbia Task Force on Family Violence*.

³⁰ W. Milne (1992); Centre for Rural Studies and Enrichment, St. Peter's College, Saskatchewan (2000). *Domestic violence and the experiences of rural women in east central Saskatchewan*

³¹ Manitoba: Aboriginal Justice Implementation Commission, *Final Report*. Chapter 9 ("Violence toward Aboriginal women and children").

family violence services ensure that the work environment is secure, and that the appropriate policies and procedures are in place to deal with high risk situations.

(i) Whole-family preventive approaches

Many models evolving from the holistic perspective include whole-family responses. The approach is a direct response to people's desire to heal families and communities, as opposed to focusing only on the victim.

Example

Hollow Water First Nation Community Holistic Circle of Healing, Hollow Water, Manitoba. Hollow Water is an Ojibway community of some 600 located on the east side of Lake Winnipeg, some 200 km. north of Winnipeg. Its strategy to deal with sexual abuse, which has affected an estimated three in four community residents, is the most mature healing process model in Canada.³² The 13-step program, based on traditional teachings, holistically involves victims, victimizers and their respective families. Disclosure of abuse is followed up by a team which includes the child protection worker, Community Health Representative, the nurse in charge and the addictions worker, together with others from the RCMP, school division and community churches. Most team members are women, many of whom are volunteers.

Advantages and disadvantages / limitations

This type of approach may be valid in some situations, as long as timely protection is also provided for victims of violence. When implemented as an isolated measure, however, this approach gives rise to serious concerns from a safety perspective. LaRocque's comments on the Hollow Water Project in the 1994 document *Violence in Aboriginal Communities* illuminate a fundamental problem with projects based on the whole-family concept:

*It is perhaps too early to tell whether it is as constructive as it sounds. A number of questions come to mind: Are victims in small communities really free to become part of these meet-the-offender programs? How young are the victims? What is the nature of the violence? Are victims agreeing to these models as a result of social pressure and lack of other choices? How are they being affected by all this? Do they have enough political and social awareness to be able to make a choice with such programs? Are offenders really being rehabilitated? And should this be the primary goal for helpers, families of victims, justices and communities? Is it possible that offenders use such programs to get out of sentencing and other responsibilities?*³³

³² Solicitor General Canada, Aboriginal Corrections Policy Unit (1998), *Developing and evaluating justice projects in Aboriginal communities: A review of the literature.*

³³ LaRocque (1994), *Violence in Aboriginal Communities*

Such questions are also valid in considering other kinds of efforts at dispute resolution. For example, the Manitoba Aboriginal Justice Inquiry recommended “preventive policing” by teams that included police officers and social workers trained in dealing with domestic disputes. These teams, it was hoped, “may be able to catch volatile situations and deal with them before the violence escalates”.³⁴ Yet it appears that such teams would only be called when a “domestic dispute” – family violence – has already occurred. The immediate and ongoing need for safety is not addressed, particularly if this approach is used in isolation from other supports such as an accessible shelter.

(ii) The traditional 24-hour shelter

The 24-hour shelter model is appropriate for areas where the population is large enough, or where the need for such a facility has been proven. Traditional shelters are staffed around the clock, and usually have 24-hour crisis telephone service. Such 24-hour shelters offer a range of services including advocacy, referral, counselling and children’s programming.

Examples

Kitchenuhmaykoosib Equaygamik shelter, Big Trout Lake, Ontario provides shelter for women and children for up to five weeks and has a 24-hour crisis line, together with outreach and advocacy programs. Big Trout Lake is a fly-in-only community of approximately 1250 people. There are addictions counsellors and other health professionals in the community as well as three police officers. The police station is next door to the shelter. This shelter service is funded by Indian and Northern Affairs Canada.

Mi’kmaq Family Treatment Centres, Waycobah and Millbrook, Nova Scotia. Each centre can house four families at a time, and operates 24 hours a day, seven days a week. Besides shelter, it offers individual and group counselling for women, men, and children; referral and follow-up; and community education programs.

Advantages

- The traditional 24 hour shelter can offer women and children shelter for several weeks. This gives a woman time to find housing, secure legal assistance, receive counselling and many other support services.

Disadvantages / limitations

³⁴ Manitoba: Aboriginal Justice Implementation Commission, *Report of the Aboriginal Justice Inquiry of Manitoba*. “The abuse of women and children” in Chapter 13 (“Aboriginal Women”).

- Traditional shelters are staffed 24 hours a day, and funding is at least partly determined by levels of use. This is not a realistic model of service delivery in communities with smaller populations. Instead, alternatives must be identified to ensure that a safe place or transportation to a safe place exists no matter how small the community.

(iii) The safehouse model

A *safehouse* is a private family home that will open its doors to women and children in danger.

Examples

Tullivik Group, Pangnirtung, Nunavut. Pangnirtung is a community of 1,500 people accessible only by air. This service offers counselling and works closely with the local Health Centre, addictions counsellors and mental health workers. The Tullivik Group depends on private homes that are used as safe houses when necessary. When safety is an issue referrals are made to Iqaluit and women and children are flown out of the community.

Family Violence Strategy 4, southwest rural Australia: This is a model designed for Australian Aboriginal communities without a shelter or a functioning street patrol.³⁵ A Women's Safety Panel of Aboriginal women, operating with local police or police liaison officers as part of a crisis response team, would be responsible for arranging a network of safehouses provided by local women. The crisis response team would provide a telephone help line and referrals as needed to police, schools, hospitals and other services. Services may be coordinated through an established community-based system such as a health service.

Family Violence Strategy 5, remote Aboriginal community: This Australian model was designed for communities with a relatively basic infrastructure, or whose service organization is in the embryonic stage. Using this model, some remote communities have already developed safe houses; others are in the planning stages. Strategies would have to be modified depending on the size of the community, its distance from the nearest town and the viability of constructing a safe house.

Advantages

- Cost-effectiveness; uses existing human resources and infrastructure
- Efficiency: safehouses are used only as needed.
- Full community involvement and ownership, in partnership with the full diversity of service providers

³⁵ H. Blagg for Partnerships Against Domestic Violence [Australia] (2000). *Crisis intervention in Aboriginal family violence: Strategies and models for Western Australia*. The model is one of several recommended for varying situations, based on close consultation with Aboriginal groups, extensive review of relevant literature and empirical research conducted in urban, rural and remote regions of Western Australia.

Disadvantages / limitations

- Security and safety. Private citizens who provide safehouses must be willing to accept a concomitant risk to their own safety. Confidentiality is hard to maintain here especially in small communities. The security of the sheltered family may also be jeopardized by the difficulty of maintaining secrecy within a small community.
- The need for a system of adequate remuneration for those operating safehouses.
- The typical lack of an adequate network of services and support.

(iv) The multi-service facility

An alternative to the private safehouse is a unit in the community that combines a family resource centre, women's centre and / or other services (see examples), while also having the capacity to house families on an as-needed basis. Community women are recruited, trained and paid to operate the various resources, which include a 24-hour on-call crisis line as well as 24-hour shelter support when women and children are in residence. Such a facility would be in close proximity to the local police station and could only exist in policed communities.

Examples

- ***Temagami First Nation Healing and Wellness Centre, Bear Island, Ontario.*** Bear Island is an Ojibway community of approximately 200 people that is accessed by air or water. The centre has staff on call around the clock, providing a crisis line and shelter admission any time of the day or night. The staff, which includes an outreach and family support worker, work at the shelter when there are families in residence; at other times, they work at local schools or elsewhere in the community. This arrangement is facilitated by strong links between the centre and other community resources including a day-care facility, the community clinic, the addictions counselling service, the schools, the Young Mothers program, child welfare services and the police. The centre itself hosts spiritual and cultural events and provides programming for the whole community in the areas of healthy lifestyles and nutrition. It also works with male clients who need assistance. The Temagami centre has an advisory board made up of an Elder, a community representative, a band council representative, a woman who deals with financial matters and another experienced in shelter operations. The centre is funded by a provincial Aboriginal Healing and Wellness Strategy, and has a yearly operating budget of approximately \$240,000.00.
- ***Mikisew Cree First Nation Paspew House, Fort Chippewan, Alberta.*** The unit has three bedrooms and can house up to 11 women and children at a time. Staff operate on an on-call basis. In addition to providing accommodation, there is a 24-hour crisis line and a public education program on family violence and prevention. The operational costs for this facility are approximately \$164,000.00 per year. Its primary source of funding is the Haven of Hope Program sponsored by Indian and Northern Affairs Canada.

- ***Tukkuvik Women's Shelter, Cape Dorset, Nunavut.*** Cape Dorset is a fly-in-only Inuit community of some 1200 people. The six-bed shelter is staffed on an as-needed basis and houses a coordinator during business hours. Women residing in the shelter are invited to participate in healing groups run by women in the town, and the facility has been well accepted in the community. While no response was received to a written request for information on funding, the shelter's funds appears to come from some combination of federal and municipal sources.
- ***Maniilaq Association shelter, Alaska.*** The Maniilaq Association services a fly-in-only community of 3000 people. The Family Resources division of this association comprises a day care centre, a seven-bed crisis centre and the Putyuk Children's Home which is an emergency shelter for children of all ages who are removed from their homes by the state. There are also Family Services and General Assistance components. The shelter has Aboriginal staff and visiting Elders. Acceptance of the shelter has been maximized by the role it plays in the community. It provides meals for community events and for Search and Rescue crews. It also invites healthy men to hunt for food for the shelter. The Maniilaq shelter model was discussed at the Circumpolar Women's Conference in the Yukon in 1999. Contact has been made with the Association and a request for funding information has been made but was not answered.
- Although the ***Kitchenuhmaykoosib Equaygamik Shelter, Big Trout Lake, Ontario*** is a "traditional" 24-hour shelter in a community of some 1250 people, it has several features of the multi-service model. The shelter serves as a resource base in the community, hosting a variety of cultural and spiritual events and offering healthy lifestyle programs in areas such as nutrition. The service has achieved a high level of acceptance, attributed by staff to their community-oriented approach.

Advantages

- High levels of community integration, such as that demonstrated by the Temagami centre. This not only promotes coordinated programs, but may add to security and allows alternative employment for staff at times when the shelter is empty. The lack of significant safety concerns at the centre has been explained thus by one informant: "men in the community would be too embarrassed to show up and cause trouble; everyone in the community knows each other".
- High levels of cultural appropriateness. For example, the Temagami centre depends on native culture and tradition to guide its work.
- On-call human resource utilization promotes cost-efficiency.

Disadvantages / limitations

- Length of stay would be limited and therefore women and children would find themselves having to leave their communities to travel to a full service shelter should they require an extended shelter stay.
- Short stays would limit the benefit of support services available on site.

(v) Family violence teams

This section explores some creative team-based approaches to family violence and related issues that have been, or are being, implemented in a variety of settings.

Urban examples

Winnipeg Police Services Early Intervention Pilot Project. Inaugurated in 2001, this project links a “preventive policing” approach with other resources in a large urban centre. An early intervention team, consisting of a police officer and a social worker, steps in once the first responder – the regular constable – has identified a “non-criminal” but escalating pattern of problems:

The police officer would conduct further investigation to ensure that violence had not occurred and the social workers would assess risk and provide referrals to services to support the potential victim and treatment for the potential abuser. The team would then have a close connection to service providers in the community to ensure that referrals are made to agencies who could intervene quickly and appropriately given the identified needs of the couple.³⁶

Woman Abuse Council (Toronto): High-risk response model. This model for quantification of risk and for effective and timely intervention was developed in response to the untimely death of Sandra Quigley, a woman who was killed by her intimate partner despite repeated attempts at intervention. The model includes three components:

- regular and ongoing risk assessment according to a standard procedure
- immediate action in identified “high-risk” situations
- consultation as necessary in cases of concern.

Rural examples

Long Lac #58 Reserve, Ontario. This community is in the process of creating a new system with the following elements:

- A trained crisis-response team composed of a variety of service providers, the Aboriginal police and the band Chief. A smaller team, consisting of a police officer, a youth protection

³⁶ Jane Ursel, study done for Aboriginal Justice Implementation Committee, 21-22.

worker and a family support worker or mental health counsellor, will be required by a standing protocol to respond to any call to the police that involves family violence or child abuse. If the situation is escalating or if a child needs to leave the home, the entire team will be mobilized.

- A safehouse to provide respite and / or safety for family members who need it.
- Awareness visits to every home in the community by a team of five (minimally), including two Elders. This group will share with families the community's desire to protect children and families from violence, and explain procedures. This program component lets families know the community is there to intervene when needed. It also supports community staff by addressing one of their major fears – being rejected by their own communities.
- A parents' and Elders' resource room at the school, where parents can receive help with parenting skills and participate in support groups, and Elders can get support and build skills to help them take a lead role in teaching children about the Ojibway culture.
- Recruitment of parents to assist teachers in the classroom.
- Recruitment and training of senior students to deliver the curriculum on the impact of socialization in fostering prejudice, violence, sexism and racism. This role has built-in incentives, including community recognition and school credit.
- A protocol to ensure transparency in responding to children and the role/responsibility of parents.

Family Development Program, Mid-Island Tribal Council, Vancouver Island. The Mid-Island Tribal Council represents several bands in small rural communities. Having defined family violence as an issue for the whole community, the Council has designed a Family Development Program that addresses the problem while also facilitating healing among victims in a culturally sensitive way. It does this through integrating and linking existing services in the community.³⁷

National Indigenous Family Violence Grants Program, Australia. This comprehensive program is funded by the Australian federal government under the *Partners Against Domestic Violence* initiative. A total of \$6 million over four years has been allocated to assist grassroots indigenous organizations to develop culturally appropriate, innovative projects to address family violence. Most of the projects aim to establish community control through training, education, cultural awareness and community development. Some 30 of the funded projects have been reviewed for this report; the three most relevant are described below.

- ***The Kullarri Patrol, West Kimberly region.*** This model, recipient of the 1993 Australian Violence Prevention Award, has commanded a great deal of worldwide attention. Inspired by the recommendations of the Australian *Royal Commission into Aboriginal Deaths in Custody*, the project targets a range of problems including domestic violence, alcohol-induced violence, truancy, homelessness, substance abuse, suicide, and underage drinking. Patrol members are local Aboriginal people, including women, who receive training by regular police. Some

³⁷ BC Institute against Family Violence (2001). "What Some Aboriginal Communities Are Doing to Address Family Violence: Paths For Healing". *Newsletter*, Summer.

have themselves previously been victims of alcohol-related violence or despair; clients of the local alcohol treatment program sometimes participate in the Patrols as part of their rehabilitation. Units are on duty around the clock, traveling either by vehicle or on foot. With respect to family violence, the Patrol seeks to defuse potentially violent situations, assists victims of violence to find shelter, ensures that injured persons receive medical help as necessary, and encourages perpetrators to seek counselling. The units provide transportation as necessary. Overall, the Patrol operates in close liaison with other community organizations including the local women's shelter counselling service, the alcohol rehabilitation service, and a crisis accommodation service to provide a comprehensive network of support. It also works in close cooperation with the police service, which has had a beneficial influence on regular policing practices. Other encouraging results include improved relations between the Aboriginal community and the police and a marked decrease in the number and severity of alcohol-related injuries. A renewed sense of personal and community pride has been reported.

- The Australian *Family Violence Strategies 4 and 5* also see intervention teams as a core structure. The composition and shape of these teams would vary according to locality and content.³⁸ The team's role is to provide effective, coordinated and timely intervention and can be full or part time appointments. Referral systems would include a Helpline, police, school, hospital and community. In addition, *Strategies 4 and 5* make use of a network of neighbourhood "wardens", in the belief that the full-time presence of a recognized authority figure can help prevent problems associated with crime and fear of crime. Wardens are empowered to take preventive action against crime and disorder, and provide general assistance as necessary.

Advantages and disadvantages/limitations

The "preventive policing" teams recommended by Manitoba's Aboriginal Justice Inquiry have already been discussed [see *Whole-family preventive approaches* above], and the danger of implementing such teams in a small, isolated community in the absence of other supporting systems has been noted. However, there are obvious benefits to a team approach, and response teams can be very effective in larger communities or when combined with adequate provision for emergency, such as safehouses or shelters.

C. A continuum of services

(i) A proposed model for Labrador Aboriginal and northern communities

³⁸ H. Blagg for Partnerships Against Domestic Violence [Australia] (2000), *op. cit.*

The models outlined above, in most instances, are designed for specific communities and are coordinated with existing infrastructure, resources, prior educational initiatives and varying levels of community support. Some are in the pilot stage while others have proven their long-term benefits. It would not be feasible to implement any model “as is” into other communities. However, each has valuable elements which can be used to develop a flexible, culturally sensitive approach. Wherever possible models of intervention should work through existing community structures, using existing infrastructure in the area³⁹

The recommendations below combine elements selected based on the following criteria:

- suitability for communities with minimal services
- potential for community support
- potential for links with established women’s groups
- suitability for use in communities with varying levels of policing

Proposed is a *continuum of services* that range from community-awareness programs to full service shelters. It is presented as a template of components that can be tailored by and for specific communities. For example, a community that is just beginning the work of acknowledging and responding to family violence may start with community education and team-building in order to foster the development of solid community support, and the counselling and support skills necessary for response teams and shelter staff.

The components are presented in stages. Stage I includes the necessary preliminary work of identifying a group to oversee the family violence initiative for a region and coordinating community awareness work. In Stage II, response teams are established and trained. Finally, Stage III involves establishment of multiservice units and full-service 24-hour shelter as needed. While many communities would implement components from each stage at the onset of community initiatives, others may begin with Stage I for reasons such as lack police presence or a need for increased community education.

STAGE I

(a) Identification of suitable women’s groups to coordinate community family violence initiatives

In keeping with the research findings, an Aboriginal women’s group should be identified, prepared and financially supported to allow for women’s full and active participation in the initiative against family violence. These coordinating bodies would be responsible for:

- creating a functional liaison system with service providers and funding sources

³⁹ H. Blagg for Partnerships Against Domestic Violence [Australia] (2000). *Crisis intervention in Aboriginal family violence: Strategies and models for Western Australia*.

- networking on a national level with other Aboriginal groups and shelter services
- securing the assistance for and ongoing development of proposal development in order to ensure improvements to and sustainability of present initiatives.
- coordinating the work of the multi-service units and their staff

(b) Community awareness plans

The work of increasing community awareness about family violence is crucial and must be an ongoing component of any family violence initiative. In some areas it must precede future initiatives in order to ensure the success of community initiatives. Members of identified coordinating bodies, shelter workers and community-based team members must all play a role in researching, obtaining and delivering resource materials and information that is culturally relevant, current and effective. Government, employers and other NGOs must ensure that service providers are given the time to engage in activities that will contribute to these community initiatives.

STAGE II

(a) Identification, development and training of community-based family violence response teams

A family violence response team could carry out a variety of functions and its structure is flexible. The primary functions of a team would be:

- identification and assessment of high risk cases
- consultation with present shelter staff and other service providers
- ongoing community awareness work
- crisis intervention
- negotiation of transportation agreements and shelter admissions and transfers

The level of involvement of team members in responding to family disputes would vary depending on level of police presence, potential risk and training. Any on-site response to a family in trouble would follow preliminary assessment/response by police.

The family violence response team is a flexible concept that can involve a variety of individuals, depending on the particular community. All teams would require police and/ or community constable participation. In the communities without stationed police officers, participation would be limited as would team function. In such cases the work of the team would focus around risk assessment, referral, negotiation of transportation agreements, prevention and community education.

The following people might be recruited:

- RCMP or community constable
- Victim services coordinator or assistant
- Shelter staff
- Mental health worker
- Community health nurse
- Addictions counsellor
- Women's council representative
- Community leader(s)
- Elder(s)

STAGE III

(a) Establishment of multi-service units and a full-service shelter

The establishment of multi-service units and a full service shelter that would service the north coast would entail extensive preliminary work on the part of coordinating bodies, funding sources and team members. This work would include:

- recruitment of shelter staff
- identification and implementation of effective staff training processes
- the establishment of structured policies and procedures
- regular communication with and accountability measures for all funding sources

Multi-service units would provide immediate safety and shelter in emergencies, coupled with a resource centre such as a women's centre or family resource centre. The facility must also provide a 24-hour crisis line with on-call service. Referrals could come from response team members, other support services or, from the abused women themselves.

The service would incorporate admission / assessment, referral, transportation arrangements, advocacy, supportive resource counselling and education. Staff would also undertake preventive services and activities, including community awareness programs, team-building activities, and outreach to abused women who choose not to use the shelter and links to community schools.

A multi-service unit could host other community based activities when there are no families in residence. It could also house office space for regional coordinating group representatives and meeting space for teams and community groups involved in responding to family violence.

(ii) Specific recommendations

Based on the model proposed above, as well as the literature review and extensive contact with informants, this report recommends the following:

1. *A financial commitment to established women's groups that would increase their capacity to coordinate an integrated community response to family violence.*

Representatives from Provincial Transition House Associations in Canada echo the resounding message of Aboriginal and rural shelter workers and women's groups: in order for services responding to family violence to be effective, control of these systems must rest with communities and, in particular, with Aboriginal women. Many informants in Northern Labrador identify a lack of coordination, planning and skill development in proposal-writing as the major barriers to women's groups accessing funding for badly needed services. Such a group would coordinate the family violence initiatives in their communities taking responsibility for community-based awareness programs, shelter recruitment and training, team development, response team participation and proposal development. Clearly defined goals and plans of action must be established with a focus on desired outcomes.

Existing groups deserving of support include:

- The *Tongamiut Inuit Annait* (Inuit Women of the Torngat Mountains). Formed in 1994, the group comprises representatives from each of the Inuit communities in Northern Labrador. The focus of its work is the prevention of family violence, sexual abuse and substance abuse. It is also committed to ensuring equality for women in their communities, and to the preservation of traditional crafts. A significant component of the group's work has been its attempts to secure funding for emergency shelters on the north coast of Labrador. The group's initiatives are currently supported by Pauktuutit, the national Inuit women's organization; the Mokami Status of Women's Council; the Provincial Advisory Council on the Status of Women; and Labradorians for Peaceful Communities which is the Labrador Regional Coordinating Committee for the province's Violence Prevention Initiative.
- The *Next Generation Guardians* in the Innu community of Davis Inlet is a newly formed women's group whose mandate is to lobby for services for families living with family violence and abuse in their community. This group is gaining ground in the effort to draw attention to their work, and they have received encouragement and some assistance from Health Canada.

Southern Labrador does not have an active women's group that could take on such a role at this time. However, potential exists for the establishment of such a group which could learn from the more well-established groups on the north coast. It would seem practical for the Grenfell Regional Anti-Violence Team to continue its work in the south coast communities and to assist in the development of a family violence response team in the area.

2. *Restructuring of the Nain Safe House to enhance its capacity to exist as a full-service shelter for families of northern Labrador. Changes must occur on several levels including physical space, staff and management training and salary structure.*

In order to provide culturally appropriate, accessible services to Aboriginal women and children fleeing abusive situations, a 24-hour, full-service shelter with Aboriginal staff is needed in northern Labrador. The Nain Safe House appears to be the logical facility to provide such a service. Its level of admissions, which have warranted a 24-hour service since the facility opened, have provided a clear demonstration of the need.

Due to its small size, high maintenance needs and lack of accessibility features for the disabled, the Nain Safe House is not now adequately serving the needs of the women and children who use the facility. There is a serious lack of security features, overcrowding, and a lack of quiet space for women and children. Office space is also limited, limiting the capacity for community education and outreach activities. In order to accommodate women and children from other parts of the north coast, the size and services of the shelter must also be expanded.

The shelter presently exists on stable land – a rarity in Nain – and in close proximity to the local police station.⁴⁰ For these reasons, it is recommended that the shelter be refurbished on the present lot. Failing this, one of the larger vacant buildings in the same area with the same ground stability could be renovated to house the shelter and the necessary peripheral services. The Canada Mortgage and Housing Corporation's Shelter Enhancement Program is one possible source of funding for such renovations.⁴¹ Other sources of funding may include the Supporting Community Partnerships Initiative, one component of the federal government's \$753 million investment in addressing homelessness in the country.

The rate of pay for on-call staff also needs to be reviewed as it was presented as the major cause of the high staff turnover rate at the shelter.

3. *Reopening of the Hopedale shelter as a multi-service unit.*

The shelter in Hopedale is presently closed for lack of basic operating funds. It will need resources to reopen, restructure and maintain itself as a multi-service unit that would operate as a resource centre for part of each weekday, and as a 24-hour shelter when families are in residence. There needs to be a 24-hour crisis line with staff on call around the clock. Staffers must be recruited and trained for shelter support, community outreach / education and participation in response teams. Hopedale has four regular RCMP officers, two of whom are Aboriginal.

⁴⁰ Nain has six regular RCMP officers and an Aboriginal auxiliary officer who, when accompanying police, has peace officer status.

⁴¹ See Appendix 5 for a description of this program.

4. *The establishment of multi-service units in the other fly-in-only, policed communities in northern Labrador.*

Makkovik and Rigolet are in need of emergency shelter and a multi-service unit would allow for shelter as well as a hub for other prevention and awareness initiatives. The policing structure in Makkovik is based on a Nunavut model. There is one regular RCMP member and two Aboriginal community constables trained by the RCMP. Rigolet now has a regular RCMP member and two Aboriginal community constables.

5. *The presentation of this report by the Provincial Association Against Family Violence to the Innu Nation recommending the establishment of a temporary multi-service unit in Davis Inlet, to be replaced by a 24-hour shelter following relocation to Natuashish.*

The Mushuau Innu of Davis Inlet believe they can rebuild and renew their community by strengthening their cultural traditions and moving to a site on the mainland called Natuashish (Little Sango Pond). That site is closer to the caribou hunting grounds and has been a traditional gathering place of the Mushuau Innu.⁴² In 1996, the federal government agreed to this relocation; however, Indian and Northern Affairs Canada (INAC) now indicates that relocation, originally scheduled for completion by September 2002, will likely be delayed until December 2002.

The Mushuau Innu Health Commission and community leaders are working hard to develop an integrated healing strategy for their community, and have been trying since 1993 to secure funding and support for a family treatment program. The relocation provides the opportunity to involve the new community from the ground up in a strategy to prevent and respond to family violence.

Davis Inlet has six regular officers assigned to the community. Three are available at any given time. There are also three tribal police members trained by the Native Justice Institute, who have peace officer status when accompanying regular police.

6. *The establishment of a multi-service unit in a central, policed south-coast community.*

The existence of road connections to most south coast communities make the need for *multiple* safe units less urgent than it would otherwise be. Hence, a single, appropriately placed multi-service unit could conceivably provide effective shelter, education and related services to all those southern communities connected by road – that is, all except Black Tickle, Norman Bay, William's Harbour and (for the near term) Pinsent's Arm. Obviously, the need for significant

⁴² www.ainc-inac.gc.ca/nr/prs/s-d1996/9646bk2.html

groundwork and coordination would be paramount. A regional coordinating body or family violence response team would need to take responsibility for planning and ensuring community awareness initiatives, efficient transportation systems and accountability to funding sources.

There was no consensus on which community should host a regional multi-service facility, or any other kind of shelter. Some informants noted that people from the south coast of Labrador are accustomed to travelling to St. Barbe and thence by air or sea to St. Anthony for various services; others held that only a road-accessible Labrador-based service would do. However, all informants agreed that the community chosen should be central and readily accessible, with solid infrastructure, policing and other relevant services.

7. *Development of family violence response teams in communities with shelters or multi-service units together with agreements covering transportation and acceptable police response times for Postville and Black Tickle*

Postville and Black Tickle have no regular police stationed in their communities. Black Tickle, a fly-in-only community on the south coast, is policed by officers based in Cartwright. Postville is policed by the officers in Makkovik. These communities need agreements to stipulate minimum police response time and to provide transportation in family violence emergencies. Necessary parties to such agreements could include Community and Aboriginal Policing, Human Resources and Employment and the Labrador Health Corporation.

8. *A consultation process should be considered which would enable communities to begin planning proposed initiatives.*

These consultations should be held in Labrador, with a view to encouraging Aboriginal and community leaders to commit to the initiatives and begin to take a public stand against family violence. Consultation should be held with service providers to introduce the response-team approach, and the participation and support of all relevant health authorities is essential. All stakeholders should be represented at these consultations, including:

- community leaders
- representatives from all women's groups
- service providers
- potential funding partners from municipal, provincial and federal governments
- representatives of families living with family violence.

9. *A comprehensive evaluation process for all initiatives to ensure that goals and objectives are realized.*

Close monitoring is essential to ensure that the objectives outlined in the development stage are being realized, that administrative procedures are adequate and that programs are sustainable. An ongoing evaluation process, including both qualitative and quantitative indicators of success, must be developed and initiated at the onset of program development. Evaluation should be comprehensive, including indicators for:

- community education work
- program utilization
- responsible spending and accounting practices
- coordination of services
- community perception
- networking capacity

(iii) Future directions

The writing of this report involved discussion with many individuals and groups from rather diverse backgrounds yet all had a sincere interest in reducing violence against women and children. Several relevant and challenging issues remain to be addressed by future initiatives.

- ***Need for service on the Great Northern Peninsula.*** In the course of discussion about southern Labrador, informants from the Grenfell Regional Anti-Violence Team stressed that the Great Northern Peninsula has an equally serious lack of services for women and children living with family violence. At present, the closest shelter service for women and children – including those as far away as St. Anthony – is located in Corner Brook.
- ***Evaluation of current services.*** Further work is required in order to assess existing services and ensure that the most effective means of support are being utilized for women and children living with violence. We need to measure the effectiveness of present initiatives. It has become increasingly more difficult to find funding for new initiatives - we must consider effective and efficient models for services that directly affect violence in our communities. Further work may be considered as new models and responses are conceptualized and more evaluation information is compiled.
- ***A move toward a more all-inclusive system.*** Shelters strive to be all-inclusive with respect to their admissions criteria and service delivery. However, due to external influences and minimal resources on various levels, shelters oftentimes accept women who present challenges with respect to mental health and substance abuse issues. It is necessary to explore initiatives that move us toward an inclusive shelter system that meets the needs of all women escaping violence in the home.

- **Justice issues.** Informants for this report stressed that current gaps in the justice system must be reviewed in order to equip communities to respond effectively to family violence. Review of the present justice system including court schedules as well as access to legal aid services, victim services and legal information appears necessary.

D. Conclusion

In order to respond effectively to family violence in Labrador's Aboriginal and northern communities, several factors must be acknowledged. Key issues include isolation, lack of community awareness, the need for culturally sensitive services, and the importance of giving communities sufficient resources to maintain and control proposed initiatives. The creation of a network of short-term havens and community-based response teams to respond to families in need of refuge is a solid base for a community attempting to provide protection to families as it works through the larger process of community development and collaborative network-building.

The level of community awareness of family violence varies considerably in the communities of southern and northern Labrador. Awareness levels directly affect the potential for effective service delivery, as well as acceptance and utilization of any service that may be developed. This reality may be taken to indicate that a gradual approach to new service provision is desirable. However, the gradual approach is an unaffordable luxury for women and children who are living with family violence. Addressing their immediate need for emergency transportation and shelter must not be put off in the hope that services will evolve and attitudes will change.

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Other resources of interest

Canadian print and online resources

Aboriginal Justice Implementation Commission [www.aijc.mb.ca/volume1/chapter13.html]

This Manitoba government organization is a response to recommendations into an inquiry on the state of Aboriginal life in the province. Volume 1, chapter 13 focusses on justice for Aboriginal women, including discussion on domestic abuse, sentencing and incarceration.

Alliance of Five Research Centres on Violence

<http://www.uwo.ca/violence/linked/alliance/english.htm>

Canadian Council on Social Development

55 Parkdale Avenue
P.O. Box 3505, Station C Ottawa, Ontario K1Y 4G1
Voice (613) 728-1865 Fax: (613) 728-9387
<http://www.ccsd.ca/>

Canadian Health Network

Violence prevention: <http://www.canadian-health-network.ca/1violence.html>
Education on wife assault: www.womanabuseprevention.com/

Centre for Research on Violence Against Women and Children

www.uwo.ca/violence/index.html

Canadian Women's Health Network

www.cwhn.ca/indexeng.html

FREDA Centre for Research on Violence Against Women and Children

List of publications at www.harbour.sfu.ca/freda/pubs/publist.htm

Government of Manitoba: Manitoba Women's Directorate (1991).

Maintains a listing of violence prevention materials in the schools.

Health Canada

Publication Distribution Centre, Tunney's Pasture, Ottawa, Ontario K1A 0K9
Voice: (613) 954-5995 Fax: (613) 952-7266

National Clearinghouse on Family Violence www.hc-sc.gc.ca/hppb/familyviolence/

1999 annotated inventory of research reports completed through the Five Research Centres on Family Violence and Violence Against Women and Children: http://www.hc-sc.gc.ca/hppb/familyviolence/html/annotated_inventory/english/index.htm

INet Pink Files

Aboriginal women, Section 1 (www.trakkerinc.com/pink/saskinfo/sect1.htm);
Violence against women, Section 8 (www.trakkerinc.com/pink/saskinfo/sect8.htm).

Muriel McQueen Fergusson Centre for Family Violence Research

www.unb.ca/web/arts/CFVR

National Aboriginal Document Database.

Index at www.landclaimsdocs.com/links.htm

Native Law Centre [www.usask.ca/nativelaw]:

Located at the University of Saskatchewan, the Native Law Centre is concerned with scholarly research of Aboriginal legal issues. The site lists the library holdings, annotates its publications and provides a bibliography of sentencing (or peacemaking) circle references.

Northern Women's Web Centre

www.circumpolar.net

Ontario Women's Justice Network.

Abuse resources for marginalized women at www.owjn.org/resource/margins.htm.

Statistics Canada

General: www.statcan.ca/start.html

Statistical profile of family violence: www.statcan.ca/Daily/English/990611/d990611a.htm

Status of Women Canada

Research Directorate: www.swc-cfc.gc.ca/research/indexe.html.

Publications: www.swc-cfc/pube.html.

Addresses: www.swc-cfc.gc.ca/offices/contact-e.html#research

University of Manitoba Research Centre on Family Violence

www.umanitoba.ca/academic_support/research_admin/resctre/famvio.htm

Canadian audio-visual resources

The Family Violence Film Catalogue

Health Canada (4th ed.), 1993. Produced for the Family Violence Prevention Division by the National Film Board of Canada

The Family Violence Audio-Visual Source Guide

Health Canada (3rd ed.), 1993. Produced for the Family Violence Prevention Division, by the National Film Board of Canada

National Film Board of Canada

P.O Box 6100 Montréal, Quebec H3C 3H5

www.nfb.ca

Atlantic Canada: 1-800-561-7104

US Internet resources

American Bar Association Commission on Domestic Violence

www.abanet.org/domviol/home.html

American Medical Association

Domestic violence: www.ama-assn.org/insight/spec_con/violence/domestic.htm

American Medical Association

Mental health effects of domestic violence: www.ama-assn.org/public/releases/assault/fv-guide.htm

American Medical Women's Association

Curriculum on domestic violence for health professionals: www.amwa-doc.org/dvcourse2.htm

Minnesota Centre Against Family Violence and Abuse

www.mincava.umn.edu/

US Department of Justice Violence Against Women Office

www.ojp.usdoj.gov/vawo

Transition houses and shelters for abused women in Newfoundland and Labrador

Transition House

P.O. Box 152
Corner Brook, NL A2H 6C9
(709) 634-8815
(709) 634-4199
(709) 634-4198 (crisis)
fax: (709) 634-4197

Cara House

P.O. Box 305
Gander, NL A1V0E 1W7
(709) 256-9306
(709) 256-7707 (crisis)
fax: (709) 256-3644
E-mail: cbswc@thezone.net

Libra House

P.O. Box 449, Stn. "B"
Happy Valley-Goose Bay, NL A0P 1E0
(709) 896-8022
(709) 896-8251
(709) 896-3014 (crisis)
fax: (709) 896-8022
E-mail: librahouse@nf.sympatico.ca

Labrador West Family Crisis Shelter

P.O. Box 106
Labrador City, NL A2V 2K3
(709) 944-7124
(709) 944-1200 (crisis)
(709) 944-3600
fax: (709) 944-7477

Grace Sparkes House

P.O. Box 327
Marystown, NL A0E 2M0
(709) 279-3560
(709) 279-3562
fax: (709) 279-3780

Nain Safe House

P.O. Box 447
Nain, NL A0P 1L0
(709) 922-1229
(709) 922-1221
E-mail: nainsafehouse@nf.aibn.com

Nukum Munik Shelter

P.O. Box 160
Sheshatshui, NL A0P1M0
(709) 497-8869
(709) 497-8868
fax: (709) 497-8827

Iris Kirby House

P.O. Box 6208
St. John's, NL A1C 6J9
(709) 722-8272
(709) 753-1492 (crisis)
fax: (709) 722-0164

Indian and Northern Affairs Canada – Regional offices

Atlantic Region

P.O. Box 160
40 Havelock Street
Amherst, Nova Scotia B4H 3Z3
Voice: (902) 661-6200 Fax: (902) 661-6237

Québec Region

Place Jacques-Cartier Complexe
320, rue St.-Joseph Est, Suite 400
Québec, Québec G1K 9J2
Voice: (418) 648-7551 or 1-800-263-5592
Fax: (418) 648-2266

Ontario Region

5th Floor 25 St. Clair Avenue East
Toronto, Ontario M4T 1M2
Voice: (416) 973-6234 Fax: (416) 954-6329

Manitoba Region

Room 1100
275 Portage Avenue
Winnipeg, Manitoba R3B 3A3
Voice: (204) 983-4928 Fax: (204) 983-7820

Saskatchewan Region

2221 Cornwall Street
Regina, Saskatchewan S4P 4M2
Voice: (306) 780-5733 Fax: (306) 780-5733

Alberta Region

630 Canada Place
9700 Jasper Avenue
Edmonton, Alberta T5J 4G2
Voice: (403) 495-2773 Fax: (403) 495-4088

British Columbia Region

Suite 600, 1138 Melville Street
Vancouver, B.C. V6E 4S3
Voice: (604) 775-7114 Fax: (604) 666-2546

North West Territories Region

P.O. Box 1500
Yellowknife, N.W.T. X1A 2R3
Voice: (403) 669-2500 Fax: (403) 669-2709

Yukon Region

345-300 Main Street
Whitehorse, Yukon Y1A 2B5
Voice: (867) 667-3100 Fax: (867) 667-3196

Nunavut

P.O. Box 2200
Iqaluit, Nunavut X0A 0H0
Voice: (867) 975-4500 Fax: (867) 975-4560

Appendix 2: Questionnaires

Interviews based on the following questionnaires were conducted by telephone. Questionnaire I was used initially for all responding organizations.

Questionnaire I: Structured interview for national shelter services and provincial Transition House Associations

Name of organization

Location

Telephone

Contact name

Position

Email

Fax

Date

1. Aboriginal status or northern status
2. Population size/structure/type
3. Level of isolation (e.g., roads, airstrips, distance from nearest town)

Questions #1, #2 and #3 explore the extent to which an agency meets the study criteria: (a) rural location; (b) location in an Aboriginal community; (c) location in a community of fewer than 1,500 people. Questioning continues in order for agencies meeting *at least two* of the three criteria. For all other agencies, Questions #4 through #12 are omitted.

4. Program description (including as much detail as possible)
5. Staffing models (volunteers / paid workers)
6. Service delivery mechanisms (board structure, community health board, etc.)
7. Yearly budget/expenditures
8. Funding sources (municipal, provincial, federal)

9. Community infrastructure, links and partnerships (health authorities, police, services for men, youth, addictions counselling, etc.)
10. Overall police presence in community
11. Aboriginal police presence
12. What is working well? / What's not? / Unique plans for the future?
13. References of other models of service delivery
14. Follow up numbers/contacts for further information
15. Safe home references / contact information
16. Request to provide relevant documents – e.g., budgets/funding, proposals, etc.

Questionnaire II: Semi-structured interview for provincial informants

Date
 Name
 Organization
 Position
 Address
 Telephone/ Fax
 E-mail

1. What do you know about the present situation for women who live with family violence in isolated communities in Labrador?

2. What is your knowledge of the infrastructure of services presently existing in:

<i>Northern Labrador:</i>		
Nain Makkovik	Davis Inlet Hopedale	Postville Rigolet
<i>Southern Labrador</i>		
Forteau Cartwright	Black Tickle Mary's Harbour	Port Hope Simpson Other

3. Are you aware of any models of service delivery to respond to family violence being used in other parts of the country or internationally that may be feasible to implement in the above mentioned areas?

4. What has your organization's role been in service delivery / responding to the problem of family violence in isolated Labrador communities?

5. What has your experience been in service / responding to the problem of family violence in isolated Labrador communities?

6. Do you have any written material, references or contact information that might be used for this report?

7. Do you have any other comments you would like to add?

Questionnaire III: Semi-structured interview for national and international informants

Date

Name

Organization

Position

Address

Telephone

Fax

E-mail

1. What do you know about the present situation for women who live with family violence in isolated northern or Aboriginal communities in your province or Country ?
2. What is your knowledge of the models of service delivery responding to family violence in these communities? (Use Questionnaire #1 here for detailed information on each setting)
3. Are you aware of other models of service delivery to respond to family violence being used in other parts of the country or internationally that may be feasible to implement in isolated northern or Aboriginal communities?
4. Do you have any written material, references or contact information that might be used for this report?
5. Do you have any other comments you would like to add?

Appendix 3: List of informants

Provincial resource group

Suzanne Andersen, Nain Safe House

Shirley Barr, Labradorians for Peaceful Communities and Mokami Status of Women

Sgt. Wade Blake, RCMP Community and Aboriginal Policing, Happy Valley-Goose Bay

Deanne Chafe, Labrador and Aboriginal Affairs

Blenda Dredge, Grenfell Regional Anti-Violence Committee

Sharon Edmunds, Labrador Inuit Health Commission / Pauktuutit Representative

Ruth Flowers, Tongamiut Inuit Annait

Sheila Genge, Grenfell Regional Anti-Violence Committee

Barbara Goudie, Nukum Munik Shelter, Sheshatshui

Joyce Hancock, Provincial Advisory Council on the Status of Women

Kevin Head, Healing Coordinator, Mushuau Innu Health Commission, Davis Inlet

David Hughes, Labrador and Aboriginal Affairs

Fanny Keefe, Family Resource Centre, Cartwright

Cynthia King, Newfoundland and Labrador Housing Corporation

Michelle Kinney, Labrador Health Corporation

Diane Lake, Child Youth and Family Services, Labrador Health Corporation, Cartwright

Frances Murphy, Board of Directors, Nain Safe House

Roxanne Notely, Grenfell Regional Anti-Violence Committee

Frances Nui, Nukum Munik Shelter, Sheshatshui

Sherry Rowsell, Labradorians for Peaceful Communities

Pam Thomas, Victim Services, Department of Justice

Daven Toope, Grenfell Regional Anti-Violence Committee

Ruby Tshakapesh, Mushuau Innu Health Commission, Davis Inlet

Judy Ward, Grenfell Regional Anti-Violence Committee

Martha Winters-Able, Labrador Inuit Association, Hopedale

Charlotte Wolfrey, Tongamiut Inuit Annait

National shelter service informants

PROV	TOWN	SHELTER	CONTACT	POSITION	TEL
ON	Bear Island	Temagami First Nation Family Healing	Lillian Hare	Director	(705) 237 – 8600
ON	Big Trout Lake	Kitchenuh – manykoosib	Dorothy McKay	Director	(807) 537 – 2242
ON	Fort Hope	Mangatwin Eabametoong First Nation	Bertha Quisses	Executive Director	(807) 242 – 1212
ON	Mishkeego-gamang	Mishkeegogamang Safe House	Gina	Coordin-ator	(807) 928 – 2407
ON	Moosenee	Moosenee Family Resource Centre	Elizabeth	Shelter worker	(705) 336 – 2456
AB	Fort Chippewan	Mikisew Cree First Nation Paspew House	Caroline Adam	Director	(780) 697-3329
MB	Pukatawagan	Mathias Colomb Mamawehetwin Crisis Centre	Sheila Beardy	Asst. Director	(204) 553-2198
MB	Shamattawa	Shammattawa Crisis Centre	Florence Miles		(204) 565 – 2551
BC	Telegraph Creek	Three Sisters Haven Society	Donna	House Manager	(250) 235-3113
BC	Carmacks	Carmacks SafeHome	Joanne Maison-neuve	Director (half-time)	(867) 863 – 5918
YK	Dawson City	Dawson City Women's Shelter	Caroline	Shelter worker	(867) 993-5086
YK	Watson Lake	Help and Hope for Families	Shona	Director	(867) 536-2711
NWT	Fort Smith	Sutherland House	Bev	Senior Counsellor	(867) 872 – 5925
NWT	Tuktoyaktuk	Tuktoyaktuk Crisis Centre	Sara Crinaytuk	Executive Director	(867) 977 – 2070
NT	Cape Dorset	Tukkuvik Women's Shelter	Niru	Coordinator	(867) 897 – 8683/8915

PROV	TOWN	SHELTER	CONTACT	POSITION	TEL
NT	Rankin Inlet	Kataujaq Society Safe Shelter	Evelyn Thortoson	Director	(867) 645 – 2214
NT	Taloyolak	Innuited Women's Group Ikajuqtauvik Crisis Centre	Arnaoyok Alooqe	Counsellor /book-keeper	(867) 561 – 5902

Interviews were conducted with representatives of shelter services that met the population size / isolation criteria for similarity with Labrador communities. The full list of shelters considered for this study appears below.

PROV.	TOWN	SHELTER	Northern/ Abor.?	Pop < 1000?	Isolated?	NOTES
NS	Whycocomagh	Mikmaq Family Treatment Centre	Y	Y	N	
NS	Truro	Welkaqnik	Y		N	
NB	Miramichi	Miramichi Emergency Shelter for Women	Y	N	N	
QU	Montreal	Native Women's Shelter of Montreal	Y	N	N	
QU	Listuguj	Haven House	Y	N	N	
ON	Bear Island	Temagami First Nation Family Healing	Y	Y	Y	
ON	Big Trout Lake	Kitchenuhmanyk oosib	Y	Y	Y	
ON	Fort Hope	Mangatwin Eabametoong First Nation	Y	Y	Y	
ON	Matheson	CMHA Women's Shelter	Y	N	N	
ON	Mishkeego-gamang	Mishkeegogamang Safe House	Y	Y	Semi	3.5 hours from Dryden
ON	Moosenee	Moosenee Family Resource Centre	Y	2000	Y	
ON	Oshweken	Ganowhwa Shelter	Y	N	N	
ON	Southampton	Kabaeshwin Women's Shelter	N	N	N	
ON	Southwold	Onyota'a:ka Family Healing Lodge	Y	N	?	Info from another shelter
ON	Walpole Island	Three Fires Ezhignowen-mindwaa	Y	N	N	

PROV.	TOWN	SHELTER	Northern/ Abor.?	Pop < 1000?	Isolated?	NOTES
MB	Koostatak	First Nation Healing Centre	Y	1500	N	
MB	Pukatawagan	Mathias Colomb Mamawehetwin Crisis Centre	Y	3000	Y	
MB	Shamattawa	Shammattawa Crisis Centre	Y	Y	Y	
SK	Regina	Wichihik Iskwewak Safe House	Y	N	N	
SK	La Ronge	Piwapan Women's Centre	Y	N	N	
SK	Meadow Lake	Waskoosis SafeShelter	Y	N	N	
AB	Calgary	Awo-taan Native Women's Shelter	50%	N	N	
AB	Desmarais	Big Stone Cree Nation Women's Emergency Shelter	Y	N	N	
AB	Enilda	Sucker Creek Women's Emerg- ency Shelter	Y	Y	N	
AB	Fort Chippewan	Mikisew Cree First Nation Pospew House	Y	1500	Y	
AB	Hobbema	Loretta Safe House /Ermineskin Women's Shelter	Y	N	N	
AB	Morley	Eagle's Nest Stoney Family Shelter	Y	N	N	
AB	Peace River	Peace River Regional Women's Shelter	N	N	N	
AB	Pincher Creek	Pincher Creek Women's Shelter	Y	N	N	
BC	Atlin	Taku River Tlingits First Nation				Does not operate as a shelter, as such
BC	Duncan	Somenos Transition House	N	N	N	
BC	Fort Nelson	Fort Nelson Women's Shelter	Y	N	N	
BC	Lake Cowichen	Cowichan Lake Community Services	N	N	N	
BC	Telegraph Creek	Three Sisters Haven Society	Y	Y	Semi	Road access, off highway, 7-8 hours from Whitehorse

PROV.	TOWN	SHELTER	Northern/ Abor.?	Pop < 1000?	Isolated?	NOTES
YK	Carmacks	Carmacks Safe Home	Y	Y	Semi	2 hours from Whitehorse
YK	Dawson City	Dawson City Women's Shelter	Y	2000	Semi	7 hours from Whitehorse
YK	Ross River	Ross River Council Shelter				Telephone contact cannot be established
YK	Watson Lake	Help and Hope for Families				
NWT	Fort Smith	Sutherland House	Y	2400	Semi	3 hours from Hayriver
NWT	Tuktoyaktuk	Tuktoyaktuk Crisis Centre	Y	1000	Y	Flights every day
NT	Cape Dorset	Tukkuvik Women's Shelter	Y	1200	Y	Flights every day
NT	Pangnirtung	Tullivuk Group	Y	1500	Semi	Flights every day
NT	Rankin Inlet	Kataujaq Society Safe Shelter	Y	2000	Y	
NT	Taloyolak	Innuitit Women's Group Ikajuqtavik Crisis Centre	Y	Y	Semi	Flights every day

Other national informants

Louise Akuzawa, British Columbia / Yukon Society of Transition Houses

Debby Andersen, Manitoba Transition House Association

Catherine Carry, Special Projects Coordinator, Pauktuutit Inuit Women's Association of Canada

Virginia Fisher, Provincial Association of Transition Houses, Saskatchewan

Joanne Ings, Prince Edward Island Transition House Association

Salima Jethani, Woman Abuse Council of Toronto

Paula Lannon, SEDNA Association of Nunavut / N.W.T. Shelters

Eileen Morrow, Ontario Association of Interval and Transition Houses

Jan Reimer, Provincial Coordinator, Alberta Council of Women's Shelters

Janice Rumpel, Provincial Association of Transition Houses, Saskatchewan

International informants

Eileen Cummings, Aboriginal Policy Officer, Northern Territories, Australia

Ann Gorokhova, Executive Director, International Cross-Cultural Alcohol Program, Chersky, Russia

Amanda Graham, Steering Committee, Circumpolar Women's Conference; Managing Editor, *The Northern Review*, Yukon College, N.W.T.

Pam Griffiths, Director, Office of Women's Policy, Northern Territory, Australia

Tanya Jacobs, Aboriginal Policy Officer, Northern Territories, Australia

Tatiana Martinova, (Circumpolar Women's Conference Presenter), Chersky, Russia

Corrie Thompson, Women's Health Strategy Unit, Department of Health and Community Services, Darwin, NT, Australia

Janel Thurston, Northern Forum, Fairbanks, Alaska

Appendix 4: Glossary

Aboriginal

As used in this report, refers to any person of First Nations, Innu, Inuit or Métis descent.

CMHC

Canadian Mortgage and Housing Corporation

DRHE

Newfoundland and Labrador Department of Human Resources and Employment

FNIHB

First Nations and Inuit Health Branch of Health Canada

HLC

Health Labrador Corporation

LIHC

Labrador Inuit Health Commission

MIHC

Mushuau Innu Health Commission

NGO

Non-governmental organization

NLHC

Newfoundland and Labrador Housing Corporation

Shelter

Used broadly in this report to refer to any residential facility for abused women and their dependent children. See sidebar, p. 5 for definitions of various shelter types.

SIHC

Sheshatshui Innu Health Commission

VS Branch

Victim Services Branch, Newfoundland and Labrador Department of Justice

Appendix 5: CMHC Shelter Enhancement Program

Source: www.cmhc.ca

The Shelter Enhancement Program (SEP) assists in repairing, rehabilitating and improving existing shelters for women, children and youth who are victims of family violence; and in acquiring or building new shelters and second-stage housing where needed.

Who is eligible?

Eligible clients are:
non-profit corporations
charities that, as a principal objective, house women and children or youth who are victims of family violence.

As funding is limited to capital assistance, sponsor groups must obtain the assurance of operating assistance for emergency shelters. For second stage housing, occupants are expected to make modest contributions to offset the project's operating costs.

Eligible repairs/work are those required to:

bring existing emergency shelters and second stage housing up to health and safety standards

permit accessibility for disabled occupants

provide adequate and safe program and play areas for children

ensure appropriate security for occupants.

What assistance is available?

The assistance is in the form of a fully forgiveable loan which does not have to be repaid provided the owner adheres to the conditions of the program.

New Development :

For newly developed projects, CMHC may contribute up to 100% of a project's capital cost. This assistance must be secured by forgivable 15-year mortgage.

Renovation: The maximum loan for renovation varies with the number of existing units/bed-units within the project and its location.

Maximum Total Loan (per unit / bed unit)

Zone 1: Southern areas of Canada \$18,000

Zone 2: Northern areas of Canada \$21,000

Zone 3: Far Northern areas \$27,000

A 25% supplement in assistance is available in remote areas.

IMPORTANT: Work carried out before the loan is approved in writing is not eligible for funding under this program.

Other CMHC programs are available to assist eligible Canadians with repairs to substandard housing, housing modifications and adaptations for persons with disabilities and seniors.

In some areas of Canada, funding for these or similar programs is provided jointly by the Government of Canada, and the provincial or territorial government. In these areas, the provincial or territorial housing agency may be responsible for delivery of the programs. Program variations may also exist in these areas.