

# Violence Against Women

Executive Directors Survey of Supports and Services



2011

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# EXECUTIVE DIRECTORS SURVEY

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## METHODS

A list of 112 Executive Directors (ED) from Anglophone shelters across Ontario was obtained from Shelternet.ca. This list was reviewed and updated by the Research Advisory Committee consisting of 8 EDs from a cross section of Ontario shelters and 8 service providers in the violence against women (VAW) service sector. The province was stratified into the 4 regional administrative boundary areas (RABA) of Northern, Eastern, Western, and Central, as well as a designated stratum for shelters that served primarily an Aboriginal population. A minimum of 7 shelters were selected from each of the five strata. The ED survey was completed between February and July 2010. EDs were contacted by telephone and surveys were conducted in person over the telephone. All surveys were taped and transcribed and the data was entered into an online survey form during the course of the interview. Executive Directors who were unable to be reached by phone were asked to complete a condensed online version of the survey.

## ANALYSIS

All analysis was done using SAS version 9.2. Response distributions were summarized using the mean and standard deviation or minimum, maximum and median as appropriate. Results are presented overall and by region. Regional differences were examined using the Wilcoxon Rank Sum test or the likelihood ratio chi square test for categorical data.

## RESULTS

A total of 56 survey ED interviews were completed as well as 12 self-completed condensed online surveys. One respondent to the online survey did not provide any geographic information; the remainder were relatively equally distributed across the province. There were 12 from the Central region, 11 from the Eastern region, 12 from the Northern region, 20 from the Western region, and 12 shelters who served primarily Aboriginal women. Of the 12 Aboriginal shelters, 4 were in the Northern region, 3 were in the Western region, 2 were in the Central region and 1 was in the Eastern region.

### Shelter Information

Information on shelters and services offered is summarized in Table 1. On average, there were 17 beds per shelter, with more beds per shelter in the Central and Western Region. The lowest number of beds per shelter was found in the Northern region (see Figure 1). The number of beds does not represent the level of funding for example "Actually we have 27 beds with funding for 15 – donations & fundraising pay for the rest". " We always work with more than 100% occupancy for funded beds". Shelters tried to be flexible in meeting needs; " If we need shelter beds, we sometimes have longer term residents at shelter move into a vacant apartment for a few nights. Second stage is beside the shelter.

We also allow women in second stage to spend a few nights in shelter, if going through a bad time e.g. at Christmas."

## Staffing

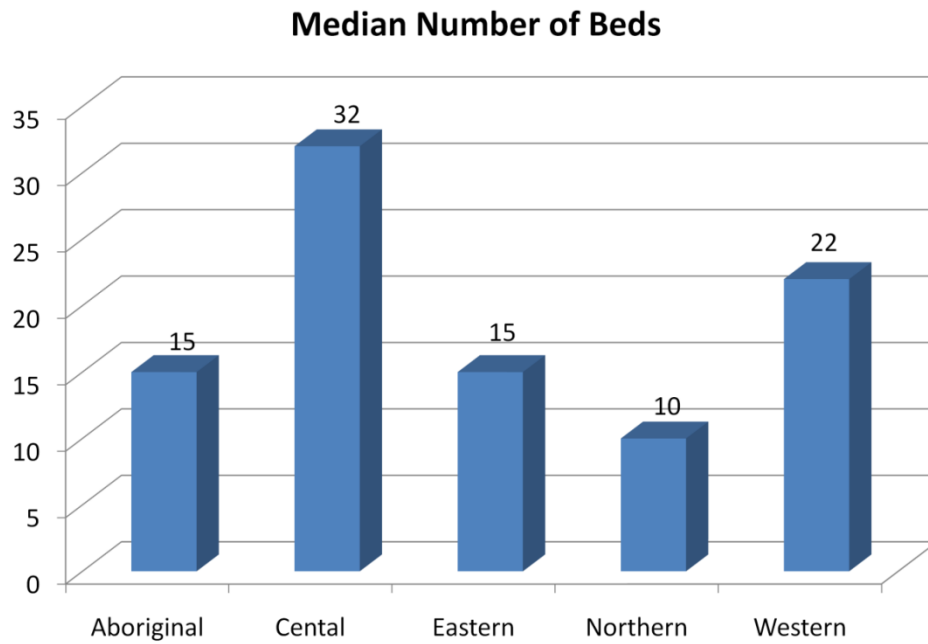
Shelters hired a median of 12 fulltime and 9 part-time staff. Fulltime staffing was highest in the Central and Western regions and lowest in the Northern region (see Figure 2). Shelters relied heavily on volunteer staff with a median of 17 volunteers and 10 volunteer board and committee members. The number of volunteers ranged widely with some shelters maintaining pools of as many as 300 volunteer drivers. The greatest number of volunteers was found in the Eastern region with the Northern region using the fewest volunteers.

Overall, staffing was minimal in shelters, in contrast to larger organizations there was very little administrative support; "...on top of lack of space to do programming, there is no administrative support, no IT support, no HR support..." These are all roles that the ED must do cutting in to time for advocacy. Resources were frequently stretched for evenings and weekends; " We have problems on nights & weekends when we only have one staff member".

Table 1 Distribution of responses to Executive Directors Survey

Survey Question	Number responding	
<b>Shelter Information (median, min, max)</b>		
Number of beds	56	17 (0,67)
Number of Fulltime Staff	63	12 (0.4,40.1)
Number of Part-time Staff	53	9 (1.73,23)
Number of volunteers	50	17 (0,300)
Number of board members	55	10 (0,36)
<b>Accessibility (%)</b>		
Accessible entrance, washrooms, bathrooms etc	68	83.8%
TTY line	68	69.1%
Staff trained in working with disabilities	68	66.2%
Materials in alternative formats	68	48.5%
Materials in multiple languages	68	70.6%
<b>Do you provide (%)</b>		
Service to women residing in shelter	63	100.0%
Service to women not residing in shelter	63	96.8%
Second Stage housing	66	36.4%
<b>Primary Mandate (%)</b>		
<b>Who should your shelter serve</b>		
Abused women	64	1.6%
Abused women and children	64	71.9%

<b>Survey Question</b>	<b>Number responding</b>	
Abused & homeless women & children	64	6.3%
other	64	20.3%
<b>Who else do you serve (%)</b>		
Children of abused women	68	16.2%
Homeless	68	52.9%
Children of Homeless	68	41.2%
Abused Men	68	14.7%
Mental Health Respite	68	8.8%
Other	68	33.8%
<b>General Services and Programs offered ( %)</b>		
Short term Counseling	56	98.2%
24 hr crisis line	68	94.1%
Food and Clothing	68	79.4%
2 hr Legal Aid Certificates	68	79.4%
Recreational Programs or activities	68	69.1%
Child care/respice	68	67.6%
Furniture & household goods	68	66.2%
Life Skills Program	68	64.7%
Sexual Assault Program	56	42.9%
Health Care Services	68	35.3%
<b>Routinely support women in (%):</b>		
accessing housing	68	94.0%
obtaining employment &/or income support	68	83.3%
applying for residency or making a refugee claim	68	7.6%
in obtaining additional health services or documentation	68	40.9%
navigating child welfare/protection services	68	75.7%
accessing child health services	68	34.9%
accessing educational/recreational services for children	68	50.0%
obtaining cultural or language specific services	68	36.7%
<b>Routinely support women with issues related to:</b>		
family law	68	72.7%
criminal law	68	40.9%



Wilcoxon Rank Sum  $p=0.0002$

Figure 1 Median number of shelter beds by region.

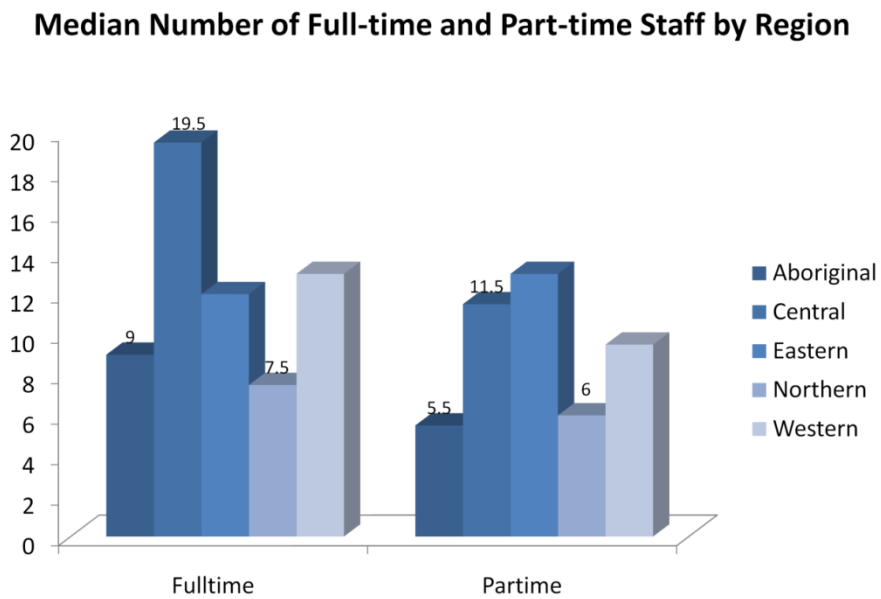


Figure 2 Median number of fulltime and part-time staff by region.

Volunteers were responsible a range of services including fundraising, managing donations, and operating the food bank and second hand store; governance and general shelter operations such as assisting in the office, answering phones, security, yard work, maintenance and cleaning; direct client/family contact and shift support such as child care & recreational activities, going on outings, driving to appointments, assisting women complete applications, and resumes, find apartments, facilitating groups and student counselling placements ; building public awareness through public presentations and supporting special events and acting as board members.

## **In Shelter and Community Service**

In addition to providing service to women in shelter, 97% of shelters offered service to women in the community (not residing in the shelter) and 36% offered Second stage housing. EDs reported that there were no important differences in how services were provided to women in shelter, in second stage housing, or in the community; however, there were differences in the needs of the clients and how service was delivered. EDs reported that women in shelters are in crisis and therefore shelters provide a transitional support program with services offered 24 hours a day. The focus is on security, short term counselling, interim custody orders, and meeting the basic needs of food and shelter. Women in second stage housing have more access to other community services. Counselling is provided by appointment and support is geared toward life skills, budgeting, accessing services, court process, parenting. Women who access the community counselling programs may be more settled, established or even still living with their partner. In outreach, there is more focus on group support, longer term advocacy work, and legal advocacy.

## **Accessibility**

There were no regional differences in accessibility (see Figure 3). All shelters reported a high rate of accessibility services including: an accessible entrance, washrooms bedrooms etc (84%), a TTY line (69%), specially trained staff for working with women and children with disabilities (66%), and materials in alternative formats (49%) and materials in multiple languages (71%). The most commonly available languages were English and French and in some cases safety planning information was available in 13 languages. Alternate format &/or translations were least common in shelters serving primarily aboriginal women. Although funding was not always available at the individual shelter level for translation into other languages shelters took advantage of shared resources (such as shelternet.ca) to help meet the need. Although a clear effort was being made to train staff to develop a broad skill set the range of problems and needs make this challenging. "Sometimes our strengths become our challenges...staff are required to have so many skills, our diversity can also create a challenge for the women in shelter- i.e. they may have never met transgendered women, women with mental health issues for example".

## Access to Service by Region

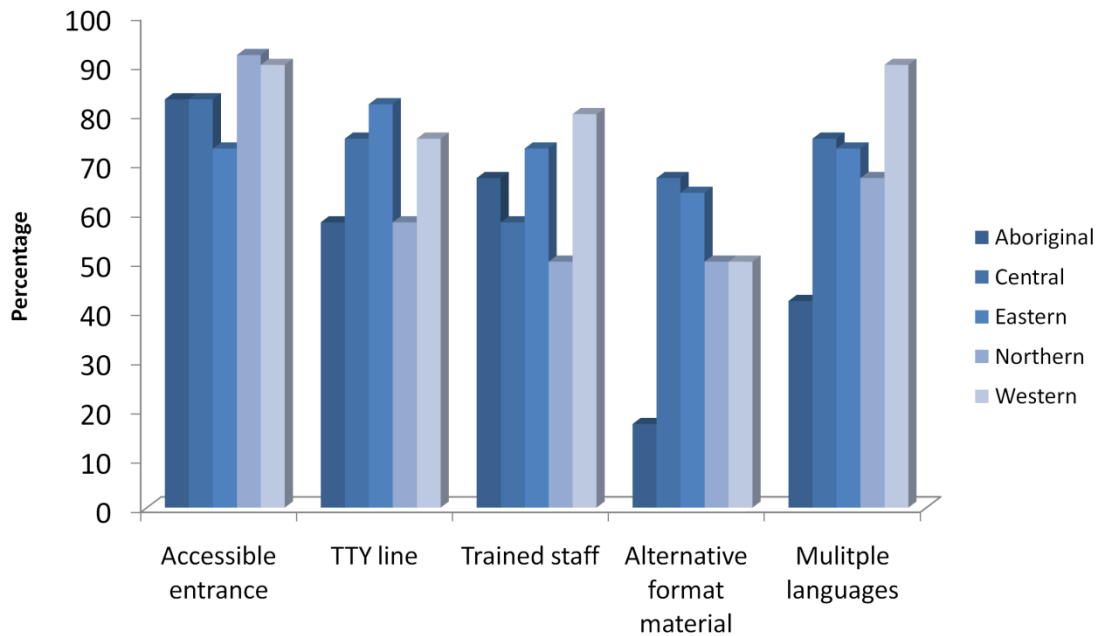


Figure 3 Accessibility to service. EDs were asked the question: Does your shelter have....

## Service Mandate

For 72% of shelters, their primary mandate was to provide service to abused women and their children, 6.3% included homeless women within their primary mandate, others included vulnerable women of any kind. In addition to their primary mandate, shelters also extended service to homeless women (53%) and their children (41%), and abused men (15%). In the Eastern and the Western region, shelters also provided mental health respite (9% and 25% respectively). EDs reported that "homelessness is a systemic issue related to woman abuse. Our ability to take in homeless women and children, if abuse is not obvious, depends on our occupancy level at the time." Other populations served included women who had experienced any form of violence - including landlord or employer abuse, immigrant women, teens sexually abused by family and or non-family members, sex trade workers, women with addictions, and young women (and boys) at risk. Although most shelters serve a geographically defined area they often extend their reach beyond their geographic boundaries. "Our mandate is to serve women & children escaping violence from <our> County; however, we do serve women from < both outside the county> and outside of the province".

## General Services and Programs Offered

Almost all of shelters offered short term counseling (98%) and had a 24 hour crisis line (94%). In addition, almost 80% provided food and clothing and two hour legal aid certificates; between 60% and 70% provided furniture and other household goods, life skills programs, child care/respice, and recreational programs for children; 43% offered sexual assault programs, and 35% offered health care services. In addition to serving women and children 97% of shelters participate in community and public policy advocacy and 91% are involved in research and evaluation of services.

## Supports Offered to Women

Across the province, shelters routinely or often supported women:

- in accessing housing (97%)
- in obtaining employment and/or income support (100%)
- in obtaining additional health services, or health documentation (82%)
- in understanding and navigating child welfare/protection services (94%)
- in accessing education and recreational services for children (78%)
- in accessing child health services (75%)

There were some regional differences (see Figure 4)

- in applying for residency or making a refugee claim ( $p < .001$ )
- in obtaining cultural or language specific services ( $p = 0.024$ )
- with issues related to criminal law ( $p = 0.013$ ) and family law ( $p = 0.014$ )

Although 67% of EDs in the Central region routinely or often supported women in applying for residency or making a refugee claim, support related to immigration and residency were less common in other regions and less than 10% of shelters serving primarily aboriginal women reported support in this area. Support in obtaining cultural or language-specific services was most common in the Central region and in shelters serving primarily aboriginal women. Supporting women with issues related to criminal law was more common in the Central and Western region; whereas, supports related to family law were least common in the Northern region.

## Regional Differences in Supports Routinely Offered to Women

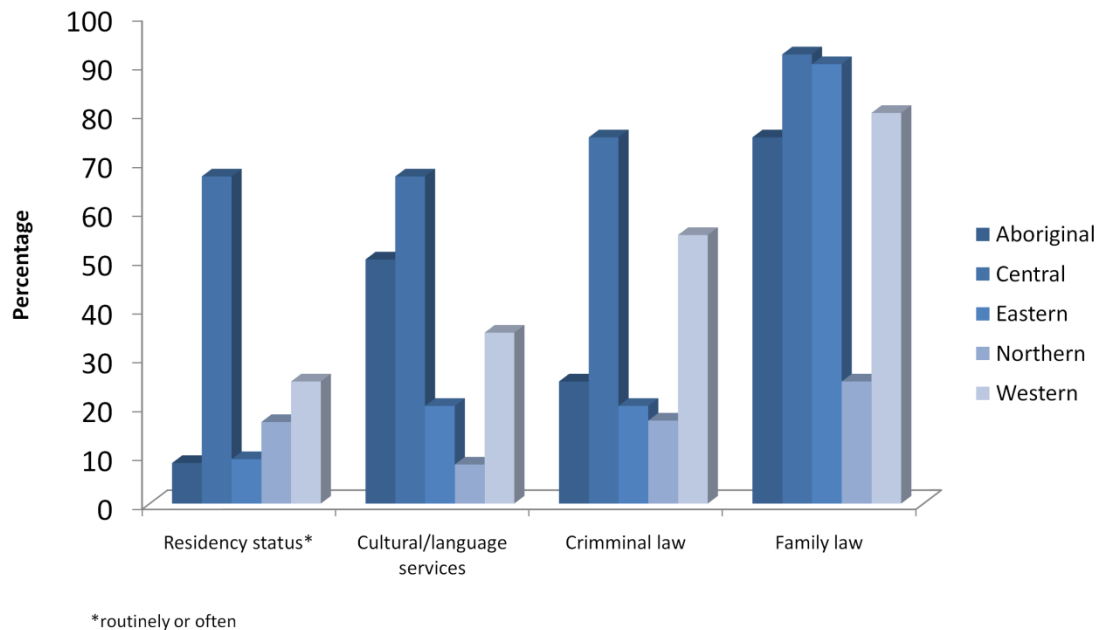


Figure 4 EDs were asked whether they routinely, often, sometimes or never offered a list of supports for women. This figure illustrates regional differences in shelters who report "routinely" supporting women in obtaining cultural or language-specific services, with issues related to criminal law, with issues related to family law and regional differences in shelters who "routinely or often" support women in applying for residency status or making a refugee claim.

## Networking

Shelter staff frequently network with a number of agencies including government services and agencies in the education, not for profit, medical, community and legal sectors (see Appendix I). Networking is done both one on one and through coordinating committees. One on one networking frequently begins with a shelter front line worker phoning another front line worker in another agency. Contact may be through formal or informal contact. Many frontline workers have developed relationships over the years and know each other well, other agencies have a designated contact person to work within the VAW sector. Workers may also make cold calls to identify new services. Confidentiality forms are signed and then the front line workers brainstorm on how best to solve the problems. Case conferencing is done on an individual basis. Shelter worker will frequently follow through by accompanying a woman to an appointment.

In addition, a great deal of networking occurs during the meetings of a wide variety of coordinating committees - many of whom meet weekly or monthly. Committee meetings provide opportunities for interaction between Executive Directors and front line workers of other agencies. These coordinating

committees allow for the development of protocols about "who does what" in order to provide "wrap around service". Interdisciplinary committees foster relationship building and communication across levels of service. Membership crossover strengthens collaboration. " We put staff members on board of directors of some of the other agencies; e.g. legal aid, police services, CAS, hospital and/or advisory committees; each staff person becomes an expert in one area". As well agency representative are invited to sit on the Board of Directors. Knowledge exchange is fostered through "cross training with other agencies" education programs and "agency information days"

Directors identified numerous barriers to providing service including:

- poverty and lack of funding at the individual level
- access to and cost of transportation - particularly in Northern and rural regions. Shelters will try to maintain a large pool of volunteer drivers because no other transportation systems are available
- affordable housing
- availability/access to existing service - frequently faced with extremely long waiting lists
- support and resources available at level of service provider
- legal issues and power structures
- lack of understanding/knowledge/awareness of the dynamic of violence
- System issues - individual agencies work in silos, lack of formal protocols
- Knowledge demands on shelter staff - expected to know about all services
- a woman's personal readiness - there is an erosion of women's self-esteem and confidence as a result of abuse

## Counseling Services

Counseling services were routinely offered to all women. Executive Directors **from 15 shelters** were asked more detailed questions about counseling services. EDs reported that counseling served to help women to :

- Understand the dynamics of violence
- Learn to recognize different forms of abuse and cycles of abuse
- Develop safety strategies and planning

In addition, in 93% of the 15 shelters interviewed counseling was also offered for:

- Understanding childhood experiences of violence or sexual abuse. Among native women this may also include helping to identify the impact of colonization, historical abuse, and the ways in which abuse can be the result of oppression
- Parenting support and other related issues.

Standardized tools for assessing risk (e.g. risk for homicide, increased abuse towards woman or shelter) were used by 73% of shelters and 93% of shelters networked with other organizations and agencies to provide these services.

### **How does this networking usually happen**

Networking usually happens at the committee level and by one on one referral. Joint training and group programs are offered with other agencies to facilitate cross-sectoral work. Advocacy and help to navigate systems, is done on a case by case basis through informal meetings, email, and telephone. EDs reported that staff will also attend one or more appointments with the women & children if they want; "if the woman is on the path to healing and ready to make a commitment, we will give them the information and let them make the call." Regular contact through committee meetings, helps develop relationships.

### **How do these counseling services help women**

EDs reported on their impressions of the benefits of counselling services to women. In summary EDs reported that counseling is an immediate solution that is universally accessible and does not cost anything. It is available to women both within and outside of the shelter and safety planning is done at every session. It is a non-judgmental understanding of where she is in the change process. If women are to move beyond lives that are full of violence and abuse, they require the skills & abilities to do so; counselling empowers women to do this. Information is power, counseling provides women with choices and options, and helps them heal. "The need is so great in our community for the immediate abuse and also for the historical abuse. The most significant work we do is believing them and supporting them by normalizing their reaction to their abuse and not judging". Counselling helps women to make sense of their world and to understand that even if they live in an abusive relationship now, they are not alone. There is a window if they choose to go through it. Counseling helps them to have the ground under their feet. Even if they feel worthless we can help them to "get back to where they were", to reconnect with their own strengths. The shelters job is to make women feel safe , support them in making informed choices, educate them of the effects of violence on them and on their children. We help them understand why their families may not understand what is happening. Counselling can empower women to make a commitment and help women to become more independent and stand on their own. In the end the goal is to help women not be in a similar situation and progress toward peace and harmony. The counselling provided by shelters is geared towards believing women's stories and empowering women. It employs a feminist analysis not a medical model. In the end women feel validated and recognized for strengths and survival skills. When women meet other women, they realize they are not alone and the synergy that happens

### **What are the barriers to providing these services**

The EDs identified a number of barriers to providing counseling services. Beyond people not knowing about our services and how to access them, lack of funding is at the core of many of the barriers. It impacts on available resources and staffing. Frequently we can only afford a single shift on weekends and evenings. Frequently we have to hire young inexperienced staff and then invest in training - but then the staff move on once they gain the experience. To effectively meet the needs of women, staff need a complex skill set including being multilingual and culturally sensitive. Staff do not have sufficient

mental health training. This is compounded by the fact that the shelter is frequently used as a "dumping ground"; where clients were being "dumped" on our door step on a Friday afternoon with mental health issues not domestic violence issue . Meeting the needs of both women and children frequently stretches resources and limits the amount of available time for counselling. " When the house is really busy, the workers not having the time to provide this to each and every woman when she needs it; Moms with young kids don't get a break and they don't have the energy at the end of the day to speak to a counsellor. We don't have relief for children." In northern and rural areas, isolation presents an enormous barrier - there is limited cellular service, the geographic area is large and access and funding for transportation is poor. In the winter, access is even more limited. Limited understanding and integration of services can result in problems. " The other services are counter-productive to what we are doing. For example the husband may have unsupervised access, but she does not. The consequences of dealing with CAS and O.W. and legal systems often lead women to think they should return to abusive situation."

## Housing

All shelters were routinely or often involved in assisting women to meet their housing needs . Executive Directors **from 22 shelters** who routinely helped women to meet their housing needs were asked more detailed questions. Subsidized housing (including verification of eligibility for special priority status) was the most common form of housing, followed by rental properties, although 50% of shelters reported helping women in obtaining their own home. Support in accessing housing was most commonly (>95%) done by providing information, linking and referral to other services, helping women prepare for meetings and appointments, assisting women to understand the rules, policies and outcomes and by helping them to work through options and plans. In addition 90% reported that their shelter provided specific services and that they would accompany women to meetings and appointments. In all cases shelters networked with other organizations and programs to provide this service.

### How does this networking usually happen

EDs reported that networking happened formally and informally both one on one and through regularly scheduled meetings with housing authority, social housing programs, and community networks. In addition to recognized housing networks and services staff build relationships with private landlords and real estate brokers who are open to renting to women on a priority basis and help link them with various funding programs. Staff will make cold calls to local landowners. Specifically, one ED reported "We are a member of ONPHA; and share information on evictions, retrofitting, funding issues; and send copies of AGM material to the Housing Authority".

### How do these housing-related services help women

EDs were asked for their opinions on how the housing related services they provide help women. In summary, EDs felt that securing safe, affordable housing is the critical piece - and most difficult - in helping women to move forward and be able to leave an abusive situation. It is the very first need they need to address. " If they don't have housing, they can't get on with anything else. " "We are the whole

connection with them getting housing. The women often don't know where to begin." Shelter staff help navigate the system by filling out forms so that women can get what they need. It makes the process much simpler. "We help her work out whether it is a good deal and help to work out strategies with her if the landlord is reluctant to rent to someone on OW. Having their own place makes them feel safer.

### **What are the barriers to providing these services**

The primary barrier is cost and availability; particularly when first entering a rental agreement when many landlords require first and last month's rent. Income subsidies are frequently insufficient to cover the costs of both housing and food - particularly for single women. Rules and regulations present barriers and seem to discriminate against single women. Previous arrears incurred by their spouse make them ineligible for phone and hydro - that or the complete lack of a credit history. The priority definition of "victim of abuse" is too narrow and excludes many women in need including: those who do not meet the 3 month policy of having left abuser or those who have explored other options first and therefore are no longer considered "abused".

## **Financial Support**

All shelters were routinely or often involved in helping women obtain employment and/or income support. **Fifteen shelters** who reported routinely helping women obtain employment and/or income support were asked details about the nature of support provided to women. All 15 shelters reported providing job training programs and employment resource centres. They also provided workshops on ways to find jobs, such as use of the internet, and how to prepare resumes and prepare for interviews. Women were encouraged to upgrade their education and shelters provided information on how to obtain funding for educational upgrading. Financial support was obtained from a number of sources including: Ontario Works, disability support, and employment insurance. More than 80% of shelters also found support from other employment-related or income support services such as CPP, the child tax benefit, OSAP, child support and criminal injuries compensation. This was done most commonly by providing information, linking and referral, helping women to prepare for meetings and appointments and by assisting women to understand rules, policies, and outcomes. In 93% of cases shelters offered specific services and accompanied women to meetings and appointments. All 15 shelters networked with other employment or income support organizations or agencies.

### **How does this networking usually happen**

Shelters network with Employment Resource Centres (such as Job/Youth Connect ,Native Friendship Centres), Ontario Works, Ontario Guaranteed Annual Income System (GAINS), Ontario Disability Support Program (ODSP) Child Tax Benefit, Human Resources Development Canada (HRDC) and individual employers and colleges. Networking happens both formally and informally through regular meetings and one on one contact. There is frequent communication and regular updates between the front line workers at the shelter and the designated Ontario Works worker. Shared meetings and committees help

to establish relationships. Other agencies are invited to come to staff meetings and shelter ED and staff sit on a number of advisory committees that intersect with related agencies.

### **How do these employment and income related services that you provide help women**

Financial support helps move women from crisis to stabilization. Getting access to financial resources goes hand in hand with being able to access and retain housing. In addition to securing financial support shelter staff provide them with an understanding of what a reasonable budget is and what they can and cannot afford. EDs reported wanting to support women in achieving their goals; education first usually before employment. Employment facilitates longer term planning and results in increased self-esteem and confidence. "The system can be pretty intimidating so these services help them deal with the system. We make the connections for them." Some women have never had to access employment and financial services before so shelter staff help introduce them to the service. "Sadly but true, women get better results when accompanied by a worker...they are treated with more respect."

### **What are the barriers to providing these services**

Lack of education is a barrier to employment. Many women lack the basic skills or have no employment experience. This is exacerbated in Northern regions where there is a lack of literacy due in part to the high drop-out rate of natives in school (78%). However, the system is not supportive of women getting further education while maintaining income support

There are systemic issues of rules and regulations related to income support (such as lack of required documentation or lack of family doctors to complete forms for ODSP) that create unnecessary barriers. There is almost a disincentive to find work while in shelter. "As long as you are in the shelter can't get O.W. yet you can't get housing until have confirmed source of income". Even when all supports are in place barriers such as access to transportation and affordable child care still make it difficult for women to improve their education or pursue employment.

## **Family Law**

The majority (97%) of shelters routinely or often provided services to women to help them navigate the family law system; however, regional differences did exist ( $p=0.013$ ). Over 80% of shelters routinely offered support with issues related to family law in the Central, Eastern, and Western regions; whereas only 25% of shelters in the Northern region and 75% of shelters serving Aboriginal women routinely offered support services. **Sixteen (16)** shelters that routinely supported women with issues related to family law were interviewed about the supports they provide. EDs reported supporting women in almost every area related to family law. All shelters reported providing help:

- in navigating the family court processes
- with restraining orders and peace bonds
- in obtaining legal representation
- with obtaining child &/or spousal support
- negotiating child custody or access to children (including supervised visits)

Most EDs interview also reported providing support:

- in understanding their rights regarding exclusive possession of the family home (94%)
- for underrepresented women (94%)
- in understanding the Child and Family Services Act - including the duty to report (94%)
- for understanding the implications of mediation, arbitration or collaborative law (81%)
- for Ex-parte motions and Property orders (69%)
- Property orders (63%)

Other supports related to family law included providing office space for lawyers and arranging transportation to and from court. Shelters support women by acting as a source of information all the way through to accompanying them to meetings and appointments and helping them understand rules, policies and outcomes. In more than 90% of the shelters interviewed the staff helped women work through their options and develop a plan. All shelters reported networking with other agencies or organizations. Shelter staff worked closely with the women to provide them the emotional support needed to get through the family law system. The shelter played a role in improving the efficiency of the system by helping women prepare by writing down their stories before going to the lawyer, thereby saving time on the legal aid certificate

#### **How does this networking usually happen**

Shelters develop long term relationships with lawyers and get to know which lawyers are willing to take domestic violence cases. Shelters will provide space for lawyers to meet with women, staff interact with them regularly both formally and informally by sitting on committees together, case conferencing, and maintaining regular phone contact.

#### **How does the support, related to family law, you provide help women**

Shelters play a central role in helping to educate women about the system so that they can understand their rights know what to expect and how to navigate the system. The assistance provided by the shelter results in more efficient use of the system by helping women fill out forms, translate documents and make more effective use of their time with legal aid lawyers. Left alone many women "would be lost". The family court system can be an "intimidating process even for those of us who are versed in the area". It can be "particularly overwhelming for women who have low levels of literacy" who are "already suffering from low self-esteem" .

#### **What are the barriers to providing these services**

EDs identified a number of barriers to providing service. Lack of understanding of the dynamics of violence results in differences in the risk assessment by the court system, CAS, lawyers and judges. A lack of funding means that there are an insufficient number of legal aid lawyers and the system does not properly compensate lawyers for time and travel. The theme of "time" was repeated often: often waiting around a full day only to have the case adjourned and having to make multiple repeat appearances - often at a distance away.

## Criminal Law

The majority of shelters (78%) routinely or often provided services to women to help them navigate the criminal law system. There were some regional differences ( $p=0.014$ ) with over 90% of shelters in the Western, Northern and Central Region providing supports related to criminal law compared to 64% in the Eastern region and 50% of shelters serving primarily Aboriginal women. **Twelve (12) shelters** who routinely supported women with issues related to criminal law provided detailed information about the supports they provide. All 12 shelters described providing support to women for:

- getting victim support and witness support services
- navigating criminal court processes
- dual charging and single charging against women
- understanding the role of the police

In addition, most supported women with

- criminal injuries compensation claims (88%)
- understanding the implications of the child and family services act for criminal law (88%)
- Probation and parole processes (88%)
- Other supports related to criminal law included supporting women through criminal proceedings and helping women prepare complete documentation.

Shelters provided support to women by simply providing information all the way through to helping women work through their options and develop a plan. All shelters reported networking with other agencies or organizations.

### How does this networking usually happen

Most networking occurs on the front lines and through shared committee work. For example, the Abuse Issues Coordinator from the OPP, lawyers, and victim witness staff, all sit on Human Justice Coordinating Committee. Shelters also bring in representatives from the various organizations to do staff training and invite Legal Aid to speak with residents. Most EDs reported working frequently with a domestic assault review team or advisory committee and that staff build personal relationships on an informal basis by repeated contact with legal aid lawyers and court representatives.

### How does the support, related to criminal law, you provide help women

The supports provided help reduce isolation and stigmatization and provide a sense of belonging and acceptance that women wouldn't otherwise have. "We're there as translators for them, provide support, so they don't feel alone." EDs commented on how the justice system is not designed to help women; it was designed by men for men. Shelter staff help prepare women to have realistic expectations and provide options so that they can make good, informed decisions. We do lethality assessments when the police have not done them and provide that information to lawyers and judges. EDs reported that by accompanying women through the court systems they are more likely to get the information they need. "A women is treated differently when she is accompanied. We help to validate a

woman's experience that the abuse is wrong and help reduce their fear based on previous experiences with police." In the end it makes them a stronger witness and empowers them to speak on their own behalf. "We do a lot of work beyond the courts ... it doesn't end there. "

### **What are the barriers to providing these services**

EDs identified a number of barriers in supporting women with issues related to criminal law. In summary, EDs described it as a system of towers as opposed to an integrated support system. "Police and shelters have different mandates and there is an inconsistent application of policy by police." The lack of effectiveness of restraining orders and the lack of linkage between family and criminal court causes women damage. Change in protocols over the years means that often police don't make direct referrals to shelters, instead they go through VICERS, forcing women to have to tell their story repeatedly. A more direct system would be more helpful to more women and help to minimize the shame involved in the recounting of events. EDs reported frustration over having to revisit issues " we are coming back to fight some of the battles we thought we had fought before...dual charging, reasonable and probable grounds". Women are being seen as primary aggressors and being singly charged. "The police seem to charge everybody these days to let the courts sort it out." Some EDs reported that for Aboriginal women racism and sexism is woven into everything. There is a belief that aboriginal women are violent particularly when drinking is involved.

It is an extremely time consuming process and there is a shortage of resources; both in terms of support from legal aid and the available level of staffing at shelters. Often workers have to downsize their case load to complete the lengthier serviced clients. Women have to take time off work then it gets remanded. There is limited access to affordable legal aid. " We have a list of 20 lawyers who are supposed to take legal aid, only about three, in fact, do.". Women in remote communities have the added burden of transportation costs and the additional time involved. The physical building is not comfortable and there are no services in courthouse. Add to that the fact that women often have children in tow.

### **Immigration Law**

Although not as common, 25% of shelters routinely or often provided support and 52% sometimes provided support to women in applying for residency or making a refugee claim. There were regional differences in supports related to immigration law ( $p < .0001$ ). Sixty-seven percent of shelters in the Central region, and 25% in the Western region routinely or often supported women in applying for residency or making a refugee claim; compared to 10% (Eastern), 17% (Northern) and 8% (Aboriginal). EDs from **10 shelters** that routinely or often supported women in applying for residency or making a refugee claim, provided detailed information. Supports services regarding immigration law included: making a refugee claim, helping women without status access service, helping women when their status is in jeopardy and providing women with information regarding legal status and their rights. Other supports related to immigration law included- working with First Nations organizations in the United States and dealing with sponsorship breakdown. Shelters provided support to women by simply

providing information all the way through to helping women work through their options and develop a plan, including 90% of shelters who provided specific service(s) or resources in the shelter.

### **How does this networking usually happen**

EDs reported that the client usually identifies the problem and works with shelter staff and interpreters to identify the best agency. Outside agencies (Salvation Army, multicultural centre) provide funds to make the application, and provide supporting documentation to Immigration. The shelter maintains both formal and informal relationships with other agencies (meetings, committees & lunches).

### **How does the support, related to immigration law, you provide help women**

EDs reported that the majority of women who come in don't know where to begin. Their partner may have kept their papers and they are unsure of their status. Women feel they are in jeopardy of being deported if they leave. Shelter staff provide them with the information they need to identify their options and move forward. The support we provide helps them to remain in Canada. Immigration Canada is more considerate when we are able to help provide the missing information. If they can't get work visas their hands are tied because they can't access support services (e.g. housing, health care, employment).

### **What are the barriers to providing these services**

"It is a very long, confusing, and expensive process; particularly when English is not your first language." The system is constantly changing and it is hard for staff to keep abreast of all the rule changes. Lack of funding is always a problem because most applications are costly and lawyers are scarce. One ED reported that approval based on humanitarian grounds is no longer being honored. As a result up to 90% of women are turned down. Immigration Canada does not understand the full impact of domestic violence and its impact if she returns - such as the fact that the children would end up staying with the abuser. Information can be difficult to obtain and there is a lack of translation into enough languages.

## **Health Services for Women**

Eighty-two percent (82%) of shelters provided support to women in obtaining additional health services or health documentation. EDs from **10 shelters** that routinely supported women in obtaining additional health services provided detailed information on the types of health services they provide or make arrangements for

All 10 shelters provided support for:

- pre and post natal education and support to women and newborns
- programs to help women develop healthy lifestyles (e.g. smoking cessation, nutrition, exercise)
- mental health services

In addition:

- ❑ 90% of the EDs reported making arrangements for routine physical exams, assessments and treatments
- ❑ 90% provided health services for women with disabilities
- ❑ 80% provided services for women with substance abuse
- ❑ 80% made arrangements for access to specialized health services
- ❑ 70% of shelters made arrangements for forensic exams, assessments and documentation
- ❑ 20% provided other health care services including traditional health support and obtaining health cards or Indian status cards so that they can get service and obtain medication.

Seventy percent of the shelters responding provided specific within shelter services and all 10 shelters provided a hierarchy of support from providing information through to helping women work through their options and their plans. In all cases shelters networked with other agencies and organizations to provide these services.

### **How does this networking usually happen**

Networking is both formal and informal and usually done on a case by case basis. Shared committee work helps build relationships. Staff get to know physicians, nurses, etc. through case conferencing and by accompanying women to appointments. For example as reported by one ED; "We have a protocol with Community Mental health so that a crisis worker will come to the shelter. We also encourage cross training and working with outreach workers to help bridge gaps".

### **How does the support, related to health services, you provide help women**

EDs believed that the supports provided increased awareness of the available options. Examples included: "We make the connections for them; and walk them through the process in a respectful way that helps reduce their fears". " We are concerned about women being re-victimized within a medical model of care and therefore we advocate on their behalf whenever possible". EDs strongly believed that adequate health care is an important part of wellness. "We educate women to set up for success by providing follow-up and after care to make treatment successful and minimize relapse." " It can be lifesaving since sometimes they don't even have their prescriptions with them, for example diabetes heart, or thyroid medication. "

### **What are the barriers to providing these services**

EDs identified a number of barriers to providing service. In summary, women cannot always find a new doctor if they relocate and therefore face transportation barriers if they wish to remain with their previous doctor. There is a lack of family doctors and those who are accepting new patients and they can be selective of whom they choose to take into a practice making it more difficult for women to find a new health care provider. Many women have not had a positive experience with the health care system and therefore there is a lack of trust. Women with mental health issues who have been abused don't always do well in a shelter environment due to chaos, noise, etc. and therefore need another kind of environment on leaving hospital. There is a stigma attached to mental health issue and lack of understanding on the part of other women living in shelter.

## Child Protection Services

All shelters routinely or often provided support to women in understanding and navigating child welfare/protection services. **Fifteen (15) shelters** who routinely offered service responded to the detailed questions about child protection services. All 15 shelters assisted women in:

- navigating the child welfare system
- understanding the impact of domestic violence on children
- safety planning for their children

In addition:

- 93% assisted women in understanding the implications of the Child and Family Services Act and the role of the Children's Aid Society
- 87% assisted women in following shelter protocols

Other services identified by the EDs included:

- providing mothers with child witness program materials
- working with clan mothers
- acting as a mediator between women and CAS
- liaising with the Children's lawyers office

Over 86% reported providing specific within shelter services and all 15 shelters provided a hierarchy of support from providing information through to helping women work through their options and their plans. In all cases shelters networked with other agencies and organizations to provide these services and 93% reported using a collaborative services model with Child Welfare.

### **How does this networking usually happen**

EDs reported that networking was built upon a system of both formal and informal relationships developed over the years from working together in meetings, case conferencing, face to face and telephone at both the front line and management level. EDs reported constantly trying to develop or update protocols with agencies.

### **How does the support, related to child welfare, you provide help women**

It helps the children understand the situation they are in and to understand the feelings they have about their father. The staff are role models to show a different way of handling things with each other. Shelter staff hear their frustration and validate them. There is a lot of fear from women around CAS. Most women in shelter are terrified about apprehension. One ED reported recently doing a case management meeting in shelter and it was very helpful. CAS saw the shelter and could see that the child was, in fact, safe and not at risk. The client could see that shelter had her safety as her priority. Shelters help both women and CAS to understand each other. Women are treated differently when

accompanied by shelter staff. A woman can feel very disempowered within the system. Women often feel bullied into doing things when they don't understand expectations. By increasing a woman's understanding of their rights and responsibilities under the law they are able to become their own advocates.

### **What are the barriers to providing these services**

Lack of trust on behalf of women and lack of understanding on behalf of CAS. The high turnover rate within CAS means that many CAS workers do not fully understand the collaborative agreement and the implications of DV. One ED recounted a case where a CAS worker came in with a safety plan that was in reality a "danger" plan. When a file is open, it seems it is always in name of mother even abuser is the father; yet nowhere in CFSA does it say file must be open in the name of the mother. Clients not aware of the other roles of CAS beside apprehension. Presently, there is a lot of conflict between traditional clan mothers and CAS, we have to understand both systems

Change in CAS legislation resulted in change to risk assessment tool. As a result more children were apprehended and there was no place to place to put them. Collaborative case management is a work in progress. There is a conflict in the different values of CAS and shelters and a genuine imbalance in power. The legislation gets interpreted in various ways and disagreement can cause huge barriers.

## **Child Health Services**

Seventy-five percent of shelters routinely or often helped women in accessing child health services and 21% reported sometimes providing help in accessing child health services. **Seven (7)** shelters who routinely support women in accessing child health services provided more detailed information. All 7 shelters reported providing :

- services for Identifying infants at risk
- Health-related services for children
- Counseling services for children
- Parenting support
- 57% provided other health care services including getting status cards and health cards and getting children registered under the Band, sexual assault support programs for children and developmental testing.

Eighty-six percent provided specific within shelter services and all 7 shelters provided a hierarchy of support from providing information through to helping women work through their options and their plans. In all cases shelters networked with other agencies and organizations to provide these services.

### **How does this networking usually happen**

In a similar fashion to support for women's health services, through both formal (protocols) and informal (one-on-one, personal relationships) processes.

### **How does the support, related to health services, you provide help women**

Many women don't know that the services exist to help their children. Shelter staff make them aware, help them access and understand what those services are. "We help navigate, decode, and debunk." Women get faster service if shelter staff make a call on their behalf. Shelters empower women to help themselves.

### **What are the barriers to providing these services**

The use of acronyms makes it difficult for women to find the service on their own. Even once the service has been identified women find it challenging to complete the necessary paperwork or are unable to access the services due to distance or transportation costs that are often double because both the mother and child must be present. Some agencies are hesitant to serve women and children from communities outside of their own. Lack of funding and resources is always a problem. Our priority is the women which means we are under resourced to provide service to children. This is compounded by the fact that it is sometimes difficult to know where to start. The children have been going through so much change as witnesses to violence, then coming to the shelter; it is hard to identify what is truly abnormal behaviour.

## **Educational and Recreational Services for Children**

Eighty percent of shelters routinely or often helped women in accessing educational and recreational services and 18% reported sometimes providing help in accessing educational and recreational services for children. EDs from **11 shelters** that routinely provided support to women in accessing educational services for children provided more detailed information. ED's reported providing or making arrangements for the following services:

- Subsidized child care (100%)
- Accessing school or recreational programs (100%)
- Change in schools (91%)
- Board of Education protocols (64%)
- On-site recreational and learning activities for children (82%)

Other educational and recreational services reported by the EDs included a clubs for children (homework, reading, social, music), linking women and children with Brighter Futures or Early Years programs, busing and cabs to and from school. Shelters serving primarily Aboriginal women also reported providing children with access to camps, driving families to Powwows, ceremonial education and awareness and traditional knowledge about roles and responsibilities.

Eighty-six percent provided some type on-site recreational and learning activities and all shelters provided a hierarchy of support from providing information through to helping women work through their options and their plans. In all cases shelters networked with other agencies and organizations to provide these services

### **How does this networking usually happen**

On an individual basis with the front-line worker contacting various agencies (Children and Family Services, Early Years, Schools, YMCA). For example a designated worker from the shelter goes to the schools to fill out forms for registration and bus forms. Individual relationships are built up over the years on a one on one basis.

### **How does the support, related to educational and recreational services, you provide help women and children**

Children develop better self-esteem, which results in better marks in schools, and better peer relationships with schools. Children have less time to get into trouble when they are involved in powwows, dancing, drumming etc. It provides mom with a different view and level of understanding about the priority of education and recreation. It provides children an outlet and gives mom a break. Supporting moms through transitioning in the school year helps minimize gaps in their school year. When shelters are there to help, it helps to minimize the shame of living in a shelter and provides templates for how to do it themselves once women and their children leave the shelter.

### **What are the barriers to providing these services**

There is a lack of financial resources to help send children to camps, provide day care and other activities in the community. Not enough staffing to work with children. Schooling is problematic because school policy dictates that children go to school based on their address. If a woman comes to a shelter that may mean that her children have to change schools as there is a lack of funding to bus children to their home school. If women resettle in a new home or second stage housing children may have to move again so children are uprooted when they come to shelter and then uprooted again. The recreational and educational agencies are frequently not at the table. There is a silo effect of what each agency does. There are fewer options for children with mental health issues.

The EDs of shelters who serviced primarily Aboriginal women felt that there was racism in the schools and a lack of understanding of different ways of learning. Teachers receive a 3 hour cultural training session which is not sufficient, yet provides them with a false sense of understanding of the issues. There is a real shortage of programming for children within the community. Teens want a recreation centre because Six Nations has nothing for our kids to do. First Nations families who come from northern coastal communities cannot take classes in Cree.

## **Culturally Appropriate or Language Specific Services**

Across the province 66% of shelters routinely or often assisted women in obtaining culturally appropriate or language specific services and 30% reported sometimes providing help in accessing culturally appropriate services. Culturally sensitive services were more routinely offered in the Central region (67%) and in shelters serving Aboriginal women (50%); whereas in the Northern Region these services were often (67%), although not always routinely (8%) offered to women (see Figure 5).

## Cultural and Language Services by Region

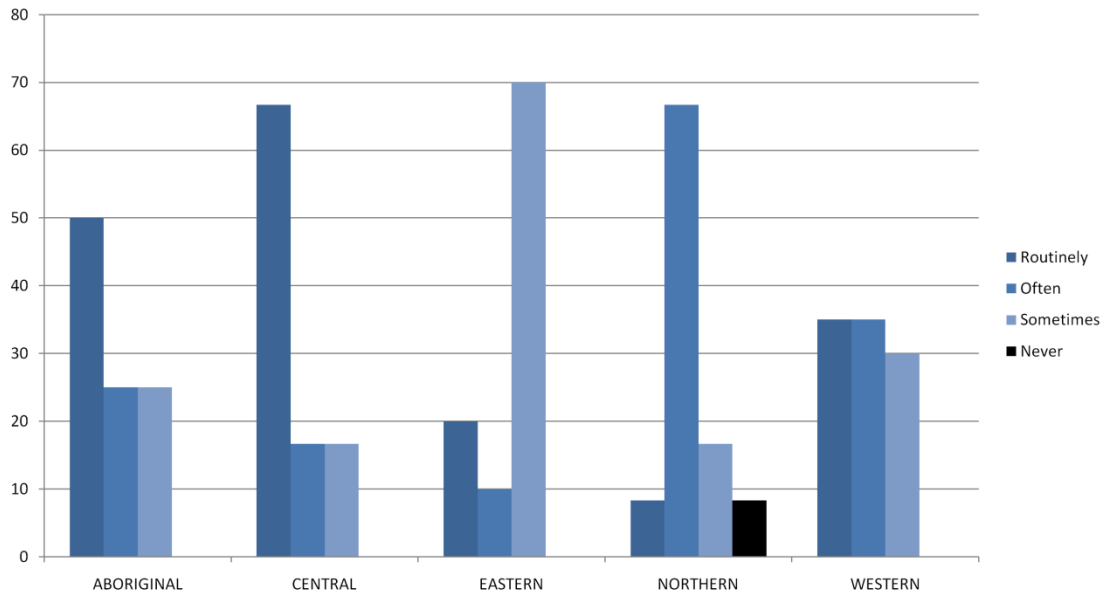


Figure 5 EDs were asked "Do you support women in obtaining cultural or language specific services."

EDs from **11 shelters** that routinely or often provided help in obtaining cultural or language specific services provided more detailed information. All 11 EDs reported providing/obtaining translation services and 27% offered settlement services. Other services or assistance included providing referrals to elders, providing education and in-services about ceremonies and languages, providing culturally appropriate food and prayer space, and organizing groups for immigrant women with half clients , half translators. Eighty-two percent provided some type on-site language/cultural service and all shelters provided a hierarchy of support from providing information through to helping women work through their options and their plans. In all cases shelters networked with other agencies and organizations to provide these services.

### How does this networking usually happen

Networking is done primarily through the coordinating committee. There is a more formal process with the Hospital, and paperwork has to be filled out to make a request for service. As well as a protocol with Native Police Services, Band Council members often just drop into shelters that serve primarily Aboriginal women. For example one shelter cooperated with the Chief when he wanted a child witness camp on the reserve over the spring break. Aboriginal staff will frequently call on family members to

help out. Shelters will also bring traditional healers in and provide space within the shelter to do the ceremonies. Cross training with first nations is encouraged by having them come to staff meeting once a year so staff can stay current on their programs & information. The DART committee has reps from various cultures.

### **How does the support you provide help women**

EDs reported that being culturally sensitive legitimizes shelter services in the women's eyes. The shelter does not try to impose white, Christian culture making the shelter a safe place to stay. It is particularly important for Aboriginal women. Their perspective is holistic; you can't fix one without the other. Recognition of culture, spirituality and tradition is a big part of the healing process and helps women to heal faster. For some it provides the opportunity for rediscovering spirituality, and connecting to themselves, others and the community. The shelter's job is to empower women with skills so that they may move away from our service. Breaking down the language and cultural barriers creates greater accessibility to services and information.

### **What are the barriers to providing these services**

In addition to lack of resources, EDs reported difficulty in finding and connecting with people in the community with the appropriate cultural knowledge. For some women leaving the relationship means leaving their culture and community behind. Language barriers make communication more complicated, and make it harder to build a rapport. Appointments take longer when using translator and using local interpreters raises issues of safety and confidentiality.

## **Services for Men**

In addition to the supports and services provided to women and children 76% of shelters reported that they also provide services and/or referrals for abused men and 69% report providing services or referrals for abusive men/fathers.

Most shelters do not deal directly with men but will provide information to abused men and ensure that they are safe, and make referrals through the crisis line. Some shelters did offer one-on-one and group sessions. Information for abusive men is frequently provided through the woman. Shelters provide information about support groups such as PARS, anger management, and referrals to programs such as "I am a Kind Man" or "Caring Dads". One shelter reported that they had been offering a voluntary men's group for more than 20 years with funding initially from the Trillium Foundation. EDs also reported doing outreach work and making presentations at high schools and rehab centres.

### **How do these services for abused and/or abusive men help these men, their partners and children, and the community?**

It helps build awareness and allows them to see what is happening in their relationship. A lot of abusers want to have a good relationship but just don't know how. They may have grown up experiencing violent behaviour and they literally have to learn a new way of interacting. Counselling provides them

with options and with hope. Healing the man, helps heal the family, and heals the community. Jail is not always the only option. Counseling can help make men gentler fathers, partners and productive role models in the community. If a man can change his behaviour then he can become a powerful role model for the children. The women often feel they have to do the bulk of the repair work in the relationship; it is important to let them know that there are services for their partners. What we are hearing from women is that they want the family to stay intact. Helps them find the resources, so that the men can change if they want to. Women need to feel they have given their partners every possible chance before leaving. Providing service for men also helps to legitimize our organization by throwing the blanket a little wider. We are seen as part of an integrated service system. We are seen as working together to end family violence. Although, some EDs also voiced skepticism about the effectiveness of these programs, but felt that at least it was a start and better than doing nothing at all. The bottom line was that their priority was the women.

## Summary

When asked about the **three most important things that their shelter did**, EDs identified:

- providing safe shelter
- advocacy
- providing women with both immediate crisis support and long-term support.

Others identified providing expert knowledge & education, counseling for women both within and outside of shelter, empowering women, system navigation, providing women with opportunities and options, housing, and services for children.

EDs identified **the three most important benefits to women** as:

- safety
- knowledge/education
- access to service & system navigation

They also identified advocacy, on-going support, empowerment and non-judgmental acknowledgement and acceptance as other important benefits for women.

In addition to the benefits for women, EDs identified **the three most important benefits for families** as:

- support for children
- developing better parenting skills
- finding ways to keep families together and involve the extended family in a positive way.

Shelters help families understand the impact of violence on children. They provide children with access to service, offer stability, and education and understanding. As a result, children are happier and more well adjusted. By helping children deal with their own experience of violence and showing them a better way, shelters can help in breaking the cycle of abuse.

The three most important **benefits to communities** were that shelters provide:

- knowledge/education by presentations to community and by means of their advocacy work
- service to women and families that would not otherwise be available
- increase in safety for the community as a whole

In addition the support they provide allows women to reintegrate into the community as a productive member of the community and helps prevent the growing cycle of abuse.

When asked for their top three priorities for expanding service, EDs identified:

- outreach programs
- services for families and men
- more beds - including satellite sites

Other programs identified included an increase in services for children, pre-employment programs to help women either gain the necessary education or prepare for the work force, mental health and substance abuse programming, and a program dedicated solely to helping women through the court process.

## **Appendix I: Service Agency Network**

### **AGENCIES**

Public Housing  
Private Housing (real estate, landlords)  
CAS  
Ontario Works  
Child & Youth Services  
(Catholic) Family Services  
ODSP  
HOMES program  
Second Stage Housing  
Rent Supplement Program

### **EDUCATION**

School principals  
School Boards  
Early Years programs  
Day Care Centres  
Elementary/Secondary Schools  
Adult Learning Centre  
Alternative Education  
University  
College

### **NOT FOR PROFIT**

Canadian Mental Health Association  
Community Living  
Other shelters  
Immigrant Newcomers Settlement Program  
United Way  
Canadian Hearing Society  
Food Bank  
Epilepsy Society  
CNIB  
John Howard Society  
Elizabeth Fry Society

### **MEDICAL**

#### Hospitals

- psychiatric floor
- CPRI

#### Community

- nurse practitioners
- psychologists/psychiatrists
- Family Violence Counselling Program

#### Public Health

- Healthy Babies
- Sexual Assault Centre
- Addiction Services

Aboriginal Health Centre

**COMMUNITY**

Housing & Employment Services  
Immigrant Women's Services  
Interpretation/language services  
YMCA/YWCA  
First Nations Bands  
Metee Nation of Ontario  
Native Friendship Centre  
New Canadian Centre  
Churches  
Multi Cultural Centre  
Career Access Centre  
Community Connections  
Canadian Tire (JumpStart for Kids)  
Parks and Rec

**LEGAL**

Crown Attorneys  
Duty Counsel  
local (family) lawyers  
Family Court  
Victim Services  
Victim Witness Assistance Program  
Probation & Parole  
O.P.P  
Legal Aid