Literature Review for A Family Violence Prevention & Early Intervention Best Practices – Awakening Women's Empowerment Programming

Organization Background

The Elmwood Community Resource Centre has been in operation since 2001 and in that time has developed a number of programs intended to help families in the Elmwood area enhance their lives in the short and long term. Its mission is to: provide Elmwood with the tools and support to build and grow the community, to foster trust and respect, and bring families and stakeholders together to respond to their unique neighbourhood. Their work is guided by the following vision: to be the community connector and partner to enhance a sense of community while supporting a safe and vibrant Elmwood. The programs are inclusive in terms of offering services to people of diverse cultural backgrounds, experiences, ages, and gender. Part of this inclusivity involves trying to meet the diverse and changing needs of the people in the community.

Organization Objectives

With the above goals in mind the following objectives guide programming:
- ➤ To provide access to community resources and connect community members with each other.
- ➤ To help parents to gain the knowledge and skills they need to build a healthy parent-child relationship.
- ➤ To provide tools to keep youth safe and inspire them to take care of all aspects of self, including their body, mind, emotions and spirit.
- ➤ To promote financial independence and economic wellbeing.
- ➤ To build capacity within the community.

Executive Summary

Domestic violence, also known as intimate partner violence, is a pattern of behaviours used by one partner to maintain power and control over another partner within the intimate relationship. This abuse can be prevalent in various forms such as physical, psychological, emotional, and sexual. Elmwood Community Resource Centre strives to ensure that all women, children and their individualized experiences are heard and understood, regardless of the circumstances. By utilizing an anti-oppressive practice, a strength based approach as well as approaching situations within a trauma informed lens, practitioners are able to take a culturally sensitive approach to helping women of all backgrounds heal from their trauma.

Family Counselling has been graciously funded by United Way of Winnipeg through the For Every Family Initiative funds. The program is intended to strengthen families and youth who

have experienced domestic violence and abuse, Trauma through individual or family therapy. The objectives of the programs are to promote violence free environment through personal growth and self-reliance for adults, children and families so that they can attain their full potential. In addition the program aims at providing access to resources & referral to other government stakeholders, and community-based organizations. Empowering family with healthy coping tools enhance the healthy development of children youth at risk when early experiences at home at school do not provide adequate care, secure relationships, and educational experiences needed to build social and learning skills. The programs include crisis and long-term individual counselling sessions, Psycho-educational group, trauma therapy and mental wellness.

Gender based violence prevention programming through our counselling program includes:

Woman's Awakening Empowerment program –Group Therapy for Women:
- Cognitive Behaviour Therapy
- Trauma Healing
- Feminist Perspective
- Conflict Resolution
- Healthy Relationships
- Attachment

Inspiring Men's program – Group Therapy for Men:
- Societal Roles & Expectations
- Trauma Healing
- Coping Skills
- Conflict Resolution
- Cultural Perspectives

The Focus of this literature review will be on our newly developed Women's Awakening Empowerment Program, which was graciously funded by the Government of Manitoba, and the University of Manitoba, to break down the barriers that prevent women experiencing domestic violence from seeking supports. Individual and group counselling is available, with a focus on ensuring that all aspects of healing are taken care of.

Elmwood Community Resource Centre is aware of the individual experiences that each woman may face, tailoring educational practices to ensure comfortability and promote safety for women who are struggling. Through establishing the Women's Awakening Empowerment Program, practitioners have developed various recommendations that will better support women who are currently in domestic violence relationship and those who have survived intimate partner violence. These recommendations prove to be encompassing, supportive of individual lived experiences and approach situations with an anti-oppressive lens, ensuring women of all backgrounds are heard and understood. Additionally we will summarize available research that

exists in developing frameworks, best practices in prevention and early intervention of gender based violence.

According to Status of Women, Gender-based violence is defined as act of violence that is committed against someone based on their gender identity, gender expression or perceived gender.

<u>Anti-Oppressive Practice at Elmwood Community Resource Centre</u>

Individual opportunities are largely determined by ones social location, including the social divisions of gender, class, and ethnicity. An anti-oppressive lens allows service providers to view perceived personal problems as social problems, and seeks to eliminate social problems by reducing the inequalities faced by minoritized groups. This involves providing those who face social exclusion with resources to increase their social power. Agencies that implement an anti-oppressive framework cease to recreate the structures of oppression they seek to dismantle at both the service and organizational level by being inclusive of all groups and reducing hierarchies.

Burke & Harrison (1998) describe five anti-oppressive principles for practice:

- *Social differences:* Arise because of power disparities between social groups. Social divisions include race, gender, class, sexual identity, disability, and age.
- *Linking personal and political*: The individual is placed in a wider social context, and their situation is viewed in relation to social systems, including the family, peer groups, organisations, and communities.
- *Power:* Power is socially generated, and operates at the personal and structural levels. It is influenced by social, cultural, economic, and psychological factors. Differential access to resources and positions of power are allotted to different combinations of factors.
- *Historical and geographical location:* Experiences are given meaning within the context of prevailing ideas, social facts, and cultural differences.
- *Reflexivity/mutual involvement:* Consideration of how values, social difference and power affect the interactions between people.

Further, Burke & Harrison (1998) recommend that service providers have a perspective that:

- is flexible without losing focus
- includes the views of oppressed individuals and groups
- is theoretically informed
- challenges and changes existing ideas and practice
- can analyse the oppressive nature of organisational culture and its impact on practice

- includes continuous reflection and evaluation of practice
- has multidimensional change strategies which incorporate the concepts of networking, user involvement, partnership and participation
- has a critical analysis of the issues of power, both personal and structural.

ECRC acknowledges that multiple forms of oppression interact to create varying circumstances of disadvantage for community members. Service providers understand that the social reality of participants is largely determined by their social location, and reflect on how their own location impacts their practice. ECRC programs are based on a commitment to combat various forms of oppression, including the legacy of colonization and discrimination based on gender, sexual identity, income, status, and ethnicity. Through the development and implementation of accessible programs that emphasize strengths and bring minoritized groups together, personal growth and social change is mobilized.

Power is shared with participants. Groups are client-centered with encouragement and facilitation by staff. Autonomy is paramount; ECRC is non-mandated, meaning that all services and programming are completely voluntary. Programming and services are flexible, and can be modified with input from the community. For example, the drop-in area hours were extended later into the evening to meet the needs of community members.

Programming and services are holistic at ECRC. The goal is to meet participants where they are at both physiologically and psychologically. There are very few (if any) eligibility criteria that need to be met in order to access services.

Services are available for multiple levels of needs. To address physiological need, snacks, coffee, water, washroom, bus tokens, and a warm space to relax are provided. Community members can address their need for both emotional and physical safety while accessing services. The need for belonging can be helped along through the Centre; groups offer places to connect, and non-judgemental staff is available to lend a listening ear. Esteem and self-actualization can be nurtured through programming. Experiential gains can be harnessed through arranging to volunteer in the community, while individual and group counselling sessions offer opportunities to develop positive coping habits and mental wellness strategies.

Programs bridge social divisions and unite community on the basis of a shared experience without the assumption of homogeneity. Participants of all ages, cultures, etc. are provided with space to organize and encouraged to learn from each other's diverse experiences

Programming is representative of the community and the diverse groups within it. Women's empowerment groups provide a space for empowerment and connection with a focus on self-esteem and

emotional safety. Counselling program offer individualized counselling for adults and youth, as well as group therapy on various topic with a focus on family violence prevention, trauma informed approach and mental health support. Indigenous groups center on traditional cultural practices and teachings, and groups are facilitated by Indigenous peoples who share traditional knowledge. Newcomer conversation circles provide a space in the community to connect, eat, and learn English. Translation into Arabic is provided to make the educational content more accessible to Syrian newcomers.

Input from community members is valued, and staff implements strategies to remove obstacles identified as barriers to participation. Programs and services are designed to be accessible to ensure community members have equal access to resources. All programs and services offered by the Centre can be utilized at no cost to participants. Free child minding is provided for most programming to allow parents to attend groups. The building itself is equipped with buttons that open doors and a large bathroom that can fit a wheelchair. There are no stairs, and the location is close to bus routes. For people with physical limitations, these features can make the difference between whether they access services or are prevented from doing so.

ECRC is anti-oppressive at the agency organizational level. When gaps in service are identified, programs can be implemented from the bottom-up. Staff members are empowered and encouraged to curate programs that address a community need. The composition of staff is very diverse; it is comprised of women and men who come from various cultures, are a spectrum of ages, and speak different languages. Many staff members live in the Elmwood neighbourhood. Board members are representative of the community, and are comprised of diverse characteristics: there is a spectrum of age, gender, ethnicity, citizenship, family statuses, classes, and political affiliations among members.

Strengths-Based Framework at Elmwood Community Resource Centre

Services and counselling available at Elmwood community resource centre are strength and person-based, approaches that are part of trauma-informed practices. Individual's abilities are emphasized and form the basis for learning additional skills, thus the perspective does not focus on deficits, but rather on personal resources. Strengths-based practice does not deny that problems exist. Rather, the focus is shifted from the deficits of a situation to the identification of existing strengths and resources. Strengths-based practice places adversity in the context of resilience – instead of dwelling on adverse experiences, new narratives of resilience can surface where strengths and resources can be identified. Emphasizing the problem as the problem instead of the person as the problem externalizes and depersonalizes the issue (Hammond, 2010). This change in perception and recognition of resilience and resources empowers

participants to harness their inherent power. They feel better equipped to manage future challenges on their own terms instead of developing a dependence on systems (Hammond, 2010).

Hammond (2010) identified the follow core principles of strength-based practice:

- *An absolute belief that every person has potential* and it is their unique strengths and capabilities that will determine their evolving story as well as define who they are - not their limitations (not, I will believe when I see – rather, I believe and I will see).
- *What we focus on becomes one's reality* – focus on strength, not labels – seeing challenges as capacity fostering (not something to avoid) creates hope and optimism.
- *The language we use creates our reality* – both for the care providers and the children, youth and their families.
- *Belief that change is inevitable* – all individuals have the urge to succeed, to explore the world around them and to make themselves useful to others and their communities.
- *Positive change occurs in the context of authentic relationships* - people need to know someone cares and will be there unconditionally for them. It is a transactional and facilitating process of supporting change and capacity building– not fixing.
- *Person's perspective of reality is primary* (their story) – therefore, need to value and start the change process with what is important to the person - not the expert.
- *People have more confidence and comfort to journey to the future (the unknown) when they are invited to start with what they already know*.
- *Capacity building is a process and a goal* – a life long journey that is dynamic as opposed to static.
- *It is important to value differences and the essential need to collaborate* – effective change is a collaborative, inclusive and participatory process – "it takes a village to raise a child".
- *Recognition that each person "holds the key to their own transformation"; facilitators merely walk alongside participants and offer support* (Hammond & Zimmerman, n.d.)
- Emphasis on *potential* instead of only *risk factors.*
- *Shift focus from problems and hopelessness to resources and opportunities*.
- *Provision of mental wellness strategies instead of focusing on pathology or illness in groups and counselling.*

The Awakening Women's Empowerment

The Awakening Women's Empowerment program provides group and individual therapy for women who are struggling with domestic violence and trauma.

Approximately 6% of Canadians report being physically or sexually abused by a current or former spouse and women are more likely to experience multiple victimizations; 17% of Canadians report being emotionally and financially abused (Statistics Canada, 2011). According to the Winnipeg City police, 16, 332 domestic violence events were reported to police in 2017, and this number has increased 5.9% over the last five years (Winnipeg Police Service, 2017). Women who experience domestic violence are at greater risk for physical health problems, self-blame, guilt, isolation, anxiety, depression, posttraumatic stress and other mental health issues (Afifi, MacMillan, Cox, Asmundson, Stein, & Sareen, 2009; Bonomi, Anderson, Anderson, Rivara, Carrell, & Thompson, 2009; Campbell, 2002; Fletcher, 2010; Kilpartick, 2004; Lindgren & Renck, 2008; Logan, Cole, Shannon, & Walker, 2006;).

These physical and mental health outcomes have social and emotional sequelae for the individual, the family, the community and the society at large.). Domestic violence impairs women's ability to parent their children, as their focus on survival and the mental health impacts such as depression takes their attention away from their children's needs (National Scientific Council on the Developing Child, 2009; Glaser, 2000; Schechter, Moser, Wang, March, Hao et al., 2012; Schechter & Willheim, 2009).

Newcomer and immigrant women are seen as being disproportionately impacted when we discuss domestic violence and rates of perpetuation. However, there is a substantial lack of evidence and research surrounding newcomer and immigrant women's experiences within domestic violence relationships. This lack of research not only impacts the women who are currently being victimized, but also presents settlement and frontline workers with the challenge of developing culturally inclusive resources and supports which allow these women to feel comfortable coming forward with their abuse.

According to the Femicide report published in 2018, immigrant women and girls are identified as being one of the 4 vulnerable groups of individuals; falling alongside Indigenous women and girls, older women and women with disabilities (Canadian Femicide Observatory for Justice and Accountability, 2018). Furthermore, as they are considered to be vulnerable, they are at a higher risk of being victimized within domestic violence relationships. In addition, it is stated that immigrant women are identified as being at a higher risk of victimization based upon language barriers (p. 29). With that being said, however, this victimization is not widely understood as the reported data is often times incomplete or inaccurate. These discrepancies often come as a result of cultural attitudes and misconceptions that the women, who are in domestic violence situations, come to believe.

It is important to take a culturally sensitive approach when discussing domestic violence and the barriers that are preventing women, particularly those who fall within the 4 vulnerable groups, from coming forward. This will benefit newcomer and immigrant women tremendously, as they may begin to

feel more inclined and accepted within the community, allowing them to open up about their abuse and trust practitioners.

Indigenous, African-Canadian, and immigrant women experience a disproportionate amount of gender-based violence compared to Canadian-born settlers. While all women are at risk of experiencing gender-based violence in their lifetime, social, historical, and geographical factors put some women more at risk than others (Pharand & Rousseau, 2008).

According to Statistics Canada, Indigenous women experience domestic violence at a rate three times higher than non-Indigenous women. Twenty-five percent of Indigenous women have been victims of assault compared to 8% of non-Indigenous women (Pharand et al., 2008).

Bent-Goodley (2009) reports a similar trend of gender-based violence among other racialized groups:

Between 21 percent and 58 percent of black women surveyed experienced physical and sexual violence in their lifetime, and between 17 percent and 48 percent of these women experienced the same type of violence at the hands of an intimate partner. Nearly 50 percent of women in Bangladesh have experienced intimate partner violence (IPV) from a male partner; 80 percent of women in Pakistan have experienced IPV from a male partner; and every 83 seconds, a woman is raped in South Africa.

African-Canadian, immigrant, and Indigenous women are more likely to suffer from more severe injuries and are more vulnerable to lethality than other groups of women (Bent-Goodley, 2009). Pharand et al. (2008) reports that 54% of the assaults endured by Indigenous women are life threatening, compared to 37% for non-Indigenous women. The lives of Indigenous women are eight times more likely to be in significant danger than non-Indigenous women when attempting to leave their partner, which highlights how difficult and ultimately dangerous leaving can be (Pharand et al., 2008)

There are many barriers to accessing support services for domestic violence. Black women report being less likely to receive culturally competent services, and are more resistant to utilize services out of fear they will encounter racism or be misunderstood by the practitioner (Bent-Goodley, 2009). Indigenous women are reluctant to utilize services out of fear that confidentiality will be breached, fear of ostracization from their community and family, and because of financial dependence on their partner (Pharand et al., 2008). Immigrant women are especially disadvantaged in accessing support for family violence, as they often face additional barriers of social isolation, linguistic challenges, lack of information about Canadian laws, and cultural pressure to remain married and silent about abuse (Easteal, 1996). There is also a universal reluctance to report family violence out of fear that Child and Family Services will apprehend their children (Bent-Goodley, 2009; Pharand et al., 2008).

Easteal (1996) reiterates the necessity of accessible interventions that employ knowledge sharing and esteem boosting tactics:

Domestic violence occurs on a continuum, beginning with emotional and verbal abuse and ending with murder. The earlier a woman has access to help, the less likely she is to end up dead. For women of any culture who are trapped by low self-esteem, the lack of skills or knowledge to be self-supporting, and the fear of retaliation, escape from a violent partner can be problematic.

Programs that center on women's empowerment that incorporate psycho educational content, intersectional feminism, and strengths based perspective are vital to assisting women escape family violence. Facilitators that are culturally competent, trauma-informed, and knowledgeable about available resources are vital helpers that can assist in employing successful programming.

The Family Counselling program and the newly developed Awakening Women's Empowerment are the first long term family violence prevention and intervention programming within the Elmwood community area. To recover from family violence women need time to not only understand the nature of domestic violence but also explore its impact on their lives and develop ways to cope with these impacts. The Awakening Women's Empowerment approaches the issue of domestic violence utilizing a strength-based, trauma-informed and anti-oppressive lens.

The Awakening Women's Empowerment is based on a commitment to combat various forms of oppression, including the legacy of colonization and discrimination based on gender, sexual identity, income, status, and ethnicity. The Awakening Women Empowerment does this first and foremost by acknowledging that domestic violence is rooted within patriarchy. As stated by Tracey (2007) "domestic violence against women—wife battering or beating—is rooted in and is the logical conclusion of basic patriarchal assumptions about women's subordinate status" (p.579). The Awakening Women's Empowerment Project raises women's consciousness regarding oppression, and encourages women to advocate and support one another.

The Awakening Women's Empowerment seeks to eliminate barriers to accessing support for victims of family violence through the provision of participant-centered programming delivered at the grassroots level. The program utilizes a holistic approach that involves empowerment, self-esteem building, social inclusion, community building, and knowledge sharing. Each session, the content is shaped by the voices of the participants to ensure they get what they need out of their chosen intervention. At the very least, this program offers women of all backgrounds a safe place to share their

lived experiences and learn from others. Great strides have been taken to make this program accessible to all women in the community, because combating social isolation for some may be the first step in reducing their victimization. Participants leave programming armed with information, support, and ultimately newfound power.

Program Components

The Awakening Women's Empowerment takes a wrap-around approach in addressing the issue of domestic violence by providing individual as well as group counselling for participants. The individual counselling component offers participants the opportunity to discuss personal issues in greater depth and with more specificity to individual circumstances. Issues that surface in group can be further processed in individual counselling without disrupting the group process or focusing group work on one person.

The group therapy component of the program offers the participants an opportunity to reduce their feelings of isolation and to help them learn from each other. Group interventions are the "most common type of intervention with female victims of intimate violence" and "has been considered to have a positive impact" (Santos, Matos & Machado, 2017, p. 36). We have found that participation in a group intervention derives from the need expressed by the women to share their experience with other's in similar situations. The group context helps participants "to realize that [they] are not alone and that [their] feelings of confusion, fear, and despair are real and shared by other women" (Webb, 1992, p. 209).

A research study conducted by Tutty, Bidgood & Rothery (1993) found that participation in a support group was associated with significant positive change on a number of outcome measures, including self-esteem, perceived stress, locus of control, depression, anxiety, and attitude toward marriage and the family. The literature also highlights the success of group interventions, especially in reducing female victims' tolerance toward violence and abuse, as well as increasing their personal and social skills (Bennett et al., 2004; Gordon, 1996; Tutty et al., 1993; Santos et al., 2017)

Domestic violence is a multifaceted and complex issue which impacts a range of individual and family functioning. As a result the Awakening Women's Empowerment covers a range of different topics including but not limited to; managing anger, self-esteem, grief and loss and healing from trauma. All of the skills gained in these various topics are mutually influential and therefore each enhances the other. Together they generate a positive feedback system and improve participants overall well-being.

As recommended by Rycroft (1999) the Awakening Women Empowerment utilized a gradual progression from a leader-led model towards a more cooperative democratic and self-help model of facilitation. Initially, the organization and decision were determined by the group facilitators, however the

group facilitators have supported the group members to act together to manage conflict and reach decisions. The group members have begun to facilitate their own process and agenda within the group. As stated by Rycroft: (1999)

> This transfer of power and responsibility for problem solving from the leader to the group members is understood to empower client participants to take charge of needed changes in their lives. Empowerment or increasing personal power has been identified as an important recovery goal for battered women (p.28).

The Awakening Women's Empowerment utilizes two facilitators which is commonly regarded as preferable to a solo leader. According to Rycroft (1999) "co-leadership offers different perspectives and styles to group members, allows role modeling of problem solving strategies between Co-leaders" and enables "and diffuses the power attributed to group leader" (p. 29).

Benefits of Psycho-Education for Survivors of Domestic Violence

The Awakening Women Empowerment incorporates psycho-education within both the individual and group sessions. Psycho-education is an important aspect of trauma recovery (Allen, 2005). As stated by Whitworth (2016)

> In the absence of not knowing the true source of their reactions, survivors of trauma will formulate their own conclusions about their symptoms and the trauma incident(s). While these conclusions may sometimes be intuitively correct, they can often be wrong, such as the traumatized person believing that they are flawed because of their reactions or unnecessarily blaming of unrelated people and places (p.445).

Those who have been impacted by trauma, such as domestic violence victims, benefit from receiving information which reinforces the idea that their reactions are expectable and normal, and that they can recuperate from what they have experienced (Whitworth, 2016). The psychoeducation offered in the Women's Awakening Empowerment assist the women in identifying the connections between their trauma experience(s) and their reactions, while simultaneously avoiding any messages which convey that they are "broken." In addition the psycho-education offered within the Women's Awakening Empowerment utilizes a client centre approach, in which the facilitators taking the time to listen to the participant's priorities, to understand their values and needs, and then modifying the education as required (Whitworth, 2016).

Art Therapy for Survivors of Domestic Violence

A predominate component of the Awakening Women's Empowerment program has been the utilization of art within the group sessions. As stated by Riley (n.d.) "art therapy is an effective modality for helping people to cope with symptoms of a wide array of mental and emotional disorders commonly caused by exposure to, and victimization from, domestic violence" (p.4). Art therapy techniques can be utilized to express emotions, as well as to develop beneficial coping and self-soothing skills (Riley, n.d., p.4). Studies have demonstrated that art therapy techniques can simulate the middle brain, which is responsible for emotional regulation (Riley, n.d). Developing calming skills through learning and engaging in art therapy techniques is an invaluable practice for individuals who have experienced abuse and/or domestic violence (Riley, n.d).

Trauma and trauma symptomology is strongly associated with domestic violence. Talwar (2007) discusses the efficacy of art therapy in accessing nonverbal traumatic memory and aiding in recovery of trauma. Talwar's (2007) research further highlighted that PTSD symptoms such as hyper-vigilance are largely caused by a failure to integrate sensory experiences connected to the traumatic event. The research stated that:

> In trauma treatment, it is not the verbal account of the event that is important, but the non-verbal memory of the fragmented sensory and emotional elements of the traumatic experience. Art therapy has long been recognized as a method that constitutes a primary process that taps into the non-verbal realm of imagery. (Talwar, 2007, p. 23)

Hass-Cohen and Findlay (2009) concurred with Talwar (2007) in recognizing the value of art therapy treatment. Their research concluded that using art in a continuously safe environment can reduce the effects connected to fear of pain, trauma, and passive coping, while simultaneously activating strength, and facilitating the exploration of nonverbal emotions. Practicing art as therapy can also increase dopamine and serotonin levels in the brain which effect a person's mood and level of contentment, resulting in a feeling of serenity and peacefulness (Riley, n.d).

As stated by Riley (n.d.) "through drawing, or any other visual form of expressive therapy, one is able to express, and consequently, expel pain and stress onto a canvas or a page through one's finger tips instead of having to do it verbally out of one's mouth." Through this modality, participants are able to process their emotions surrounding the traumatic event without having to necessarily verbalize the experience.

Cognitive Behavioral Therapy and Mindfulness

The Awakening Women's Empowerment Project utilizes component of Cognitive Behavioral Therapy (CBT) and mindfulness to support women in developing strategies and coping skills to move forward. According to Follette, Palm & Pearson (2006) "the use of mindfulness based practices in conjunction with cognitive behavioral therapies [can] enhance the treatment of trauma related problems" (p.58). Mindfulness practices provide a useful method for people to practice experiencing thoughts and feelings that have been avoided or difficult to process. In a sense, mindfulness exercises provide instructions on how to attend to and identify thoughts, feelings, and memories without judgement. As stated by Follette, Palm & Pearson (2006) "the process of noticing and contacting private experiences without judgment is a part of the path to self-acceptance, which is a fundamental issue for many trauma survivors" (p.58).

In addition CBT builds a set of skills that enables an individual to be aware of their thoughts and emotions (Cully& Teten, 2008). The Awakening Women's Empowerment Project utilizes CBT principles to support the women identify how situations, thoughts, and behaviors all influence emotions. The Project aims to teach the participants how to improve their feelings by changing dysfunctional thoughts and behavior patterns. In a study conducted by Iverson et al. (2011) CBT was shown to be effective in reducing PTSD and depressive symptoms which in turn lead to a decreased likelihood of intimate partner violence victimization in the future.

Trauma Informed Practices

Trauma has become so commonplace that most people don't even recognize its presence (Levine, 1997). Common occurrences such as an auto accident, sudden job or relationship loss, are just as debilitating as those experienced by veterans of combat or survivors of childhood abuse. Ultimately trauma affects everyone. Everyone has had a traumatic experience at some point in their lives, regardless of whether it left them with an obvious case of post-traumatic stress. Since trauma symptoms can remain hidden for years after a triggering event, some people who have been traumatized are not yet symptomatic.

According to Levine (1977) ,symptoms can remain dormant, accumulating over years or even decades. Then, during a stressful period, or as the result of another incident, they can show up without warning (p.45). As a result, a seemingly minor event can give rise to a sudden breakdown, similar to one that might be caused by a catastrophic event.

Regardless of whether the service user is aware of it or not, traumatizing events can take a serious emotional toll on those involved. Trauma can have a profound impact on an individual's identity, and have a negative effect on a person's mind, body, soul and spirit.

Trauma-Informed Practices

Triple Trauma Paradigm when working with Newcomer Women

In order to better understand domestic violence among the newcomer population we must remember that trauma is often a central component to the experiences of immigrants and refugees.

The triple trauma paradigm will explore the experience of newcomer women through migration process:

Pre-Migration stage 1: People migrate from their home country for a variety of reason, in regards to refugees; the refugee experience is characterized by exposure to high levels of violence. According to Suehn& Sokolova, (2014),Often refugees have either witnessed or been subject to violence, including rape, torture, public humiliation, murder, and the loss or disappearance of family

During Transit stage: During flight, refugees are frequently separated from family members

Asylum/Temporary Settlement stage 2: The condition in countries of asylum and refugee camps often amplifies the effects of trauma experience pre migration. Existence is often a daily struggle, with poor access to food, water, and housing. Report have indicated that in these conditions both single and married women may be forced to sell their bodies, as 'survival sex' in order to feed themselves and their families

Settlement in host country stage 3: Re-establishing a home and identity, while trying to juggle the tasks of daily living, is yet another significant challenge. Many immigrants and refugees are forced into lower paying position as their education is not recognized, or face the impacts of racism and systemic barriers.

Recommendations moving forward

In order to better support women who are experiencing domestic violence, it is important to be mindful of individual experiences and how they may differ from one another. Women who are victimized may experience varying forms, levels and types of domestic violence; this is why developing comprehensive frameworks and programs is extremely important for women's healing.

I.   Risk Factor Assessment Wheel Tool

Elmwood Community Resource Centre worked collaboratively to develop the risk factor wheel, which promotes culture sensitivity and inclusivity within various communities. The risk factor wheel was created to take a closer look at the variables that may contribute to a woman's victimization as it relates to domestic violence. The risk factor wheel takes a similar approach at assessing an individual's needs to that of the ecological perspective; acknowledging how communities, families and external influences have a direct impact on an individual (Teater, 2014). The risk factor wheel not only recognizes that there

are more than just individual barriers that prevent women from seeking help, but also systemic influences which make this support even less obtainable. The risk factor wheel is designed to be a useful tool when addressing the unique experiences of racialized women, including those who are experiencing further marginalization including but not limited to structural barriers such as patriarchal system, colonialism, varying forms of oppression, racism. For these circumstances, it is crucial to view their situations through an anti-oppression, culturally appropriate lens, focusing on sensitivity and being mindful of individual lived experiences.

Furthermore, the risk factor wheel was developed using an anti-oppressive framework, focused solely on supporting women regardless of the barriers that they may face. It is understood that racialized women, including immigrant and newcomer women, do not feel supported through the resources which are currently being utilized in a variety of fields. This may lead the women to feel unsupported and misunderstood, and as if their victimization does not matter. Through utilizing inclusion practice, the risk factor wheel allows practitioners to understand the variables which prevent women from receiving the support they deserve. Considering the importance of taking an encompassing perspective will allow practitioners, settlement workers and professionals alike the chance to formulate culturally appropriate and sensitive perspectives when dealing with domestic violence.

II.   Service Collaboration

Service collaboration and coordination between various social services can be an important role in addressing domestic violence (as cited in Jeffery & Fairbairn *et al*., 2018). ECRC has developed partnerships with local medical providers and the University of Manitoba in order to create a holistic approaches and services for community members. Services such as police, probation, healthcare, housing can share information, assess cases, and create action plans collaboratively to create a community wide response to domestic violence (Jeffery & Fairbairn *et al*., 2018).

Collaborative Care for Newcomers

In order to better provide support for newcomer women, it is important to focus on collaborative care within settlement sectors as well as educate the individuals working within the field. These initiatives should place a focus on developing shelters that are designed to support immigrant and newcomer women, as well create secondary stage programs which work to better support the women who may be struggling. Taking these steps forward will place the focus on developing an understanding around how domestic violence varies throughout cultural backgrounds. Immigrant and newcomer women face tremendous risk migrating to another country with their partner who is previously abusive, as the way

domestic violence is approached varies significantly among countries. Being aware of how these differences impact the woman's ability to speak up is crucial for healing and seeking supports. The risk factor wheel previously discussed can be a useful tool for frontline workers when it comes to assessing the women seeking supports and will further the understanding of the practitioners providing this assistance.

If shelters are developed, it is important to be cognizant of how care is approached and provided to the women in need. The experiences that they may be facing, along with the perceptions around seeking help within their ethno culture groups, faith based group, may be very different from the normality of discussing domestic violence within the country they migrated too. In addition, many immigrant and newcomer women face a variety of additional barriers that need to be addressed in a more comprehensive manner. Some of the barriers that should be recognized within the settlement sector are language, social isolation, cultural perceptions in society, as well as structural barriers that prevent women from seeking help such as immigration policies and the police (Ahmadzai, 2015). Taking a collaborative approach to developing supports for these women will help streamline the process of providing resources to those in need. In addition, it is important for service providers to support women using an anti-oppressive framework and approaching situations with cultural sensitivity. This will allow the crucial relationships to be developed, increasing trust among client-professional relationships and in turn, this will allow women to feel supported as they come forward in their domestic violence relationships.

Finally, when formulating supports for vulnerable populations, it is important to consider the increased rates of sex trafficking among newcomer and Indigenous populations. As many of the women seeking refuge experience increased rates of transit within refugee camps before making their arrival into a safe country, they are at an exponential risk of being trafficked. Historical circumstances, such as colonization has a high impact on the sex trafficking rates amongst Indigenous women. In order to combat this, it is important to provide training for service providers in an attempt to educate them on the signs of sex trafficking for both Indigenous and newcomer women and children. Understanding these warning signs work on building capacity among providers and increase cultural competency; in turn, ensuring that programs and services are cognizant of how sex trafficking disproportionately impacts visible minority women.

III. Culturally Appropriate Services

Services that are culturally appropriate are needed in order for services to be productive (Jeffery & Fairbairn *et al*., 2018). Indigenous peoples and newcomers cannot be addressed with mainstream models (Jeffery & Fairbairn et al., 2018). For Indigenous populations, there is a higher risk of victimization due to colonization, displacement, loss of identity, and traditional culture (Jeffery & Fairbairn *et al*., 2018). Indigenous cultural practices need to be utilized in order to address domestic violence against the Indigenous population (Jeffery & Fairbairn *et al*., 2018). Many urban Indigenous women face barriers when trying to access land and ceremonial supports (Jeffery & Fairbairn et al., 2018). To combat this barrier, urban agencies need to integrate resources to give Indigenous peoples the opportunity to become in-tune with their culture (Jeffery & Fairbairn *et al*., 2018).

Newcomer women are also vulnerable, the lack of resources and awareness about Canadian systems (Jeffery & Fairbairn *et al*., 2018). Additional factors that create vulnerability include cultural backgrounds, ideologies, migration phases, legal status, language barriers, and social isolation (Jeffery & Fairbairn *et al*., 2018). Awareness campaigns of available resources for this population and education about domestic violence, women's rights, and protective laws can be used to combat risk factors this population faces (Jeffery & Fairbairn *et al*., 2018). Awareness should come from an empowerment focused and recognize the connection between domestic violence and systems of oppression at the micro and macro levels (Jeffery & Fairbairn *et al*., 2018). Resources provided by agencies need to come from a culturally competent and trauma-informed lens (Jeffery & Fairbairn et al., 2018). Service workers should treat each person as an individual from a culture, and not assume the culture as a whole (Jeffery & Fairbairn *et al*., 2018). A huge key to culturally appropriate services is that the service providers need to reflect the population they serve.

IV. Education and Awareness

Education is an effective way to change societal perceptions surrounding domestic violence and the impacts on those who have been victimized. Often times, attitudes and ideals within society prevent women from seeking supports, which is particularly true for marginalized communities. Educating those who have experienced domestic violence, as well as individual's who can work as an ally for the survivors , is important when discussing long-term initiatives to effectively help survivors cope and move forward.

Education can be through training, awareness raising workshop, various media blogs which extend beyond the providers and place an emphasis on targeting the women who are at risk of

exploitation and victimization. Community-based awareness can help shed a light on the effects of domestic violence and how this contributes to the overall health of society. Educating and raising awareness can be approached from a variety of avenues; developing programs that promote acknowledgement, running classes for women who have been victimized as well as their loved ones who may want to be a supporter, even raising money for new initiatives and programs being formulated throughout the country; all of these opportunities formulate healthy discussion and communication.

> Taking a look at external factors as well as utilizing tools such as the ECRC Risk Factor Assessment Wheel discussed above, can dramatically impact how beneficial programs will be for the women who are in abusive partnerships.

The intersectionality framework is another beneficial tool to utilize externally and internally (Jeffery & Fairbairn *et al*., 2018). Intersectionality captures the various dimensions of an individual that increase their risk in becoming a victim of domestic violence (Jeffery & Fairbairn *et al*., 2018). Education and awareness allows individuals to identify warning signs for themselves or their loved ones, as well as create an internal reference book for resources which are available to them in a time of need.

V.   Development of Best Practices for prevention and early intervention programming

Implementation of the Social Ecological Model explains how individuals are impacted by multiple systems (Jeffery & Fairbairn *et al*., 2018). Regarding domestic violence it explores how risk factors occur in different systems, such as individual, relationship, community and society, while targeting prevention efforts (Jeffery & Fairbairn *et al*., 2018). According to Jeffery *et al*., this model states the factors that create violence involve various aspects form each system, this is important because it emphasizes the interconnectedness of risk factors, which in turn allows service workers to combine individual level theories with societal level theories and recognize that domestic violence risk factors work on multiple levels (Jeffery & Fairbairn *et al*., 2018). Ultimately, combating domestic violence requires prevention at all levels (Jeffery & Fairbairn *et al*., 2018).

> The Elmwood Community Resource Centre, have developed various framework that was discussed above, in addition to the framework, we have developed best practices and resources tips. They can be retrieved our website at http://elmwoodcrc.ca/best-practices/ . These tip sheets outline the warning signs and how they can present themselves within various settings. Educating all parties involved will allow the resources that are being developed to take an encompassing

approach, focusing on culturally appropriate healing for the women who are experiencing abuse as result of family violence.

The use of the Exposure Reduction Framework has become the pivot of preventing domestic violence. This framework brings awareness to the idea that domestic violence prevention requires finding mechanisms to support intimate partners decrease their risk factors of victimization. Within this framework is three components; risk assessment, risk management, and safety planning.

Risk assessment is important in evaluating the level of risk of harm a victim or those connected to the victim may face, and it also considers the amount of possible reoccurrences (Jeffery & Fairbairn *et al*., 2018). Risk assessments need to assess violence with respect to cultural competency at individual and community levels (Jeffery & Fairbairn *et al*., 2018). Geographical, lack of social resources, delayed emergency services responses, community culture, and lack of confidentiality are some factors to consider when conducting risk assessments for Indigenous and newcomer populations (Jeffery & Fairbairn *et al*., 2018). Risk Management outlines the ways that can reduce the risk shown by the perpetrator of domestic violence and it includes treatment, follow-ups, or supervision (Jeffery & Fairbairn et al., 2018). Within safety planning the main goal is protect domestic violence victims and those in their circle (Jeffery & Fairbairn *et al*., 2018). Safety planning is considered to be high priority and it requires service workers to use a crisis oriented approach that looks at immediate safety needs (Jeffery & Fairbairn *et al*., 2018).

VI.   Policy Change

In order to take initiatives which strive to support women who have experienced varying forms of trauma, it is crucial to look at developing policies which promote a holistic approach to healing. These policies, which work to support survivors and provide resources that take a variety of situations into consideration, is extremely important in addressing the systemic causes of domestic violence. Addressing the underlying barriers that women, especially racialized and marginalized women, face when it comes to accessing supports should be one of the focuses when developing policies. With this in mind, policy makers are able to tailor their proposed actions to reflect principles which address all aspects of healing and work towards an encompassing approach to healing. At a policy level, it is crucial to utilize perspectives such as anti-oppressive practice, as well as trauma informed care; this ensures that women who are seeking supports are understood and the care they receive is indicative of unbiased, inclusive policy development.

Risk Factors Assessment wheel

Appendixes (can be shared upon request)

1. Trauma Informed practices framework

2. Anti-Oppressive Framework

3. Strength-based approach Framework

4. Suicide Risk Assessment framework

5. Inclusion Framework

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