

BEHIND CLOSED DOORS: ABORIGINAL WOMEN'S EXPERIENCES WITH  
INTIMATE PARTNER VIOLENCE

by

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for the degree of Master of Arts

at

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DALHOUSIE UNIVERSITY

DEPARTMENT OF INTERNATIONAL DEVELOPMENT STUDIES

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## **ABSTRACT**

This study provides a critical analysis of Aboriginal women's experiences with intimate partner violence, and how this experience is affected by their lives on a reserve and their access to resources while there. By taking a social ecological perspective—looking at individual, interpersonal, community, institutional/organizational, and society/policy levels of the ecosystem—a comprehensive analysis can be done. The study explores the role of colonization in the development of today's circumstances, and its associated factors. It analyzes the role of the government, both past and present, in perpetrating and enabling the problem. This study concludes by arguing that Aboriginal women's experiences are much more complex, needing more innovative and community-based initiatives in order to deal with its intricacies. The Canadian government's attention and efforts thus far have fallen short of what is needed within many of Canada's Aboriginal communities.

## ACKNOWLEDGEMENTS

Most people who I interact with regularly know that I am an idealist—I think the world can be a better place and that I can fix it. My journey through my Master of Arts in International Development Studies has been one of immense learning and thought shifting. While I may still be an idealist, I am now able to think more critically about the decisions that I make everyday. I would like to thank the entire faculty of the Department of International Development Studies at Dalhousie for guiding me through this journey. Of special impact was Dr. Theresa Ulicki, as it was she who introduced me to the world of gender and development, and helped me find my niche within the field of International Development. She, along with Dr. Jacquie Gahagan, supported me through this project, and provided encouragement and guidance when I needed it most. Dr. John Cameron was also extremely supportive throughout this process, as my external examiner, being accommodating of my tight timeline and geographic limitations. I would also like to thank my fellow IDS peers who provided me with help, insight, and positivity when I needed it most—thank you Taylor, Sheila, Ami, Shannon, Fahria, Conrad and Ardath. Lastly, I would like to thank my friends and family for their support throughout this process, with special gratitude toward Rahima, Safiyya, and Farhana.

## Chapter One: Introduction

Violence against women is a problem found everywhere in the world. According to UNIFEM (n.d.), 70% of women have experienced physical or sexual violence at least once throughout their lifetime. Moreover, sexual and/or physical violence by an intimate partner (i.e., a boyfriend, common-law partner, husband, etc.) has been experienced by women at alarming rates—these numbers range from 15% of surveyed women in urban Japan to 71% in rural Ethiopia (World Health Organization, 2005). Being in an intimate relationship with someone is often equated to trust and care for well-being (Walster, Walster, & Berscheid, 1978)<sup>1</sup>—intimate partner violence is a clear violation of that trust. The presence of love and trust create complex relationships and therefore make intimate partner violence much more difficult to understand. In simple terms, intimate partner violence is violent behaviour against an intimate partner, whether domestic<sup>2</sup> or not, and can include several forms of violence (including physical, sexual and emotional violence). Unfortunately, the problem of intimate partner violence does not only exist in developing countries, it is also a problem in countries such as Canada—this problem is especially pronounced within Aboriginal<sup>3</sup> communities<sup>4</sup>.

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<sup>1</sup> This is different from historical ideas of marriage where the main purposes were procreation and passing on of the man's name (Walster et al., 1978). Moreover, men were expected to own and provide for the household, while women were expected to care for the household, to honour him, and to obey him (Walster et al., 1978). While some may argue that such beliefs have not changed, there is some consensus that shifts in the function of marriage (and the role of both man and woman within the marriage) have moved towards a mutual equity and a sense of personal fulfillment (Walster et al., 1978). While this is a conversation solely about marriage, it is not difficult to see how such shifts would change the dynamics of an intimate relationship. Historically, Aboriginal marriages offered the joining of “bloodlines in a conjugal family, [and provided] the social, political and spiritual bases for all its members” (Perrault & Proulx, 2000). Thus this mutual gain and exchange has been part of the Aboriginal marriage process for centuries.

<sup>2</sup> Domestic partner refers to a “live-in” partner, someone that resides in the same household as his or her intimate partner.

<sup>3</sup> An explanation of what is meant by the term “Aboriginal” can be found later on in this section.

Canada is thought to be a country of hopes and dreams; however, not all individuals living in Canada are this fortunate. There are areas within Canada that are impoverished, living in disparity and struggling for their survival. Aboriginal individuals in Canada are living in some of the worst environments—often equated to Third World conditions (Assembly of First Nations, n.d.; Cazabon, 2010). Approximately 20% of all Aboriginal communities in Canada are under a drinking water advisory (Health Canada, 2010), almost one in five Aboriginal households are overcrowded (nearly twice that of the rest of the Canadian population; Assembly of First Nations, 2007), and mould contaminates almost 50% Aboriginal households (Assembly of First Nations, 2007). Clearly some individuals in Canada are living in subpar conditions. Dennis Raphael (2008) has offered a list of determinants of health and, as will be explored in the rest of this paper, the essential factors that allow for health and well-being are lacking in many Aboriginal communities. These conditions are not isolated from the issue of intimate partner violence within these communities. It is important to point out that not all Aboriginal communities are in such conditions—just as within the rest of Canada, some communities have more than others, this applies to Aboriginal communities as well.

Based on secondary data and related literature, my study focuses on intimate partner violence in Aboriginal communities. Specifically, my thesis seeks to understand more clearly the relationship between the multiple layers of one's environment (i.e., community, family, etc.) and Aboriginal women's experiences of intimate partner

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<sup>4</sup> This is not to say that the problem does not exist outside Aboriginal communities—it does. The rates of intimate partner violence within Aboriginal communities is higher, and acts of violence are thought to be more severe (as will be expanded upon throughout the paper), and therefore intimate partner violence is more of a problem within Aboriginal communities. This is also not implying that the problem of intimate partner violence in Aboriginal communities is to be blamed on Aboriginal individuals—as will be explored in this paper, there are several factors that affect the high rates of intimate partner violence within Aboriginal communities.

violence on reserves. It aims to explore the structural and historical factors, primarily the role of the Canadian government—both presently and historically, in contributing to the problem, as well as looking at ways in which the government has attempted to ameliorate the situation. This will further be explored through an intersectional social determinants of health perspective (with a special emphasis race, class and gender) framework. My primary research question seeks to understand how Aboriginal women’s experiences of intimate partner violence are shaped by their lives on a reserve and their access to resources.

Sub-questions I will address include:

- Why are rates of intimate partner violence so high (i.e., what are some of the contributing factors)?
- What are some of the ways in which women cope with the experience of abuse?
  - Where and to whom do they go for support?
- Are the resources available for coping with intimate partner violence useful for the individuals who are accessing them?
- How do the law enforcement and justice systems ease or complicate women’s experiences with intimate partner violence?

As was already mentioned, intimate partner violence is a problem all over the world. In Aboriginal communities, where living standards are often below the rest of the country, one can expect higher rates of intimate partner violence<sup>5</sup> and less access to resources to deal with such violence. And, this is the case. According to the Government of Canada (2008), Aboriginals are more at risk for intimate partner violence than other

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<sup>5</sup> Just as it is in other low socioeconomic status communities across the country (O’Donnell, Agronik, Duran, Myint-U, & Stuevem, 2009)

groups in Canadian society (National Association of Friendship Centres, 2010). Although exact rates are difficult to obtain (as they would be for any population due to the sensitive subject matter<sup>6</sup>), several studies have been done to examine the issue<sup>7</sup>.

Before elaborating upon circumstances and rates of violence within Aboriginal communities, I would like to touch upon what I mean by Aboriginal peoples. Throughout history, many different words have been used to describe people of Aboriginal descent, and therefore some clarification will prove useful in the discussion of this specific population. According to Wotherspoon and Satzewich (2000), the term Aboriginal peoples refers collectively to both status and non-status Indians (as defined by the Indian Act), as well as Métis and Inuit people in Canada. “Status” or “registered” Indian people are those who identify as Indian and are considered so through the Indian Act<sup>8</sup>. Non-status Indians are those who have lost their status through enfranchisement, and cannot or desire not to regain their status as registered Indians<sup>9</sup>. According to Statistics Canada (2006a), 63% of Aboriginal women self-identified as North American Indian in 2001 and

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<sup>6</sup> Many individuals, regardless of ethnicity or geographic location are hesitant to report intimate partner violence—this can be due to fears of further violence, being ostracized or rejected by one’s family and/or community, not being believed, etc. (all of which will further be explored throughout this paper).

<sup>7</sup> Unfortunately, several of the most thorough studies on rates of intimate partner violence in Aboriginal populations are dated. This is not to say that the information is out-dated, but that readers should be aware that these rates may have changed over the years.

<sup>8</sup> The Indian Act applies mainly to registered Indians who live on reserves (Imai, Logan, & Stein, 1993). The Indian Act was amended to include several individuals who were originally denied status through legislation known as Bill-C31. Therefore there is further distinction in status Indians—“regular” and “Bill-C31” Indians.

<sup>9</sup> Registered Indians who are members of a First Nation and live on the Nation’s reserve have access to treaty rights, tax exemptions, are provided with residence (granted by the First Nation), and are eligible to receive health, educational and economic development benefits provided by Indian Affairs. Registered Indians who are members of a First Nation but not living on the Nation’s reserve have access to treaty rights, can receive partial tax exemptions (may not be exempt from provincial sales tax), and are eligible to receive some health, educational and economic development benefits provided by various provincial or federal agencies (this is different from the services and benefits that those living on First Nation reserves have access to; Imai, Logan & Stein, 1993).

five percent of Aboriginal women self-identified as Inuit in 2001. While no singular definitions for the Inuit exist, generally an individual is considered Inuit if he or she possesses a disc number<sup>10</sup>, possess at least one-quarter Inuit blood, or those who are considered Inuk by the local community. Similarly, Métis have no singular definition; however, two generally accepted notions exist. First, that Métis individuals are those of mixed-blood (i.e., those who are of both Indian and non-Indian origin). Second, an individual who has proof of being Métis, declares him or herself as being Métis, or is considered or has been considered as Métis by his or her community, is considered Métis. According to Statistics Canada (2006a), 29% of Aboriginal women self-identified as Métis in 2001. Although there is a known approximate breakdown of the demographics of Aboriginal women, many studies do not take such differences of heritage into account and therefore, unless specified, I will be discussing the collective Aboriginal peoples in my analysis<sup>11</sup>.

In the discussion of Aboriginal communities living on reserves, I am specifically referring to First Nations. The term First Nations<sup>12</sup>, in a legal sense, refers to registered bands and reserves (McGillivray & Comaskey, 1999). The term Band council is used by the Department of Indian Affairs for the administration of federally funded (although provincially governed) child-protection and family-support services (McGillivray &

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<sup>10</sup> Disc numbers were assigned to each Inuk as a part of the federal government's census in 1951 (Wotherspoon & Satzewich, 2000).

<sup>11</sup> It is important to note that individuals of Métis and Inuit heritage do not traditionally live on reserves, and are often governed by a different set of rules than individuals who identify as First Nations (Durbin, 2009). Moreover, very often bands will only allow status Indians to live on the reserve and have access to the services and "benefits" of status Indians. Therefore, in the discussion of Aboriginal women living on reserves, I will be speaking largely (but not exclusively) about the status Indian population living on reserves (and more specifically, status Indian women who live on a reserve).

<sup>12</sup> Aboriginal peoples also refer to themselves as "First Nations" (Imai et al., 1993). In this text, First Nation will refer to the communities and not specifically to the peoples.

Comaskey, 1999). This is important to understand because in the discussion of resources, there is shared responsibility between the federal government (who provides the funds) and the band (who then decides how to allocate the funds). While many of the services offered to Aboriginal individuals living on reserves used to be controlled by the government, First Nations are gaining more responsibility for their own programming—unfortunately, along with the ability to manage their programming has come a decrease in funding<sup>13</sup> (Imai, Logan & Stein, 1993). When there is not enough money, many basic needs are not met—this leads to the high levels of poverty and a lack of resources that is a reality for many individuals living in Aboriginal communities. The history of oppression and violence that has come about due to colonialism plays a large and complex role in the limited access to resources that many First Nations now experience; this will be elaborated upon in Chapter Three. Moreover, while it may be suggested that colonialism is a part of Aboriginal history, I will be arguing that many forms of oppression by the Canadian government still exist. Current discrimination against Aboriginal peoples, along with the continued effects of colonialism and the lack of access to resources, significantly contribute to the situation of Aboriginal peoples.

Before going into detail about rates of intimate partner violence, a brief discussion of intimate partner violence is in order. While many studies use the terms *domestic violence*, *spousal abuse*, *wife beating* and *intimate partner violence* interchangeably, the focus of this study is on violence experienced by an intimate partner (i.e., boyfriend/girlfriend, husband/wife, common-law partner) while being in that intimate

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<sup>13</sup> For example, all schools located on reserves used to be run the Department of Indian Affairs (out of their district offices). In the last ten years, Indian Affairs has begun to transfer administrative responsibility to First Nations for on-reserve schools (Imai et al., 1993). According to Imai et al (1993), there is the perception that there is less funding available for on-reserve education now than there was when it was controlled by Indian Affairs.



relationship. Violence can include physical abuse (ex. kicking, punching, throwing objects), sexual abuse (ex. being forced to engage in sexual activity against one's will), and emotional/psychological abuse (ex. being insulted, neglected, economically dependent on one's partner). Many studies only look at physical and sexual abuse, however emotional/psychological abuse is one of the most common forms of abuse experienced (Government of Canada, 2008). Unfortunately, emotional/psychological abuse is difficult to identify and even more difficult to convict<sup>14</sup>, and therefore studies<sup>15</sup> usually exclude this information. Such maladaptive behaviours become harder to identify as so (and are difficult to convict) when differences in culture are added to the discussion, as is often the case when dealing with problems within Aboriginal populations.

According to Statistics Canada (2006b), Aboriginal women are three times more likely to report spousal abuse than non-Aboriginal women<sup>16</sup> (although the accuracy and validity of this finding has been questioned by the Ontario Native Women's Association; 1989 and LaRocque; 1994). Moreover, the National Association of Friendship Centres (2010) suggests that this may be because of the severity of the violence, as will be elaborated upon in Chapter Four of this thesis. Interestingly, there are many more barriers to reporting intimate partner violence for Aboriginal women living on reserves, including fewer families having access to telephones, internet and the ability to leave the community (Assembly of First Nations, 2007; Ontario Native Women's Association, 1989). Moreover, factors such as shame, fear, loss of privacy, concern over family break-

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<sup>14</sup> On its own, emotional abuse is not a convictable crime.

<sup>15</sup> This depends on the source of the study—justice system and police records usually exclude this information whereas feminist and sociological studies would usually include it.

<sup>16</sup> Of course there is much variability within different groups of non-Aboriginal women, and I am not assuming homogeneity within these two groups; however, for the purposes of this thesis, comparisons will drawn between both groups.

up, threats and being unaware of services available influence the rates of reporting violence<sup>17</sup> (Ontario Native Women's Association, 1989). Thus it is likely that there are many Aboriginal women who cannot report such violence.

Studies also show that Aboriginal women are more likely to experience more severe forms of violence than their non-Aboriginal Canadian counterparts (Statistics Canada, 2006b; National Association of Friendship Centres, 2010). For example, in 2004, 54% of Aboriginal women reported being beaten, choked, sexually assaulted, threatened, or had a gun or knife used against them—this is in comparison to 37% of non-Aboriginal women who reported the same levels of violence (Statistics Canada, 2006b). One woman reported: “I almost got killed last year; he tried to choke me to death.” (in Government of Canada, 2008, p. 8). Other forms of severe violence can include having boiling water thrown on a woman, being hit with a chair, death threats and homicide (Government of Canada, 2008). According to the Canadian Centre for Justice Statistics (2001), between 1991 and 1999, spouses were responsible for killing 62 Aboriginal women and 32 Aboriginal men. These rates are significantly higher than for non-Aboriginal Canadians (this rate is eight times higher for Aboriginal women than non-Aboriginal women, and 18 times higher for Aboriginal men than non-Aboriginal men; Canadian Centre for Justice Statistics, 2001). It is clear that intimate partner violence is a problem amongst Aboriginal peoples and this thesis is going to discuss the complex set of circumstances which affect and are affected by this problem.

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<sup>17</sup> This is not to say that these factors exist solely in Aboriginal populations—such allegations would be false. However, according to LaRocque (1994) and other experts, these factors are much more prevalent in Aboriginal populations due to historical and cultural dynamics, making such reasons for low-report rates more prominent.

The Canadian government<sup>18</sup> is aware of the severity of the problem, and they are supporting several projects to address the problem of intimate partner violence against Aboriginal women, but clearly it is not enough. As will be demonstrated throughout this thesis, violence is not a detached problem—it is related to generations of discrimination and structural violence (Fiske, 2006). Many women find that when they report abuse, police are unsympathetic, ineffective and sometimes cynical about the often-recurrent cycles of male violence against women. Some police would also be deterred from helping due to the appearance that women were reluctant to help themselves by reporting the matter, pressing charges or leaving (Government of Canada, 2008), and while women not living on reserves experience similar concerns, LaRocque (1994) suggests that circumstances on reserves are much more extreme and severe (this will be further explored in Chapter Six). Moreover, the rate of response and the reaction of police vary by community, causing women to be even more reluctant to seek help (Government of Canada, 2008; McGillivray & Comaskey, 1999). According to Goel (2000), the Canadian justice system has failed to give the issue of Aboriginal domestic violence the attention that it deserves. The Law Reform Commission of Canada's report on Aboriginal justice devotes solely one line in its conclusion to the issue of violence against Aboriginal women (Goel, 2000). Considering its pervasiveness within Aboriginal communities, this is unacceptable. Furthermore, Goel (2000) points out that when attention is given to the issue, it is concerned more so with perpetrators than with victims. This leaves victims to fend for themselves, often without any support.

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<sup>18</sup> Some would further argue that the Canadian government is the main source of the problem. While I do address the contributions of the Canadian government (as well as other governing bodies) to the source of the problem, it is important to move away from placing blame and working towards a fuller understanding of the dimensions of the problem, in order to come up with next steps to solving them.

The issue of intimate partner violence is an immediate one. Attention needs to be given to understand and address the issue. Without it being taken seriously by the Canadian government, abuse is likely to continue for generations.

### **Purpose of the Study**

The purpose of this study is to understand Aboriginal women's experiences of intimate partner violence while living on a reserve, specifically investigating how the multiple layers of her environment contribute to this experience through a critical review of existing data and related literature. Many reserves are isolated and therefore have limited access to resources, and often do not follow the same punitive measures and means for justice as non-reserve non-Aboriginal Canadian communities. Aboriginal peoples have a history of suffering and inequality<sup>19</sup>, as well as different belief systems than Euro-Canadian belief systems. In such a unique environment and under such circumstances, the experiences that women face are likely to be different than the experiences of non-Aboriginal Canadian women.

In presenting this work, it is important to be clear about my intentions and rationale for this study. Having lived on two Aboriginal reserves (Wunnumin Lake and Neskantaga, both in northern Ontario) in 2009 for a month each, I experienced firsthand the living conditions and inaccessibility to resources that individuals living on some isolated reserves experience. Furthermore, some of the women with whom I worked while there spoke to me about their experiences with intimate partner violence. It became

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<sup>19</sup> This is not to assert that other populations have not experienced suffering and inequality, or to claim that the suffering and inequality Aboriginal peoples have experienced is worse than that experienced by other populations, however attention must be brought to such oppression as this contributes to the overall experience of intimate partner violence.

very clear to me that this was something that many Aboriginal women experienced, and that coping with the abuse was made even more difficult due to the tightly-knit communities and inability to access immediate resources. My first experiences with intimate partner violence occurred while volunteering on the crisis phone line at the Sexual Assault Centre for London, Ontario. It was throughout my three years volunteering with the crisis-line that I began to understand the toll that intimate partner violence can have on individuals experiencing such violence, as well as on witnesses of the violence. Upon hearing women's accounts of violence while on these reserves, I immediately felt frustrated and wanted to know more about the unique dynamics of intimate partner violence within Aboriginal populations living on reserves. While searching for more information, I identified a gap between available academic work and first person accounts of violence, as well as a lack of all-encompassing information (many studies look at isolated events and circumstances of violence). Consolidation and consideration for women's experiences are both necessary—this is what I aim to provide in this study.

While the purpose of my study is to shed light on the experience of Aboriginal women who lived and are living through intimate partner violence, I will also be highlighting the lack of resources and attention given to the issue in hopes of instigating some sort of change in behaviour. Given that resources (such as shelters and crisis-centres) are often not available in the communities, special emphasis will be placed on how the resources (or lack thereof) play a role in the experience of a woman. As mentioned, many studies that exist on intimate partner violence in Aboriginal communities focus on one issue (ex. severity of violence, cause of violence, resources

available, etc.); I hope to integrate the information available so that a more holistic understanding of the situation can be reached. Moreover, I will be highlighting the role of structural and historical factors in this complex state of affairs.

Many Aboriginal women are experiencing discrimination on several different levels (as will be explored through this thesis), and the Canadian government is largely silent on the complexity of this discrimination. This study highlights the many layers of oppression that Aboriginal women experience, focussing especially on how these layers of oppression affect experiences of intimate partner violence. Looking at the situation through an intersectional, multifaceted lens allows for a more holistic understanding of situation—something that is necessary if the problem is going to be addressed.

This thesis was primarily written for individuals in the discipline of International Development Studies. It is important to recognize that while it is the role of Canadians to help those living in developing countries, many individuals in Canada are living in comparable conditions (Assembly of First Nations, n.d.; Cazabon, 2010). A multidimensional and holistic means of assessing the situation of Aboriginal women will provide the steps to understanding how to address this situation.

## **Research Methods**

Research for this study was completed through secondary data analysis, using library and internet-based resources. These included books, journal articles, documentaries, government documents, ethnographies and newspaper articles obtained from libraries and resource centres across the country. Much research on Aboriginal intimate partner violence has been done<sup>20</sup>, and therefore, there were enough resources for

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<sup>20</sup> This is not to say that research on this topic has been exhausted, but more so that my going into communities to gather information with the potential risk of harming women (through their

me to complete my research. Furthermore, some studies have demonstrated that having individuals recollect or discuss present abuse can be dangerous to their own well-being (McGillivray and Comaskey, 1999). It was likely, therefore, in many individuals' best interests for me to not further discuss their experiences with them.

I also conducted a search of available crisis shelters and their amenities in order to better understand what services women have access to. This included an investigation into where women can go, as well as what is available and how these services are provided to these women.

My research, when possible, focused on information regarding reserves in northern Ontario and northern Manitoba. According to Statistics Canada (2006a), the number of Aboriginal women living on reserves is growing. Moreover, the reserves in northern Ontario and northern Manitoba are in similar geographical regions and therefore many individuals from these reserves access the same resources. Although provincial legislature differs within the region, because of this study's emphasis on resources and services, grouping these two geographical areas allowed for the most coherent picture to be drawn. Moreover, the largest number of Aboriginal women live in Ontario (97 000 or 20% of Aboriginal women) and 15% of Aboriginal women reside in Manitoba (Statistics Canada, 2006a). Of course, much of the data available is national information and often studies did not specify in which geographical region information was gathered.

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partners finding out, having them relive the experience, or through the stigma that may be associated with speaking with me) when there is already much available information is not justified. Moreover, while many would argue that it is essential to have the voice and ideas of Aboriginal women and community members incorporated in such studies, many of the sources I am using for this study have done this already, allowing me to adequately communicate these ideas without replicating the data collection process.

Therefore, when information regarding northern Ontario and northern Manitoba is specifically being addressed within this paper, readers will be informed of this.

Studies were chosen largely based on availability—many government documents were available, and fewer community-based resources are published. However, as further elaborated upon in the following section, non-government documents were selected by reading forwards and researching the authors of the sources. Individuals who advocated women's rights, self-government, and Aboriginal rights were amongst the many authors or sources selected for this thesis. Unfortunately, such selection was not always available (as with the government documents). I also chose not to explore the way Aboriginal issues are discussed within other areas of the world as the situation in Canada is complex as it is, including information from other areas would have further complicated the discussion. Moreover, many areas of the world have resorted to different measures in working with Aboriginal populations, thus seeking community-based information from such sources would have led to an inaccurate description of Aboriginal women's experiences. Therefore, while there was not a lot of flexibility in terms of my selection criteria for sources used in this study, and government documents (also those that contain the most statistics and data) were not selected through this same process, documents were screened for purpose and motives.

### **Anticipated Ethical Considerations**

Although I did not interact with any individuals in particular while completing my study, the subject matter is still one of sensitivity. Not only did I comment on a part of certain people's lives that may have caused (and may still be causing) harm, I commented on a culture to which I have no background or understanding. While I had no desire to be



judgemental, it is important to acknowledge that, as everyone does, I had some preconceived notions about intimate partner violence as well as the lives of people in Aboriginal communities. However, my aim in this study was twofold: 1) to gain an understanding and draw as clear and accurate an image as possible of the realities lived by individuals experiencing intimate partner violence while living on a reserve, and 2) to argue that something can be done alleviate the suffering that many individuals face on the reserve. I know that I do not have all of the answers but my hope is that my research shed some light on the situation. I tried however to be conscious of how I explained and presented things in my writing, and also aimed to include as much community-based Aboriginal research as well as works done by Aboriginal individuals as possible.

Of ethical concern, however, are the conclusions that can be drawn from this thesis. In my communication with the Aboriginal News Group, one issue they raised was my seeking to “save Aboriginal women from themselves” (personal communication, May 12, 2010). This is not my purpose, and I too regard this as a concern. I do not have the cultural knowledge to provide any kind of advice or potential solutions to Aboriginal individuals, nor am I an expert on intimate partner violence, and therefore cannot provide advice or solutions in this area either. I do not intend to “save” anyone or enlighten individuals on their own situation. Instead, I hope to shed light on the intricacies of intimate partner violence for Aboriginal women living on reserves, so that the general public (and hopefully policy makers and project funders/developers) can better understand the situation.

Of further ethical concern is the use of information regarding Aboriginal peoples. The First Nations Principles of OCAP means that First Nations own, control, access and

protect how information about them is used (First Nations Regional Longitudinal Health Survey; RHS, 2010). These principles are tied to self-determination and to the preservation and development of their culture, and as such, OCAP allows a community to decide “why, how and by whom information is collected, used or shared” (RHS, 2010, n.p.). While all the information used in this study was published and publically accessible, to respect the OCAP principles, communities should have been contacted prior to the completion of the study. Unfortunately, this was not done and is a limitation of the study. This is an ethical concern because I am using information about certain people (and although they have already agreed to have this information publically accessible), I did not seek permission to use it. This ties in to the concern of writing a paper about cultures and peoples of which I am largely uninformed. Again, while I have put forth my greatest efforts to respect the individuals being discussed in this paper, I am necessarily influenced by my own biases and misconceptions. I therefore remind readers to think critically when reading this thesis, and to realize that while many generalizations are being made, not all Aboriginal peoples live under the same conditions, nor have they experienced the same things.

Lastly, this thesis does not address the many forms of agency that exist within Aboriginal communities and amongst Aboriginal women (and men). This does not mean that such action is not present, but that this is not a focus of my study. In this study, I aim to highlight structural problems and complexities that contribute to Aboriginal women’s experiences with intimate partner violence—the purpose is not to discuss the different forms of action taking place to counteract the violence being experienced. This may seem as though such action is being undermined, however; readers should be aware that this is

simply not the focus of my thesis, not that such forms of agency do not exist nor that they are unimportant. Moreover, having worked completely from secondary sources, information about forms of agency and resistance were not available. Had fieldwork been conducted, such information would have been sought; however this was not the case, and, as such, I could only work with the data available, leading to issues of agency remaining unaddressed.

### **Limitations**

Readers may notice that much of the sources used in this thesis are “government” documents (in that they are published by the Government of Canada, Health Canada, etc.). While this is the case, many Aboriginal organizations (such as the Ontario Native Women’s Association and the National Association of Friendship Centres) use these same sources in their reports and publications. Moreover, most of the information contained in these documents was collected by Aboriginal peoples, or upon the request of Aboriginal peoples or First Nation communities/leaders (aside from those that were collected by the government for data collection purposes<sup>21</sup>). Thus, while readers may feel as though I am relying on the very bodies that have allowed the problems within Aboriginal communities to perpetuate, I have made an effort to include those that do not do so in an undermining patriarchal manner (by reading the “purpose” and “forewords” of these texts and only selecting those that have collaborated with communities in some informed and consensual manner; studies were not completed in an intrusive and

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<sup>21</sup> It should be noted that Aboriginal individuals have the right to decline participation in government-initiated data collection processes. In this sense, the right to participation is still kept within Aboriginal individuals’ hands; however, data will likely be less accurate due to the exclusion of those who choose not to participate (and often, whole communities will choose not to participate; Assembly of First Nations, 2004).

undermining way). This method was used more so for non-government documents, as government documents often did not include such background information. Of course, the issue of motives in conducting such research is a complex one and simply because one states that they have well-intentioned motives does not make their research methods or their results ethical. Thus, I used my judgement to the best of my abilities, but readers should be aware of the biases that may be present within the research used for this thesis.

It should also be noted that non-government documents related to Aboriginal communities are scarce. Projects such as the First Nations Longitudinal Health Survey (a survey created and administered by First Nations' peoples) are new and have just recently begun to receive funding (RHS, 2004). As a result, most of the research completed is by the Canadian government. While it may demonstrate concern by the Canadian government, it is also possible for the government to control the information being published about Aboriginal peoples. Moreover, most research done within Aboriginal communities does not abide by the OCAP principles, thus many communities do not participate in this research.

Of concern may also be the date of some of the sources I have used. The Ontario Native Women's Association's (1989) report, entitled *Breaking Free* was one of the main sources used for my thesis. While it may be of concern that this document is over 20 years old, it is still one of the most commonly cited studies in the current literature discussing violence against Aboriginal women. To date, no other studies have explored the issues raised in this document to the extent that *Breaking Free* does. I have attempted to supplement the 1989 information with more current data, when possible; however, because of the limited information available, this was not always possible.

## **Chapter Breakdown**

In Chapter Two, I will elaborate on the scope of intimate partner violence as it will be used throughout the study and explain my theoretical lens. In Chapter Three, I will explain the different personal and historical characteristics that might shape how a woman experiences intimate partner violence. Chapter Four outlines the different accounts of women's experiences with intimate partner violence as well as how her family reacts to the violence. Chapter Five sheds light on the community's response to the violence, and addresses the availability and appropriateness of the resources accessible to women who are experiencing violence. Chapter Six goes into detail about different laws and policies, including the justice system, and how these affect women's experiences with intimate partner violence. And lastly, Chapter Seven will conclude this paper, consolidating the information from the study and providing recommendations for what can be done to better assist and support Aboriginal women who are experiencing intimate partner violence.

## **Chapter Two: Theoretical Framework and Methods**

As mentioned in my introduction, the goal of my thesis is to understand how Aboriginal women's experiences with intimate partner violence are shaped by their lives on a reserve. Life on the reserve (much like life anywhere) includes multiple layers of interactions, including her family, her friends, her community (including its physical environment), and the way the law is enforced within the community. These layers are part of a social ecological framework and it is through this theoretical framework, along with a social determinants of health (with an emphasis on race, class and gender) theoretical lens, that I will be studying Aboriginal women's experiences with intimate partner violence. A race, class and gender outlook provides an appropriate medium to understand how different levels of oppression interact to contribute to the overall experience of Aboriginal women. Moreover, throughout the thesis, I will discuss the determinants of health, as established by Dennis Raphael (2008), and explore how these affect the overall health and well-being of Aboriginal women. These theoretical lenses will be elaborated upon in this chapter so that readers may better understand the importance of the multiple layers of experience. Moreover, this chapter will discuss intimate partner violence in more detail, so that readers may understand the different forms and characteristics of intimate partner violence.

### **Intimate Partner Violence**

I will be looking at the violent interactions that occur between intimate partners; this can include cohabiting and non-cohabiting intimate partners. As mentioned earlier, many researchers use the terms *domestic violence*, *spousal/wife abuse*, and *intimate partner violence* interchangeably. However, for the purposes of this study, domestic

violence will mean violence that occurs within the family setting (also known as family violence)<sup>22</sup>. This can include violence by any one member of the family against another.

Child abuse, elder abuse, and spousal abuse are all a part of domestic violence.

According to the Government of Newfoundland and Labrador (n.d.), from 1997-2004, of all Aboriginal women homicides that took place in Canada, 27% were by a spouse, nine percent were by a parent, and nine percent were by a parent. Moreover, they suggest that 89% of Aboriginal women have experienced some form of family violence throughout their lives (Ontario Native Women's Association, 1989), and *The Healing Journey* (2006) asserts that First Nation and Inuit women were more likely to experience family violence than their non-Aboriginal counterparts. Spousal/wife abuse will fall into the category of intimate partner violence (which is the focus of the study), and will refer to cohabiting intimate partners. According to the Centres for Disease Control and Prevention (2009, n.p.), intimate partner violence can include "physical, sexual, or psychological harm by a current or former partner or spouse. This type of violence can occur among heterosexual or same-sex couples and does not require sexual intimacy<sup>23</sup>". Furthermore, they state that intimate partner violence "can vary in frequency and severity. It occurs on a continuum, ranging from one hit that may or may not impact the victim to chronic, severe battering" (Centres for Disease Control and Prevention, 2009, n.p.)<sup>24</sup>.

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<sup>22</sup> Domestic violence and intimate partner violence are not mutually exclusive; intimate partner violence may be a form of domestic violence (if intimate partners are cohabiting). Therefore statistics and information about domestic violence can be used to describe intimate partner violence (although the reverse would not be accurate).

<sup>23</sup> While most intimate partners are sexually intimate, not all are. If intimate partners are not sexually intimate, this does deny the possibility that intimate partner violence may be experiencing intimate partner violence.

<sup>24</sup> Many studies use the terms domestic violence when they are referring to partner abuse, but are specifically referring to cohabiting intimate partners (and therefore domestic partners). I will solely use the term intimate partner violence when discussing this type of violence, as well as

The Centres for Disease Control and Prevention (2009) further describe the types of violence that can occur. They describe physical abuse as intentional use of physical force to potentially cause death, disability, injury, or harm. Types of physical violence can include, but are not limited to: biting, slapping, throwing, shoving, pushing, scratching, grabbing, choking, shaking, punching, burning, use of a weapon, and/or use of one's body size, strength and/or weight to control the other individual. Sexual violence can be divided into three categories: 1) the use of physical force to compel someone to engage in a sexual act against his or her will (whether the act is actually completed); 2) attempted or completed sexual act in which one of the partners is unable to understand the nature or condition of the act, unable to decline participation, or inability to communicate unwillingness to participate in the act; and 3) abusive sexual contact. Threats of physical or sexual violence can include the use of words, gestures or weapons to communicate the intention of causing death, disability, injury or harm. The last type of violence described is psychological/emotional violence. This can involve trauma to the victim caused by acts, threats of acts, or coercive tactics<sup>25</sup>. While the problem of intimate partner violence is not unique to Aboriginal peoples, the root causes are unique (Royal Commission on Aboriginal People, 1996) and therefore a more specific investigation, tailored to the experience of Aboriginal peoples, must be taken.

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intimate partner violence occurring in non-cohabiting relationships. Only studies that provide similar definitions of domestic violence as the definition of intimate partner violence provided by the Centres for Disease Control and Prevention (2009) will be used, so as to ensure that it is the same type of violence that is being referred to throughout the study. I chose not to use the term domestic violence as this excludes non-cohabiting partners but also because it can refer to violence occurring in a domestic environment that is not between intimate partners (ex. parent-child violence).

<sup>25</sup> Psychological/emotional violence will be expanded upon in the discussion of the Power and Control Wheel (p. 3).



At the same time, it is important to acknowledge that not all types of violence are the same. According to Johnson (2008), four different types of intimate partner violence exist<sup>26</sup>. Unfortunately, when most studies of intimate partner violence are being conducted, these different types of and motives for violence are not taken into consideration. This provides us with a somewhat ambiguous understanding of intimate partner violence, as well as unrepresentative data for rates of intimate partner violence. Johnson (2005) states: “it is no longer scientifically or ethically acceptable to speak of domestic violence without specifying, loudly and clearly, the type of violence to which we refer” (p. 1126). Therefore, I take this time to highlight the four typologies of intimate partner violence so that together, we can draw a clear picture of what is being described and experienced.

The first form of violence is known as *intimate terrorism*. In these cases, the perpetrator uses violence as a means of controlling the partner—the partner, however, does not reciprocate this violence. This form of abuse is what is most often referred to in the discussion of intimate partner violence, and includes economic, emotional, physical and/or sexual abuse. The Power and Control Wheel was created by the Duluth Domestic Abuse Intervention Project (Johnson, 2008) in order to explain the different means of power and control that can be exerted on the partner. The Power and Control Wheel, also known as the Duluth Model, is widely used to represent partner violence when control is being employed. With intimate terrorism, as this figure depicts, there is a general pattern of power and control. Often, included in intimate terrorism is: the full control of all finances (giving the partner no liberty to support themselves and creating dependence);

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<sup>26</sup> Johnson (2008) uses the term “domestic violence” in the discussion of intimate partner violence. Therefore, while in his text, the term “domestic violence” is used, in this study, the term “intimate partner violence” will be used instead.

denying the partner contact with friends and family (furthering dependence because the partner no longer feels she has anyone to rely on but the perpetrator); blaming the woman for the violent behaviour and further humiliating her through verbal abuse (this is often the cause of the internalization of the abuse and loss of self-worth, causing the woman to feel that the violence is her fault); using guilt, coercion and the children as a means of forcing the woman to stay in the relationship (these methods of coercion often make the woman feel as though it is her choice to stay, furthering negative impacts on self-worth and self-esteem). As can be seen with the Power and Control Wheel, all the behaviours are centered around power and control—therefore, assessments of individual events will likely not highlight the patterns of power and control that are often associated with *intimate terrorism*. Actual physical or sexual violence are not represented as spokes on the wheel because it is not just another means of control. According to Johnson (2008), when violence is added, the abuse becomes much more than just a sum of its parts. It instigates terror and constant threat—she knows that her partner will do anything to have control, including hurting her. According to Johnson (2000), men are the perpetrators of intimate terrorism 97% of the time. Moreover, women who come into contact with hospitals, shelters and courts are likely to be experiencing *intimate terrorism* (Johnson, 2008). Considering most of the information used from this study is coming from research done with individuals who have been through these agencies, it is likely that for the majority of the discussion of intimate partner violence, I will in fact be discussing *intimate terrorism*; however, to use the two terms interchangeably would limit the scope of my study and likely give a false depiction of the different forms of violence

Figure 1



Taken from Johnson, 2008, p. 7

experienced. I will therefore refrain from making the blanket statement that in the discussion of intimate partner violence I am referring to *intimate terrorism* (even though this is likely to be the case in the majority of my discussion).

The next form of violence is known as *violent resistance*. This occurs when the partner who is not usually the perpetrator uses violence. This is usually for self-defence or retaliation purposes, and not for the sake of control. Often, to the “victim” of violence, the only way out appears to be to kill the violent partner. These kinds of situations have been given popular media attention and have gained some credibility within the judicial system as well. According to the Canadian Centre for Justice Statistics (2001), between 1991 and 1999, spouses were responsible for killing 62 Aboriginal women and 32 Aboriginal men. It is therefore wrong to believe that violence is always a one-way exchange; however, as Johnson (2008) has underscored, women most often perpetrate

violence as a means of fighting back or gaining back some sort of control or dignity.

*Mutual violent control* occurs when both partners are violent and controlling. This type of intimate partner violence occurs in a very small number of cases and can be described as a mutual combat. Lastly, *common couple violence* (also known as situational couple violence) is the most common type of violence identified by couples. There is no attempt for coercive control in this form of violence and is usually situationally provoked (as an escalation of an argument). This violence may occur as an angry reaction to something, to get the partner's attention, or as a means of control to win the argument<sup>27</sup>.

Therefore, throughout this text, while all four forms of intimate partner violence will be used, I will be most often referring to cases of intimate terrorism without explicitly categorizing it as so. This is because there is often not enough information to determine exactly what type of violence is taking place. However, it is important to recognize that these different forms of violence exist, and, therefore, not all violence is the same.

### **Social Ecological Framework**

I used a social ecological theoretical lens to understand how intimate partner violence is shaped in Aboriginal communities. Basically, this theory suggests that different levels of interactions take place to create unique situations; in order to understand the situations these different levels must be understood.

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<sup>27</sup> To better understand the difference between common couple violence and intimate terrorism, if several couples who have experienced some form of intimate partner violence were surveyed, most would likely identify one or two specific events that escalated to violent behaviour; however, others (most likely fewer) would identify violence as occurring quite regularly—this regularly occurring violence is more likely to be intimate terrorism. Therefore couples who describe violence are likely identifying common couple of violence, but couples who identify many violent occasions are likely describing intimate terrorism.

Social ecological theory finds its roots in human ecology. Human ecology suggests that individuals are a part of and shape the world in which they live (Hawley, 1944). Much like plants and animals are interdependent on the web of life, so are humans. Hawley (1944) suggests that life is a continuous struggle between an organism and its environment—while organisms are continuously adapting, growing and evolving, they are also crowding and becoming reliant upon a limited number of resources. This creates a complex action and reaction between not only the organism and its environment, but between the organism and other organisms—essentially, individuals become related to one another in a unique way, allowing them to make use of their habitat in more effective manners (Hawley, 1944). What distinguishes human ecology from other forms of ecology is humans’ degree of flexibility in shaping their behaviour. Human ecology can thus be defined as the study how humans live in and are interconnected to their communities.

It is from this theory that the social ecological framework was initially conceptualized. Relying on the same basic premise, this model suggests that a problem can be best understood looking at its effects on the different levels of influence within its ecosystem. This kind of approach is an alternative to the largely biological and geographical analyses that were done in the past to understand human behaviour (Oetzel, Ting-Toomey & Rinderle, 2006). Essentially, it is rarely one single factor, but many interconnected factors, that influence the shape of a problem (Heise, 1998). Such multilevel theorizing allows a focus to be placed on an understanding of concepts of multiple levels, as well as between the different levels (Oetzel et al., 2006). Oetzel et al. (2006) go on to say that “multilevel models create a rich, layered picture of the

phenomenon under study [and foster] synthesis and synergy, [creating] links and loops where there were none before” (p. 728).

Oetzel and Duran (2004) have used these levels and applied them to issues of intimate partner violence. It is important to note that most studies (e.g., World Health Organization, 2010) analyzing intimate partner violence using a social ecological framework have used these multiple levels to understand causation of violence (i.e., what about a person’s personal history, friends, community, etc. makes them more likely to be a victim or a perpetrator)—this is not how I have used them. Instead, I applied my understanding of these multiple levels to better conceptualize how women experience intimate partner violence. Oetzel and Duran (2004) suggest five levels of interaction that influence the conditions and experiences of intimate partner violence. These levels are: *individual; interpersonal; community; institutional/organizational; and policy.*

I aimed to understand how intimate partner violence is experienced at every level of an Aboriginal woman’s “ecosystem”.

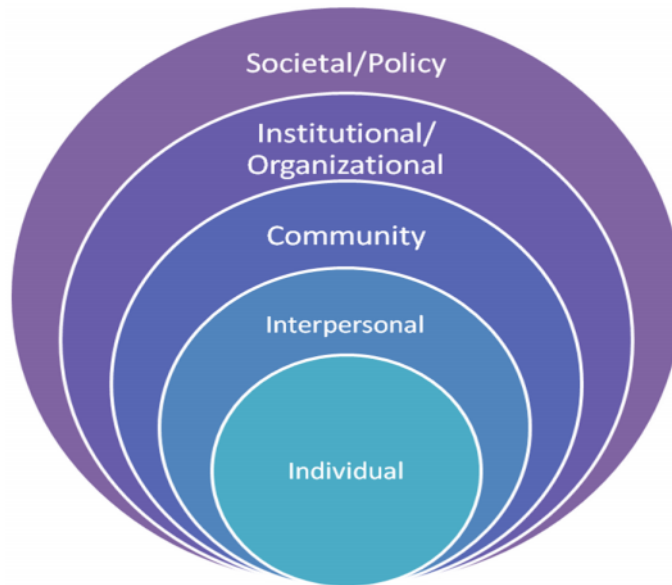
### **Individual**

Information about the individual usually includes personal history and biological factors (Oetzel & Duran, 2004). Personal history can include experiences of violence in the past, experiences in residential schools, and more. Biological factors may include disabilities, infertility and mental health problems

### **Interpersonal**

The interpersonal level includes interactions between family members, friends, intimate partners, peers and more. As is often described in the literature, social support can play an important role in how an individual copes with and perceives violence

Figure 2



(Wilcox, 1981). Therefore, gaining an understanding of the many relationships that exist in women’s lives will allow us to better understand her experience with intimate partner violence. Information about interpersonal relationships includes both intimate and non-intimate relationships, and both of these are of importance to my study.

### **Community**

The community plays a large role in the sense of belonging an individual feels. Specifically, feelings of rejection or lack of belonging can have negative impacts on an individual’s mental health (and along with this, a sense of security, connection, etc.; Choenarom, William & Hagerty, 2005)—these feelings are further exacerbated when one’s social support network is inadequate. The goal of this level of analysis was to gain a sense of whether women feel as though they belong in the community, as well as how the community reacts to and deals with issues of intimate partner violence (i.e., do they turn a blind eye, do they take every case seriously, do they believe the issue does not

exist within the community, etc.). Such community beliefs are likely to influence whether a woman discloses abuse and how she copes with it as well.

### **Institutional/Organizational**

This level of analysis includes the institutions and organizations where women who experience intimate partner violence turn to for assistance. This can include the band council, nurses, doctors, counsellors, shelters, etc.

### **Societal/Policy**

At this level of analysis I explored how greater authorities than Band councils play into the experience of intimate partner violence. It is here that police reactions, the courts, and alternative justice measures are considered.

Through recognition of the multiple layers of influences surrounding the occurrence of intimate partner violence, a more holistic understanding of intimate partner violence can be achieved. Moreover, such an approach is in line with how Aboriginal peoples view themselves in relation to the rest of the world. For example, Perrault and Proulx (2000) state that “the mental, physical, emotional and spiritual components of self must be integrated within the individual, just as individuals need to be integrated within families and communities, and in their relationship to the earth” (p. 14). It is therefore in looking at all these aspects that a full understanding of one’s well-being can be assessed.

### **Social Determinants of Health**

Dennis Raphael (2008) has offered 12 key determinants of health<sup>28</sup>. These determinants offer a collaborative, interdisciplinary and policy-oriented way of looking at health and well-being. The Public Health Agency of Canada (2010, n.p.) states that

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<sup>28</sup> The criteria for the social determinants of health include: “important to the health of Canadians...understandable to Canadians...have clear policy relevance to Canadian decision-makers and citizens...are especially timely and relevant” (Raphael, 2004, pp. 6-7).



“...the research is telling us that we need to look at the big picture health to examine factors both inside and outside the health care system that affect our health”. Therefore, taking a “big picture” look at key factors in determining health and well-being factors would be the most appropriate means of understanding one’s health status. The key determinants are (Raphael, 2008): Aboriginal status<sup>29</sup>; income and income distribution; social exclusion; education; employment and working conditions; social safety net; unemployment; health services; early life; food security; gender; and housing (these key determinants are further explained in Appendix A).

As will be seen throughout this thesis, Aboriginal individuals, specifically Aboriginal women and those living in isolated communities, are adversely affected by all of these determinants<sup>30</sup> (i.e., many of the services, resources and opportunities that are necessary for optimal health are not available or are limited for these individuals). Health is a crucial factor to overall well-being, and also affects how one experiences her or his own life<sup>31</sup>. Such an approach to analyzing health and well-being also falls in line with an intersectionality approach because these determinants are not independent of each other (Raphael, 2008)—they influence and are influenced by the other determinants of health.

Moreover, Weber and Para-Medina state:

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<sup>29</sup> Recall that these are *social* determinants of health. Aboriginal peoples find themselves on this list due to various behaviours that are common within Aboriginal populations (such as high body mass index ratings, high levels of smoking, high levels of family violence, etc.; Raphael, 2004). This is not to say that Aboriginal peoples are solely responsible for being an at-risk population—the reasons for much of the behaviour that are associated with being “at-risk” are due to high levels of stress and a lack of control, both factors that are influenced by their history and their current relationship with the Canadian government.

<sup>30</sup> Note that simply being Aboriginal has implications for one’s health. While Public Health Agency of Canada (2010) describes the importance of biological and genetic factors in affecting health, readers should contemplate the implications of having “Aboriginal status” on the list.

<sup>31</sup> Aboriginal people define health and illness in terms of “balance, harmony, holism, and spirituality” (Raphael, 2004, p. 267) instead of western concepts such as physical dysfunction and disease. Therefore, looking at the whole picture (which is the aim of this paper) tries to offers an Aboriginal perspective on health and well-being.

The implications of intersectional conceptualizations are critical particularly when we consider how to reduce health inequality. When race, and ethnicity, class, gender and sexuality are treated as resource deficits, for example, programs to increase access to resources or to change the values, behaviors and cognitions of subordinate groups to the presumably more healthy styles common dominant groups are the logical outgrowth... If social inequalities are viewed as relationships of dominance and subordination, however, the ways in which dominant groups benefit from denying others adequate child-care, medical access, etc., become the focus of attention. In this case, changes that might alter the balance of power such as living wage; universal, affordable quality child-care; accessible public transportation; equal access to education; and universal prevention-focused health care become the preferred interventions. (in Reid, Pederson, & Dupere, 2007, p. 81).

Especially important for this paper are the concepts of Aboriginal status, class and gender. Therefore, while all the social determinants of health will be addressed throughout the text, a large part of the text will be spent looking at how Aboriginal women are oppressed on multiple levels, including their race, class, and gender.

### **Race, Class and Gender**

Many feminist theories (e.g.. Marxist Feminism, Radical Feminism, Socialist Feminism; Ouellette, 2002) assert that changes in power structures are needed for equality to be achieved (Stanford Encyclopedia of Philosophy, 2005), and the scope of this paper is in line with such beliefs: without a change in power structures, gender equality is difficult, and perhaps even impossible to achieve. Power has a variety of definitions and has been debated for many years. In the context of Aboriginal intimate partner violence, again, power presents itself in a variety of guises. This is why an intersectional approach, looking at several dimensions such as race, class and gender, offers an appropriate scope for understanding the way power and oppression are exerted upon Aboriginal women. Marilyn Frye has described total power as having unconditional access, while total powerlessness is being unconditionally accessible (Stanford

Encyclopedia of Philosophy, 2005). Most men (both Aboriginal and non-Aboriginal), non-Aboriginal Canadians, individuals in the government, individuals working at shelters and able to offer assistance to Aboriginal women, all have more *access* than many Aboriginal women—access to knowledge, education, employment, finances, means of having their voices heard and affecting change. This is not to say that women are not capable of this, but the way our society is structured today makes it more difficult for women to access these things. Therefore, a gender-based analysis would seem to also fall in line with this study, and it does to some extent; however, it is not the only component to understanding shifts in power structures. Instead, a race, class and gender analysis will be taken. This is for several reasons. Primarily, there has existed some concern regarding the lack of feminist voices in research on Aboriginal women (Wotherspoon & Satzewich, 2000); however, the reality is that the concerns of Aboriginal women are not one and the same as those of mainstream feminists. For example, Winona Stevenson, a woman of Cree heritage stated:

I do not call myself a feminist. I believe in the power of Indigenous women and the power of all women. I believe that while feminists and Indigenous women have a lot in common, they are in separate movements. Feminism defines sexual oppression as the Big Ugly. The Indigenous Women's movement sees colonization and racial oppression as the Big Uglies. Issues of sexual oppression are seldom articulated separately because they are part of the Bigger Uglies. Sexual oppression was, and is, one part of colonization of Indigenous peoples. I want to understand why feminists continue to believe in the universality of sisterhood, and why they strive so hard to convert Aboriginal women. I want feminists to know why many Aboriginal women do not identify as feminists. I perceive two parallel but distinct movements, but there ought to be a place where we can meet to share, and offer honest support without trying to convert each other. (in Monture-Okanee, 1992, p. 253).

Therefore, while there is acknowledgement of the importance of gender equality, often this is not Aboriginal women's primary concern (Ouellette, 2005). There is also an

understanding that for immigrant and minority women, gender oppression is not the only form of oppression faced, and, therefore, to join a women's movement focused solely on gender equality is often not the ideal approach to dealing with this oppression (Ouellette, 2005). Priscilla Buffalohead reinforces this idea by stating:

Whether they realize it or not, feminist scholars dealing with the history of Euro-American women become caught up in issues of sex equality precisely because they belong to what has always been a class-stratified society characterized by unequal access to power, prestige, and privilege. Many tribal societies, on the other hand, stem from egalitarian cultural traditions. These traditions are concerned less with equality of the sexes and more with the dignity of individuals and with their inherent right—whether they be women, men or children—to make their own choices and decisions. (Buffalohead, 1983, p. 236).

This kind of idea is not new and has been used to describe the feelings of coloured women all around the world (Lorde, 1984). Lorde (1984) explains that in our society, many see things as simplistic oppositions, and one side is made to be the “good” while the other is “bad”. She goes on to say that “there must always be some group of people who, through systematized oppressions, can be made to feel surplus, to occupy the place of the dehumanized inferior.” (Lorde, 1984, p. 115)—Aboriginal women are part of this group. Furthermore, studies have also demonstrated that Aboriginal women often put the well-being of the community before their own rights and concerns (Ouellette, 2005) due to the nature and importance of family and community in many of these cultures, and therefore advocating solely for gender equality may not satisfy additional priorities of Aboriginal women. Therefore, in line with such concerns and differences, I examined how race, class and gender interconnect to create the realities that Aboriginal women experience—this kind of approach is also known as intersectionality (Bograd, 1999; Crenshaw, 1997). This is also in line with the fact that many Aboriginal women live in poverty and do face racial and cultural oppression, as well as gender oppression—these

experiences are not independent of each other. As Crenshaw (1997), one of the first to propose such an approach to feminism, states: “An erasure need not take place for us to be silenced. Tokenistic, objectifying, voyeuristic inclusion is at least as damaging as exclusion. We are as silenced when we appear in the margins as we are when we fail to appear at all” (p. 250). It is therefore taking these different dimensions into consideration that I aimed to not simply use a theory that has so often put Aboriginal women in the margins. Secondly, I am chose to take such a theoretical lens as I believe that it is due to racism and a lack of resources, along with gender oppression, that many Aboriginal women experience intimate partner violence uniquely. Poverty, stereotypes and inequality are all part of this experience. Furthermore, McIntyre and Scott (1997) explain that because stereotypes based on race, disability, class and sexual orientation have constructed Aboriginal women as promiscuous, “over-sexed” or sexually indiscriminate, they have historically not only been disproportionately vulnerable to sexual exploitation and abuse, but disproportionately treated as beneath law’s protection. Ng (1989) also expresses:

It becomes clear that racism and sexism are not merely attitudes held by some members of society...[more] fundamentally, they are systemic: they have crystallized over time in the way we think and act regardless of our own gender, race and class position. Indeed, sexist, racist and class assumptions are embodied in the way we ‘normally’ conduct ourselves and our business in our everyday life. (p. 63).

It is therefore important to recognize these biases and work within them in order to break them down. Although my research focused on the experiences of women (as was described in my methods), I did not do so to undermine the experiences of men, nor do I

imply that all women are “victims” in a helpless and powerless sense<sup>32</sup>. Lastly, this type of intersectionality approach is in line with the social ecological framework that I employed in my analysis of the research findings. It takes into account the multiple levels of discrimination that Aboriginal women can experience, much as the social ecological framework takes into account the multiple levels of one’s ecosystem influence how intimate partner violence is perceived. Bograd (1999) states that intersectionalities:

color the meaning and nature of domestic violence, how it is experienced by self and responded to by others, how personal and social consequences are represented, and how and whether escape and safety can be obtained...From this perspective, intersectionality suggests that no dimension, such as gender inequality, is privileged as an explanatory construct for domestic violence, and gender inequality itself is modified by its intersection with other systems of power and oppression. So, for example, while all men who batter exercise some form of patriarchal control, men’s relationship to patriarchy differ in patterned way depending on where they are socially located. While all women are vulnerable to battering, a battered woman may judge herself and be judged by others differently if she is white or black, poor or wealthy, a prostitute or a housewife, a citizen or an undocumented immigrant (pp. 276-277).

All of this needs to be taken into consideration in trying to understand a woman’s experience of intimate partner violence—the social ecological framework will enable us to explore these intersectionalities.

### **Limitations of my Theoretical Frameworks**

It is using the five levels of the social ecological framework that I will investigate the experiences of Aboriginal women who live on reserves. However, before this can be done, some criticism of my theoretical framework must be addressed. First and foremost, taking a social ecological framework to explain causation risks assuming that the victim plays a role in the violence (i.e., places blame on the violence). Some studies do in fact

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<sup>32</sup> I use the term victim to refer to an individual who has experienced intimate partner violence, however this does not imply that she was unable to help herself, simply that she experienced violence and oppression, making her a victim of these two forces.

demonstrate that individual factors make some people more likely to experience intimate partner violence; however, this is not the purpose of my study. My goal is to understand the experiences of women and these are necessarily shaped by personal and individual factors, but do not infer that some characteristics warrant or cause abuse. Another possible criticism of multilevel approaches is that they risk being too complex and subjective, and may render the conclusions too varied to be useful. While I acknowledge such criticisms, and admit that all of the layers of the ecosystem will likely not be given the same attention throughout this study, I believe that this type of thorough investigation is necessary because violence and experiences of violence are multi-faceted. Moreover, some studies criticize the race, class and gender approach as it often does not manage to encompass all the layers of oppression well (Spelman, 2001). Instead, each layer of oppression is looked at individually and with each added level of oppression, it is assumed to simply be an added burden. Spelman (2001) goes on to state that how one form of oppression is experienced is influenced by and influences how others forms are experienced. To simply add these multiple forms of oppression of coloured women in a society that is both racist and sexist is to suggest that this is another burden—in fact, it is a different experience altogether. Spelman’s argument is valid and I will, therefore, aim to describe the different forms of oppression that women face in a non-additive manner. I also recognize that each burden is unique in itself and would like to encourage readers to keep this in mind as well, as they read through this study. However, acknowledging these criticisms, I still believe that in order to better provide programmes and support services to individuals experiencing intimate partner violence, a holistic understanding of their experiences must first be obtained. Lastly, relating each of the key determinants of health

to Aboriginal women's lives may be onerous, and not providing an in-depth analysis may be perceived as brushing over the situation. I am using this model to further support the argument of oppression. Resources are not distributed equally, and this is a large factor in the health and well-being of Aboriginal women. While these determinants will not be referred to explicitly throughout the text, readers should keep them in mind to gain a better understanding of the whole situation. This is the goal and purpose of my study.

### **Conclusion**

While the different levels of oppression a woman experiences may not always be explicitly mentioned, it is important to keep in mind that these forms of oppression are always present and influence her everyday life. Moreover, it is difficult to isolate the different levels of a woman's ecosystem. The links between these levels are complex—each influences and impacts the others, yet is separate. I apply this conceptualisation of interdependent levels to my study, focussing on the individual, her interpersonal relationships, her community, the institutions and organizations, and the policies and societies she affects and is affected by in the chapters that follow. These multiple levels of oppression and environment, are always present and always affecting how a woman's life, and specifically the violence she is experiencing, is lived. Lastly, it is important to keep in mind that not all violence is for the purpose of control, but that it is often such controlling intimate terrorism that is seen within the justice and shelter systems.



### **Chapter Three: Colonialism and its Effects – Is Colonialism Really Over?**

Personal history plays a large role in how people understand, internalize and react to violence (Oetzel & Duran, 2004). Although obtaining specific personal histories from Aboriginal women would have been difficult without individual interviews, there are some important commonalities in the histories of many Aboriginal women<sup>33</sup>—these largely include characteristics such as poverty and low levels of education, as well as the impacts of colonialism. These commonalities are not independent factors that can just be added on to individuals’ personal histories—factors such as poverty, low levels of education and issues such as substance abuse are interwoven into the history of colonialism and thus, they are interdependent. This is important to recognize because, as has been explained, to look at the sum of these problems without understanding their dynamics is to have a limited and incomplete perspective of the problem. In the discussion of intimate partner violence in Aboriginal communities, some suggest that putting an emphasis on the history of Aboriginal peoples, largely colonialism, is to take a dated and unrealistic perspective on the problem. Instead, more all encompassing perspectives are necessary. As Carter (1996) states, any approach that stresses subjugation and cultural decline “ignores the motives, interests, and understanding of Aboriginal people themselves, overlooks the degree of cultural continuity” (p. 55), it also overlooks the issue of individual agency<sup>34</sup>. Instead, McGillivray and Comaskey (1999)

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<sup>33</sup> This does not mean that all Aboriginal women experience all these commonalities, but that many Aboriginal women living on reserves are likely to have some experience living under these conditions (which in turn, has affected their lives).

<sup>34</sup> By emphasizing the role of colonization, it risks overlooking the abilities individuals had to control their own lives. While the situations and circumstances during colonization have shaped people’s lives into much of what they are today, people are still making choices and effecting change in their lives—individuals still have some levels of control and personal autonomy. Thus,

suggest that “a desirable approach is one that looks at mutual interactions and influences and takes a more nuanced and comparative view of the lives of Aboriginal women in the colonial context” (p. 7). While I agree with Carter (1996) and McGillivray and Comaskey (1999), to not address the issue of colonialism and its impacts would be to turn a blind-eye to a large part of many Aboriginal people’s lives.

### **The Importance of Considering Colonialism**

Studies show that colonialism is playing a role in the high rates of intimate partner violence that exist amongst Aboriginal people. For example, Brownridge (2003) completed a study that aimed to understand the high rates of prevalence and severity of intimate partner violence that exists against Aboriginal women in Canada. In this study, Brownridge (2003) made use of markers for intimate partner violence and compared these markers against Aboriginal women in attempts to account for the high rates of intimate partner violence. For example, being young, having low educational achievement, being unemployed, living in common-law relationships, having less family stability (i.e., having been divorced, etc.), living in a rural area, patriarchal beliefs, alcoholism, and having a large family are all markers that make one’s risks of experiencing intimate partner violence elevated. These factors have been identified independently of studying Aboriginal populations. However, after looking in more detail at the demographic of Aboriginal people living on reserves, one will find that the general Aboriginal population reflects many of these factors: it is younger than that of the general Canadian population (over one third of Aboriginal women are aged 14 years or younger; Stout & Kipling, 1998); educational achievement is lower than that of the general

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by focussing solely on colonization, individuals’ abilities to effect change in their lives is undermined.

Canadian population (Stout & Kipling, 1998); there are higher rates of unemployment (26% of status Indian women living on reserves are unemployed, compared to approximately nine percent of non-Aboriginal women; Stout & Kipling, 1998);

Aboriginals are more likely than non-Aboriginals to live common-law<sup>35</sup> (Brownridge, 2003); Statistics Canada reported that approximately 50% of Aboriginals lived in rural areas (on or off reserves) in 1996 (Brownridge, 2003); studies suggest that Aboriginal men have internalized the “White male” devaluation of women, a belief that has decreased amongst men in the general Canadian population (Brownridge, 2003);

alcoholism has been identified as a particularly problematic behaviour among Aboriginals (Government of Canada, 2008); and the average Aboriginal family is larger than the average non-Aboriginal Canadian population (Stout & Kipling, 1998). Thus, with all of these markers being identified within the Aboriginal population, one may speculate that having so many risk factors present in the population would explain the high rates of intimate partner violence that exists within these populations. However, the presence of these risk factors does not account for everything; even controlling for the presence of these markers, the rates of intimate partner violence within the Aboriginal population is still higher than that of the general non-Aboriginal Canadian population.

Brownridge (2003) concludes:

in demonstrating that several important risk markers of violence do not account for the significantly higher prevalence of violence against Aboriginal women, the results indirectly lend empirical support to the theory that the unique experience of colonization of Aboriginals in Canada plays a large role in their disproportionate likelihood of violence against women. (p. 81).

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<sup>35</sup> Although Aboriginals living in Canada have similar divorce rates to that of the Canadian population, due to high rates of cohabitation and the shorter duration of cohabiting relationships, it is likely that separation occurs more often within long term Aboriginal relationships than the rest of the Canadian population (Brownridge, 2003).

Moreover, he suggests that this history is part of their culture and therefore should be taken into consideration when adopting and implementing programmes and policies. Supporting this idea, the Canadian Council on Social Development and the Native Women's Association of Canada (1991) suggest that violence within Aboriginal communities has its own unique dimensions, affecting not only Aboriginal women, but whole communities. It is with this that I will share a brief history of colonialism and its impacts on Aboriginal people today.

### **A History of Oppression and Denigration**

According to oral traditions of Aboriginal elders, the presence of family violence within Aboriginal communities was scarce, if present at all (Goel, 2000; LaRocque, 1994). Additionally, alcohol and substance abuse were also thought to be absent from most Aboriginal communities (Goel, 2000). According to Judge Sinclair (in McGillivray and Comaskey, 1999), many traditional Aboriginal communities were matriarchal societies—women were the ultimate holders of political and social power, and such traditions and beliefs were passed down from mother to daughter. At the least, women were the equal of men and were entitled to be treated with respect (Koshan, 1997).

On the other hand, Brownridge (2009), in answering whether violence against Aboriginal women began upon European contact, he suggests that this is highly unlikely. This analysis is based upon observations of early Europeans, as well as from original Indian legends that identified the existence of such violence (Brownridge, 2009). Stemming from studies looking at other indigenous populations, Durst (1991) states that “conjugal violence has been present in native communities for a long time and it was incorrect to suggest that it was a new phenomenon blamed on increased development” (in

Brownridge, 2009, p. 170). The existence of violence in indigenous communities has also been found in Aboriginals and Islanders living in Australia (Brownridge, 2009). Thus, it is unrealistic and somewhat idealistic to suggest that violence against women did not exist in Canadian Aboriginal communities before European contact. Moreover, many of these romantic depictions of Aboriginal communities contribute to the helpless images of Aboriginal women portrayed in much of the literature. Aboriginal communities were not free of problems and peril pre-colonization. Nevertheless, even though violence against Aboriginal women existed before colonization, there is still evidence of the negative impacts of colonization and the changed circumstances that have contributed to the increase in violence against Aboriginal women.

With this in mind, it is still widely accepted that violence against women was a rare phenomenon within Aboriginal groups (Brownridge, 2009). Furthermore, crimes against women were treated in a more severe manner than crimes against men (Koshan, 1997). While such statements are controversial, most Aboriginal peoples accept this as the truth (Goel, 2000). Whether this was the reality of the situation, the fact that it has become a brutal reality post-colonialism indicates that the circumstances have significantly worsened (Stout & Kipling, 1998).

European patriarchy was introduced to Aboriginal peoples through the process of colonization (Brownridge, 2008). The oppression experienced by Aboriginal men within the European patriarchal society is likely to have contributed to these men directing their frustrations towards Aboriginal women (Brownridge, 2008). European settlers did not have the same beliefs about the value of women as Aboriginal men pre-colonization, and thus treated women as less than equal (LaRocque, 1994). Violence against women was

thought to be acceptable and was sanctioned by European standards. Thus, it can be argued that Aboriginal men's value of women changed, and aggressive behaviour towards women was learned<sup>36</sup> (Bandura, Ross, & Ross, 1961). This is especially likely to be the case considering that Aboriginal beliefs and traditions were thought to be inferior by European standards and explicit efforts were made to eradicate such traditions (Goel, 2000). For example, for the Anishnaabe peoples (living around the Great Lakes of Canada), the signing of the Robinson treaties in the mid-1800s included the formal surrender of land and political autonomy, and required the observance of Canadian law by signatories (Lafleche, 2010). Once the Robinson treaty was signed, many new laws were put into place (such as the Indian Act) and prohibited the expression of much Aboriginal culture (Lafleche, 2010). With this, women were no longer allowed to hold positions of authority within their communities, traditional religious beliefs (such as Mother Earth) were seen as unacceptable, the meaning of family was redefined, and more<sup>37</sup> (LaRocque, 1994). Not only were women oppressed by the European colonizers, as all Aboriginal individuals were, but they were further oppressed by the Aboriginal men who were taught that it was appropriate to release their frustrations upon these women. Aboriginal men were and are still being emasculated, and having embodied the sexist beliefs of European settlers, began and are still releasing their rage about their position in Canadian society (LaRocque, 1994).

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<sup>36</sup> It is important to note that Aboriginal men did not blindly succumb to behaving violently against men. While beyond the scope of this study, the situation is much more complex than Aboriginal men copying the behaviour of their European counterparts; however, this is very likely to have played a large role in how this behaviour became more tolerated (Brownridge, 2008).

<sup>37</sup> Not all of these were directly due to the implementation of the Indian Act; however, through the implementation of Christian beliefs, teachings in residential schools, and the banning of certain cultural practices, these changes were implemented.

In the discussion of culture, Bourdieu suggests that power is at the domain of all social life, and that this is expressed through culture (Swartz, 1997). As Swartz states, “culture, then, is not devoid of political content but rather an expression of it” (1997, p. 7). Such power hierarchies were present within Aboriginal peoples, and, for the Anishinaabe peoples, this was demonstrated through symbols on the totem pole, as well as individuals’ professions (such as being a medicine man or woman; Lafleche, 2010). However, upon the many changes implemented by European colonizers (as will be described in this chapter), such power hierarchies, as well as traditions and beliefs, were outlawed and devalued. New laws, hierarchies and social customs were implemented, causing chaos and dissonance within many Aboriginal peoples (Goel, 2000). Brownridge (2009) argues that while attempts to assimilate Aboriginal peoples into European culture were (and still are) strong, the actual assimilation of Aboriginals to Western culture has been relatively weak. Kahn states that Aboriginal peoples “have lived for a considerable period now in a state of social disorganization and stress not fully acceptable to, not wanting in western society, but with their own culture and ways no longer viable. It is this that is the basic social matrix out of which their high rates of severe emotional disorder has come about and been maintained” (in Brownridge, 2009, p. 173).

Prior to colonization, Aboriginal systems were established to deal with societal problems, and individuals, as well as communities, were held responsible for deviant behaviour and rule breaking (Brownridge, 2009; LaRocque, 1994). Since the dismantling of traditional methods of justice and social order, issues of accountability and systems of law have been rendered much more complex—this contributes to the many problems that

Aboriginal communities are currently facing, including intimate partner violence and associated behaviours.

While many would agree that intimate partner violence, and many of the other problems that Aboriginal communities face, is a result of colonialism and its effects (Goel, 2000), it is important to take an in-depth look at what kinds of effects colonization actually had. Many argue that one of the main purposes of colonization (other than the exploitation of resources) was to civilize Aboriginal individuals (i.e., “kill the Indian and save man”; Goel, 2000, p. 303). Goel (2000) has divided colonization initiatives that have allowed and condoned violence against women into three categories: assimilation, ruining the flow of traditions by separating generations, and diminishing the status of women and entrenching male dominance.

### **Assimilation of Aboriginal Peoples**

For European colonizers, the only thing stopping unencumbered expansion was the Aboriginal peoples. Legislation and treaties were put into place to enable the Crown to *police* and *protect* Aboriginal peoples. The reserve system was also implemented in order to “civilize” the Aboriginal people. Many of the beliefs and behaviours of Aboriginal people were thought to be unacceptable by the European colonizers and therefore these ways of living needed to be eradicated, hence the saying: Kill the Indian and save the man. The Catholic Church played a large role in this project. Moreover, as colonial settlements increased, the status, position and social power of the Aboriginal peoples living in these areas decreased. Much of the legislation being implemented created complex rules and regulations to govern the lives of Aboriginal peoples. Soon enough, spiritual and cultural practices were criminalized. Aboriginal peoples were also



eventually divided into bands and enumerated<sup>38</sup>. Because of such initiatives, many lost their status as “Indian”, and as time passed, many who were once registered lost their status. “Enfranchisement” meant gaining access to public schooling and the right to vote, but giving up one’s right for which his or her ancestors had bargained.<sup>39</sup> Some were enfranchised voluntarily, but most were forced to give up their right. The purpose of such initiatives was to intentionally abolish any type of “Indian” status. This was made explicit in the statement to Parliament in 1920 by Duncan Campbell Scott, superintendent of Indian Affairs, when he said: “Our object is to continue until there is not a single Indian in Canada that has not been absorbed into the body politic and there is no Indian question, and no Indian department and that is the whole object of this Bill” (in Goel, 2000, pp. 303-304). The separation of Aboriginal peoples from the rest of Canadians was thought to have kept Aboriginal peoples “behind” (i.e., not being able to develop and progress in their desired manner). There was therefore the intention of absolving any kind of Indian department and relinquishing federal control over such matters to the provincial legislative system. As Goel (2000) states: “ These policies were designed to impair and dismantle the traditional Indian way of life, indeed, to eradicate the Indian as Indian through assimilation and absorption into the body politic” (p. 304). Such policies limited the ability of Aboriginal peoples to succeed in colonial and post-colonial societies. Under the Indian Act, Aboriginal peoples had little control over their own lives. Not only is feeling a lack of control over one’s life a predictor for violent behaviour (Jeffrey, 1996), but it contributes to behaviours such as substance abuse (Goel, 2000) which is also a

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<sup>38</sup> If people were out of the community where enumeration was taking place, they were not given status as “Indians”.

<sup>39</sup> Some of these rights included living on allotted land (i.e., reserves) and not be subjected to taxes by the Crown, the right to special education (i.e., residential schools), the right to free medical care (then known as the right to a medical box), and the right to hunt on Crown lands.

marker for intimate partner violence (Brownridge, 2003). Such policies also played a role in reducing the self-esteem of many of the Aboriginal peoples being impacted by these changes (Goel, 2000)—most were denied the right to use the cultural tools they were accustomed to and were offered no new tools with which to replace them. As Goel states (2000), “Aboriginal people were doomed to a failure that bred depression and self loathing” (p. 305). Moreover, Aboriginal men fell so far on the social hierarchy of power, due to the European policies that had been implemented, that they felt frustrated and inadequate—also markers of violence (Goel, 2000; Jeffrey, 1996). Feeling unable to have power over themselves or their European counterparts, men began exerting control over the populations weaker and more vulnerable than they: women and children (Ontario Native Women’s Association, 1989). Lastly, such policies denied women of power within their own communities, abolishing the very systems that they controlled and the practices which allowed them expression. While some men were given the opportunity to participate in parts of their new world, women were deprived of such opportunities—they lost their political and social status, and were essentially “silenced by colonialism” (Goel, 2000).

### **Disrupting the Flow of Aboriginal Traditions**

Not only did many of the policies mentioned above have the goal of assimilating Aboriginal peoples, they also disrupted the flow of values and teachings. For example, policies that criminalized spiritual and cultural practices meant that many children would grow up not knowing about and how to practice many of their traditional ceremonies. Moreover, residential schools forced children to be physically separated from their parents and grandparents (Goel, 2000). As part of many of the treaties that were agreed

upon, the Crown was to provide education to individuals living on reserves—and so they did. However, these schools were located several miles away from the reserves, children were rarely allowed to visit home, visitation rights to parents were also denied, and children were often taken forcibly away from their homes (Goel, 2000). Children were separated by age and gender, resulting in limited contact with siblings and a complete disintegration of the family. This meant that many of the children had little to no conception of family dynamic, and the only adult role models they had were European teachers who were often accused of emotional and physical abuse (Goel, 2000). Moreover, most teachers were nuns and priests, and therefore intimate relationship dynamics were also completely absent during children's time in these schools. One Ojibwe woman recalls:

As I recalled us kids being taken away, I thought of my baby brother who was still in diapers at the time. We never had a family life after that and eventually we got separated from each other. As adults we found each other, but we were never able to be close again, there were too many memories that kept us apart. We could never talk about it...I'll never get my family back and that's something I've come to accept, but I will never forget. (in Goel, 2000, p. 307).

Children were further severed from their cultures by being given a Christian name, by prohibiting communication in their native languages, and getting their hair cut off (Goel, 2000). The overall goal of such initiatives were, again, to *kill the Indian in the child* (Goel, 2000), and essentially for the children to recognize that the world was a European place with European values and beliefs—they were taught that the wisdom from their own cultural beliefs was savage (Royal Commission on Aboriginal Peoples, 1996). Like many of the assimilation policies, such routines ingrained feelings of low self-worth. Due to the structure of residential schools, respect for women and family was lost. Moreover, men were taught to suppress their feelings, as opposed to learning how to manage and

control their frustration and anger<sup>40</sup> (Goel, 2000). The living conditions were brutal and unclean, and many children died<sup>41</sup> due to abhorrent standards of care (Royal Commission on Aboriginal Peoples, 1996). The Nuu-chah-nulth Health Board reinforces these findings by stating:

[Children] were placed in institutions which were at best a poor substitute for a home, and at worst brutal places where the children were subject to physical and, all too often, sexual abuse. It is no surprise that many of these children for several generations grew up without the skills necessary to look after their own children. (in Goel, 2000, p. 308).

Goel (2000) concludes by stating that “without family models, residential school children acquired an austere and brutal view of social relations, one that condoned all violence” (pp. 308-309).

Unfortunately, this pattern of systematically removing children from their homes unwillingly continues. According to the National Council of Welfare (in Wotherspoon & Satzewich, 2000), in 1981, Aboriginal children made up 60% of children in provincial and federal child welfare agencies. Moreover, 55% of all treaty Indian children and 40% of all Métis children in Manitoba that were placed for adoption by child welfare systems were adopted out of province (in comparison with seven percent of Caucasian children)<sup>42</sup>. It therefore comes as no surprise that Canada’s child welfare systems have had much documented damage on Aboriginal peoples (Kline, 1993). As was already mentioned, European traditions were significantly different from those of Aboriginal peoples, and

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<sup>40</sup> This differs from traditional means of dealing with conflict and the use of the healing circle (where individuals in the community came together and discussed conflict in order to come to some resolution; Goel, 2000)

<sup>41</sup> Almost 25% of children attending residential schools died while they were there due to tuberculosis (Royal Commission on Aboriginal Peoples, 1996)

<sup>42</sup> It is important to note that many bands have gained responsibility for their own child welfare systems (Wotherspoon & Satzewich, 2000). However, many children are still being uprooted from their homes and communities.

moreover, many children were taken away from their homes at young ages, disconnecting them to any kind of cultural identity. Since then, many have been trying to mend their broken identities, yet the Canadian government continues to punish Aboriginal peoples for their standards not being “good enough” for children<sup>43</sup>. According to Kline (1993), “good” mothers are supposed to *always* be available for their children, should be able to provide her children with *everything* they need, and should be responsible for *all respects* of their cleanliness and the cleanliness of the home<sup>44</sup>. Unfortunately, due to constraints of poverty and inaccessible resources, mothers cannot always accomplish these things to the extent that they would like. Kline (1993) asserts that children are often taken away from the home because of the Canadian courts’ construction of Aboriginal women as “bad mothers”. These judgements are made not because of the mothering techniques in themselves, but because of historical ideologies of what “good mothers” should be (Kline, 1993). Aboriginal women are often blamed for the difficulties they face, but underlying root causes are rarely addressed<sup>45</sup>. Moreover, the dominant cultural ideology creates the Court’s conception of good-parenting—Aboriginal values and practices are therefore devalued in this context (Kline, 1993). Today, Aboriginal children represent approximately 40% of children in the welfare system, and studies suggest that there are three times more Aboriginal children in the welfare system than there were in residential schools at its peak in the 1940s (Blackstock & Trocmé, 2004). Some assert that the child

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<sup>43</sup> While I do understand the importance of children being raised in environments that are suitable for stable attachment patterns to be fostered, having children moved from home to home is not an acceptable solution to the problem. Moreover, many children are removed from their homes without justifiable reasoning.

<sup>44</sup> The existence of such unrealistic notions should be acknowledged as such and therefore be abolished; however, unfortunately, such beliefs still continue to exist.

<sup>45</sup> Problems with alcohol and drug abuse are prevalent, but these are largely associated with poverty and stress—one cannot look at these problems independently.

welfare system's application to Aboriginal families is an agent of colonization (Gupta, 1995). Whether one agrees with such a statement, it is not hard to recognize that children are still being removed from their families (often without appropriate justification; Kline, 1993; Gupta, 1995) and thus a loss of flow of traditions continues even today.

### **Diminishing the Status of Women and Entrenching Male Dominance in Aboriginal Communities**

Lastly, policies that diminished the status of women and strengthened the idea of male dominance were implemented. Such policies lead to power imbalances, and women were perceived as the "weaker sex". For example, from traditional forms of community governance, more European forms of government came forth, in the form of Band councils (Goel, 2000). Like most Indian Affairs representatives, all the council members of the Band that spoke on behalf of Aboriginal people were male (Goel, 2000). Not only did women lose their authority within the community, their needs and desires had to be communicated by men in the community, men that did not necessarily understand the needs of women. One woman writes:

Male dominated Band Councils frequently sided with the Canadian government against disenfranchised women in the belief that to do otherwise would undermine the Crown's trust responsibility for Aboriginal peoples. As a consequence, women were forced to go outside the community to resolve the injustices of gender discrimination...These are profound conflicts for cultures which are, in most cases, matrilineal in structure. (Goel, 2000, p. 309).

This new form of government denied women opportunities for government in which they had once played a large role, and they were expelled from the public sphere and forced to the private sphere<sup>46</sup>.

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<sup>46</sup> At this point it is wise to note that forms of discrimination against women were not unique to Aboriginal women; European women were largely living under the same circumstances. European women did not usually participate in forms of government, were not given the right to vote, and abuse by their husbands was condoned for a very long time (McGillivray & Comaskey, 1999; Goel, 2000). These types of policies had such a negative impact on Aboriginal women

In a similar manner, the power of women was also dislocated in the religious realm. Many Aboriginal spiritual narratives, folktales and myths demonstrate the importance of female force to people's health and well-being (Goel, 2000). However, in Euro-Christian beliefs, women played much less of a role, and God was generally conceived of as exclusively male. In the teaching and preaching of Christian beliefs within Aboriginal communities, the powerful role of women was lost to a Eurocentric understanding of the divine as male. Moreover, in opposition to many Aboriginal beliefs, and according to Christian beliefs, the story of Mother Earth<sup>47</sup> could not be true as it was God (in his male form) that created the Earth and gave it to humanity (read: men) to control and rule. As in the public sphere, women's roles in the religious sphere were relegated to the private, and once again women were silenced.

Lastly, through the Indian Act, women were forced to take on their spouses' status, status Indian or not, upon marriage (Wotherspoon & Satzewich, 2000). For example, if an Aboriginal woman married a non-Aboriginal man, the Act basically regulated:

The woman, on marriage, must leave her parent's home and the reserve. She may not own property on the reserve and must dispose of any property she does hold. She may be prevented from inheriting property left to her by her parents. She cannot take any further part in band business. Her children are not recognized as Indian and are therefore denied access to cultural and social amenities of the Indian community. And, most punitive of all, she may be prevented from returning to live with her family on the reserve, even if she is in dire need, very ill, a widow, divorced or separated. Finally, her body may not be buried on the reserve with those of her forebears. (Jamieson, 1978, cited in Wotherspoon & Satzewich, 2000, p. 30).

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because these conditions and circumstances were very different from the way they once lived. Therefore, what felt like a common way of life for many European women was oppression and forced loss of identity to many Aboriginal women.

<sup>47</sup> This is not to say that all Aboriginal peoples' beliefs about the creation of Earth or their spiritual narratives/folklore are the same, but many stories do describe the Earth's creation by a female form.

Therefore, many women relinquished their status as Indians as well as parts of their identities through the process of marriage<sup>48</sup>. Women were rendered even more dependent upon their male counterparts, and if women sought divorce from their non-Aboriginal partners and tried to return to the reserve, they were denied access to the reserve (as were her children) and were forced to live in isolation, away from their families. Resorting to live in isolation furthered the loss in heritage and community that may have been obtained living on the reserve. Section 12(1)(b) of the Indian Act was finally repealed in 1985 (with the passage of Bill C-31), and many men, women and children regained their status (Jackson, 1994), however the impact of being rejected from one's community for so many years would not be forgotten. Moreover, some assert that the very fact that the Indian Act still exists today is a form of colonialism (Wotherspoon & Satzewich, 2000; Canadian Association of Elizabeth Fry Societies, n.d.). Aboriginal people's relationship to the state is seen as exceptional because they are under total domination and subordination by the state (Wotherspoon & Satzewich, 2000). Moreover, as stated by Wotherspoon and Satzewich (2000):

[the] Indian Act and the apparatus established to administer the act, the Department of Indian Affairs and Northern Development, have been described as a total institution...a set of practices and arrangements that control all aspects of Indian people's lives. Their lives are not unlike individuals who have been imprisoned or who have been confined to psychiatric institutions. (p. 35).

Although many claim that the process of colonization is over, the Indian Act still exists, and the control and subordination of Aboriginal peoples is still in place due to the Act.

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<sup>48</sup> This policy was enacted to protect Aboriginal tribes from men who were trying to take advantage of status-Indian benefits by marrying status women.



Until Aboriginal peoples are free from control of the state, some form of colonialism will still be in place<sup>49</sup>.

### **Impacts of Colonialism**

Clearly it was not and is not only Aboriginal women whose identities and ways of life were and are rejected—it was and still is all Aboriginal peoples: men, women and children. Although some of the problems caused by colonial policies have been rectified, the impacts of these policies on people's lives live on. Furthermore, racial stereotypes and societal rejection is often internalized by the colonized group (LaRocque, 1994).

LaRocque (1994) states that:

as a result of disintegrative processes inherent in colonization, Aboriginal peoples have subconsciously judged themselves against the standards of white society, often adopting what [is] called the White Ideal. Part of this process entails 'internalizing' or believing—swallowing the standards, judgements, expectations and portrayals of the dominant white world...The result was/is often shame and rejection not only of the self but also of the similar other, i.e., other Aboriginal people. (p. 74)

This is why understanding Aboriginal women's experiences is important to investigate not only through a gendered perspective, but one that takes into consideration all the different forms of oppression they have faced and still do face today. Aboriginal women were excluded from their societies, and continue to be (Stout & Kipling, 1998). They are excluded from their home communities (largely due to the effects of the Indian Act), from decision-making (due to the organization of Bands, established by the Canadian government), and from having a say in their future and their children's future (due to the lack of attention given to them and their lack of resources). However, as Stout and Kipling (1998) state:

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<sup>49</sup> I am not suggesting that the Canadian government should completely pull out from the support given to Aboriginal peoples. Instead, I suggest that a different approach be taken—an approach that does not isolate, subordinate, and aim to render powerless a very able population.

While the roots of this contradictory position can be traced to the structural determination of colonialism and patriarchy, the legacy of this marginalization continues to thrive to this day, in the form of poverty, ill-health, sexual and physical abuse, and the silencing of Aboriginal women's voices in debates over self-government, land claims and the *Canadian Charter of Rights and Freedoms*. (italicized in text; p. 1).

## **Conclusion**

Many would argue that the problems that exist within Aboriginal communities today are because of the legacy of colonialism. While we cannot erase and re-write history, we can try to understand the problems of today and work to break those barriers. At the same time, we must recognize that individuals are not passive recipients of their fate—they can effect change in their own lives and are doing so everyday. Instead, we should acknowledge colonialism's role in the development of unfortunate circumstances, and take the next step forward. Moreover, it is not solely the impacts of colonialism that are the problem; characteristics that are common within many Canadian populations (such as poverty, low levels of education, substance abuse, etc.)<sup>50</sup> are also involved in the high levels of violence within these communities. Everything must be considered in the discussion of the eradication of violence. Lastly, it is important to recognize that the denigration of Aboriginal women is not over—women are still excluded from parts of Aboriginal society, they and their families are discriminated against by the Canadian government, and they experience prejudice by much of the Canadian population. Until systemic oppression and racism are rectified in all of these sectors, the problem of intimate partner violence will continue to affect the lives of the majority of Aboriginal women.

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<sup>50</sup> These too can be tied back to the effects of colonialism.

## **Chapter Four: Experiences of Intimate Partner Violence—the Interpersonal Experience**

As was explained through the social ecological framework, looking at every aspect of a woman's life helps us understand how she experiences it holistically. In the last chapter, the colonial history that affects many Aboriginal women<sup>51</sup> was explored to help understand part of what makes their experiences unique. In this chapter, we will explore how their interpersonal relationships further this uniqueness. Specifically, violence in childhood, violence in intimate relationships and its characteristics, and family reactions and support will be explored within this chapter. All of these contribute to how women think about and experience the violence, and ultimately this affects how women think about themselves and their relationships.

### **Aboriginal Women's Oppression**

It is clear that individuals' pasts can influence their lives right now. Through the history of oppression, abuse, and the denigration of religious and cultural values, it comes as no surprise that many Aboriginal individuals today feel a loss of identity, and live stressful lives entrenched with poverty and a lack of available help and resources (LaRocque, 1994; Stout & Kipling, 1998). However, it is important to keep in mind that the experience of Aboriginal women is unique in itself because of the multiple layers of oppression they feel. Paula Gunn Allen (award-winning American Indian scholar and poet; Churchill, n.d.) demonstrates these multiple levels by stating:

Currently our struggles are on two fronts: physical survival and cultural survival. For women this means fighting alcoholism and drug abuse (our own and that of our husbands, lovers, parents, children); poverty; affluence—a destroyer of people who are not traditionally socialized to deal with large sums of money; rape, incest, battering by Indian men; assaults on fertility and other health matters by

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<sup>51</sup> Readers are reminded that this is not meant to homogenize all Aboriginal women, but more so to draw a picture of what many Aboriginal women experienced.

the Indian Health Service and the Public Health Service; high infant mortality due to substandard medical care, nutrition and health information; poor educational opportunities or education that takes away from our traditions, language and communities; suicide, homicide or similar expressions of self-hatred; lack of economic opportunities; substandard housing; sometimes violent and always virulent racist attitudes and behaviors directed against us by an entertainment and educational system that wants only one thing from Indians: our silence, our invisibility and our collective death (2001, pp. 41-42).<sup>52</sup>

These feelings and these experiences are present everyday in women's lives. The oppression felt, the racism experienced, all of it is present all of the time<sup>53</sup>. It must therefore be considered as part of Aboriginal women's experiences.

### **History of Violence**

As has already been discussed, men's violence against women was acceptable by European standards, and violence against children was practiced in many residential schools. Therefore, many peoples' lives have been filled with violence for many years now—this is not a new phenomenon and the repercussions of such violent behaviours are still present today.

For example, studies show that children exposed to high levels of violence are even more likely to act violently towards others in adulthood (Brownridge, 2003). Children lack the physical strength, as well as the social status, to retaliate or resist against violence witnessed or experienced<sup>54</sup>. Moreover, law and social authority drastically limit their autonomy. Such inability to control their own lives leads to

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<sup>52</sup> Although this excerpt is taken from an American Indian woman living in the United States, many of the conditions and the oppression faced are similar. Moreover, although this statement seems to send a bold message, it is nonetheless genuine feelings of a woman who experiences all of this in her everyday life, and therefore this cannot be taken lightly.

<sup>53</sup> This is not to say that all Aboriginal women feel the same oppression, but that oppression is often present, whether it be experienced in the same manner.

<sup>54</sup> Although even witnessing violence is a form of child abuse, I would like to make the distinction between "witnessed" and "experienced" to make the point that some children were not physically, psychologically or sexually abused but were living in households or environments in which this was still a regular occurrence.

humiliation and internalization, and such feelings contribute to one's likelihood to behave violently against others (McGillivray & Comaskey, 1999). It is therefore very possible that living in a household and growing up with violence being part of one's life plays a role in the violence continuing to the next generation (Correctional Services Canada, 2007). The existence of abuse and violence in one's childhood also often leads to its normalization. For example, some Aboriginal women from Manitoba reflecting upon their childhood stated: "...each and every one of us grew up in a violent home. I guess they thought it was normal." (in McGillivray & Comaskey, 1999, p. 9); "There was never any comfortable feeling and I guess a lot of it was my upbringing, and it was just a way of life for me. At least now, when I look back and think about it now it was just a way of life, the feelings, being uncomfortable and stuff...When you grow up with stuff like that, you think it's normal." (in McGillivray & Comaskey, 1999, p. 9); "The first time I was sexually abused, I was only twelve and he was thirty. The whole reserve said I deserved it. They shunned me. They talked about me and made me feel like dirt. They made me feel worthless." (in McGillivray & Comaskey, 1999, p. 9); "It was very lonely...A lot of neglect and sexual abuse and physical, no stability, very dysfunctional family." (in McGillivray & Comaskey, 1999, p. 60). Violence was clearly prevalent from childhood for many women, and lead to feelings of worthlessness. Violence became normalized—abuse became normalized. Even when recognizing the undesirable behaviour in one's parents, it was still difficult to break the cycle of perpetual violence. One Aboriginal man<sup>55</sup> from Ontario recalls:

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<sup>55</sup> Although this study is to highlight the experiences of Aboriginal women, it is important to include how men felt about the violence and how the presence of violence in one's childhood (even with the recognition of its undesirability) was not enough to prevent them from behaving violently in their adulthood.

I was never going to be the guy who drank, who hit people and hurt them. I saw too much of that when my dad got drunk and hurt my mom. But I ended up a drunk, a drug addict, and in jail...I went from one woman to another. If I passed out, someone took my woman. We all did that. I could never stay in a relationship for long. We acted like couples, but it was really mutual use. There was no communication. No real love, no caring, and then I would explode and hurt her (in Lane, Bopp & Bopp, 2003, p. 2).

While another man states:

I promised my wife I would never hurt her like my dad hurt my mom. He would slap her till she begged him to stop. I swore (when I was about ten) that I would kill him if he didn't stop hurting her...I broke my promise. In the very first month of marriage I blackened my wife's eye. She left me for a week, but she came back. Every once in a while I would slap her around. But that was only part of it. I abused her in so many ways—psychological and emotional abuse. As a man, I had a right, I told myself. I had to feel like I was in control. If I felt I was losing control, I abused her... (in Lane et al., 2003, p. 3)

Again, recognizing the undesirable behaviour was not enough to stop this man from continuing the cycle of violence. Furthermore, studies have shown that observing marital abuse as a child is a reliable marker among men for violence against their partners (Correctional Services Canada, 2007). However, unfortunately, sheltering children from the violence was often very difficult<sup>56</sup>. For example, one woman from Manitoba recalls: “I yelled for someone until my little girl woke up. I think she was about six. And I had to get her to help me get dressed so I could go to the hospital. So she did...I knew all the time, she shouldn't be seeing this...During those times of violence with my ex I often wished I were dead...But my children needed me” (in McGillivray & Comaskey, 1999, p. 71). While another stated: “He'd always belittle me in front of the kids and always talk about me like I wasn't there. I just wanted it to end. Three months from then I took an overdose” (in McGillivray & Comaskey, 1999, p. 72).

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<sup>56</sup> Although beyond the scope of this project, it is important to recognize that witnessing intimate partner violence can have severe psychological effects on the children.

As we have already seen, when children experienced abuse, the severity of the situation remained unacknowledged and felt as though it was normal and nothing could be done. When experiencing intimate partner violence, many of these feelings remained. For example several Aboriginal women from Manitoba expressed their feelings of powerlessness when they stated: “I let him hit me so he doesn’t kill one of the kids.” (in McGillivray & Comaskey, 1999, p. 76); “...The next day Child and Family Services phoned me and said to bring [the child] to the office...I just started to cry. That time I wanted to die...I was crying all day, and I just knew I was going to jump in the river when they came to pick him up—because I know I can’t swim—just going to jump off that bridge.” (in McGillivray & Comaskey, 1999, p. 76). Another woman stated:

I tried to get away. First I went to his mom’s house. She said I was a bad wife and I deserved to get beat. She told [him] I tried to talk to her, and he beat me hard. He would never let me have any money. I had to account for every penny. He took out the phone so I couldn’t talk to anybody. I tried to go to the Chief. He told me to go home. Then [the Chief] told [him] he’d better keep an eye on his woman...It’s sixty-two miles to town. I’ve got no money. There’s nobody I can trust. I don’t drive. The social worker is [his] cousin, and all my relatives tell me to keep quiet ‘cause it’s “family business”. I would just walk to town but I don’t want to leave my kids with him (in Lane et al., 2003, p.2).

Clearly, many feelings of helplessness, isolation and lack of support were features of these women’s experiences. In addition, even once action was taken to separate one’s self from an abusive partner, there was always the risk of having one’s children taken away by Child and Family Services (which, as already explained, happens fairly frequently within Aboriginal households).

## Experiences of Intimate Partner Violence

As stated in the introduction, the violence experienced by Aboriginal women is often more severe than the violence experienced by most non-Aboriginal Canadian women<sup>57</sup> (see Figure 3). Some personal accounts of violence include:

One time he dragged me by my hair from behind the skidoo. Another time we were out on the lake in a boat. He threw me into the water, parka, boots and all. The water was so cold, it took my breath away. Then he shouted at me that he was going to kill me, and he pushed my head under the water and held it there. I tried to get away but I couldn't. I blacked out. He must have pulled me out because I woke up and we were almost back to town (in Lane et al., 2003, p. 2).  
What has he done to hurt me? Hit me with the axe handle, cut me with his razor, held me down and burned me with cigarettes all over my stomach and breasts, cut my hair off so I would be too ashamed to leave to house, forced me to give him blow jobs in front of his friends, threatened to give away my kids to Social Services, pulled my hair, beat me with his belt on my bare ass...and I was always scared he would do something. All he had to do was look at me and I felt sick. One time he made me sleep outside with the dogs. It was winter (in McGillivray & Comaskey, 1999, p. 70).

According to physicians who deal with woman abuse<sup>58</sup> (Health Canada, 1999), women who are being abused often display trauma to the head, face, neck, breasts and abdomen. Moreover, these injuries are likely to be most concentrated and severe in areas that are usually covered by clothing. There may also be outlines of objects (for example belt buckles) or burns (from appliances, stoves, cigarettes, acid or extremely hot liquids). Injuries may be at different levels of healing because abuse is usually over a long period

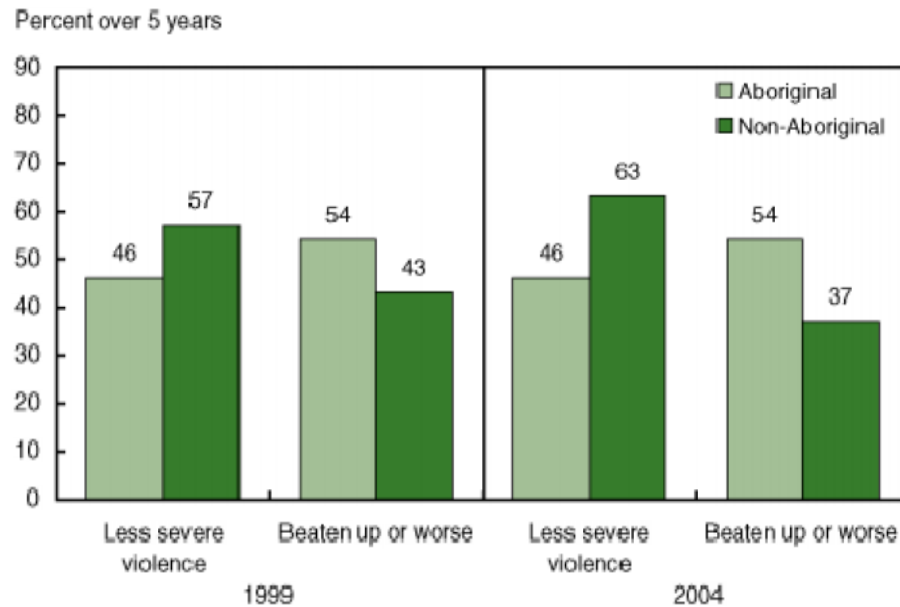
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<sup>57</sup> While exact reasons for higher levels of severity are still being explored in the literature, as is discussed in this thesis, violence against Aboriginal women is often condoned (or at least silenced) by community members and authorities, and police reactions are seldom in favour of Aboriginal women—thus it is likely that men do not fear the potential consequences of the charges that they may (but are unlikely to) face.

<sup>58</sup> These are not specific to Aboriginal women, however, although often more severe, most women do present with the same types of injuries. How they were injured often varies but the indicators of and injuries from violence often do not.



**Figure 3: Seriousness of spousal assaults on women, by Aboriginal status, 1999 and 2004**



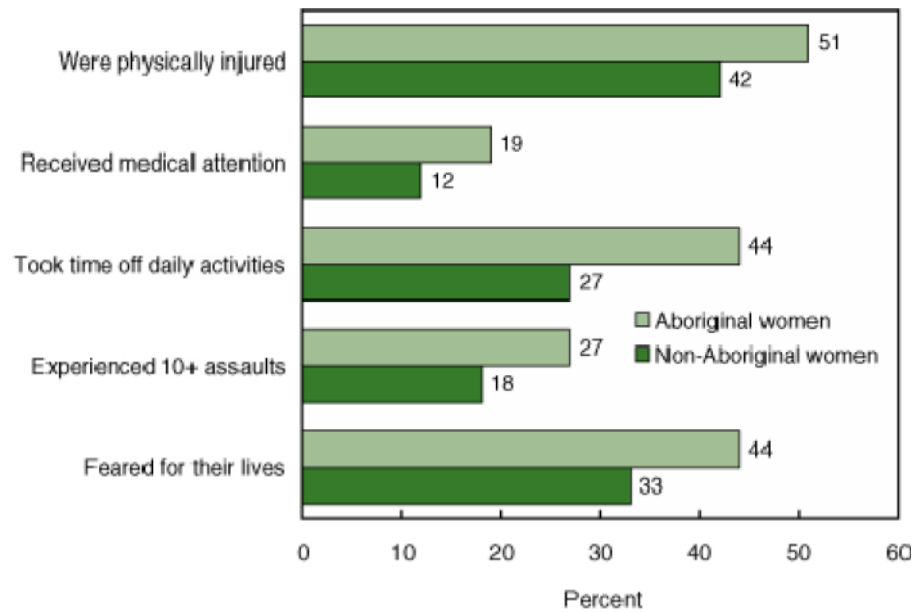
(from Statistics Canada, 2006b)

of time. Gunshot wounds are also indicators of woman abuse. Moreover, the stress caused by the abuse may lead to recurring ailments such as: headaches, insomnia, choking sensations, hyperventilation, and gastrointestinal, back, chest and pelvic pain (Health Canada, 1999). According to Statistics Canada (2006b), Aboriginal women's daily lives are more likely to be affected due to the consequences of abuse (see Figure 4).

### **Cases of Intimate Terrorism?**

Abuse does not always involve physical abuse. Sometimes it may include physical, sexual or emotional abuse, or a combination of the different types. Many women report control and isolation as parts of their experience. For example some Aboriginal women from Manitoba stated: "He won't even let me go out and see my friends...Sometimes I have made an excuse to

**Figure 4: Consequences of spousal violence for women, by Aboriginal status, 2004**



(from Statistics Canada, 2006b)

go get my friends to visit...and he would say ‘If I don’t see you in half an hour to an hour, I’ll get mad’.” “He was abusive. He practically controlled my life. Sometimes I felt like I was a prisoner in my own home. He chased everybody away that I got to know. He didn’t want anybody to come see me, or for me to make friends. He didn’t even want my family around.” “Mental abuse. He would hold me with his arm around me and pretend like he had a gun, pretending that it went off on my head. I couldn’t get away from him no matter what.” (in McGillivray & Comaskey, 1999, p. 70). From these accounts, it is not hard to see that much of the abuse that was occurring was controlling (i.e., not common couple violence). Violence was most often not instigated by an argument and was not situational. Women were isolated from friends and family, they were threatened by abuse, they were threatened by the possibility of their children being taken away (something that happens quite frequently within Aboriginal communities), and financial

control was present as well (McGillivray & Comaskey, 1999). Therefore, one could say, with much confidence, that most accounts of intimate partner abuse were instances of intimate terrorism<sup>59</sup>.

Furthermore, as Johnson (2008) stated, intimate terrorism is the cause for violent resistance. It is therefore no surprise that instances of violent resistance were reported as well. For example one woman from Manitoba reported:

I never left the relationship, actually. It ended in a tragic way. I killed my husband in self-defence...We got into an argument. It got out of hand. Pretty soon we were fighting and fighting...I tried to get away from that argument, but he followed me into the living room, his step-brother behind him encouraging him to beat the shit out of me. And then I went into the kitchen, opened the drawer, got a knife. And he was standing about seven feet away from me, his step-brother still behind him, still encouraging him to come after me. And he did. He grabbed both my hands, the wrists. And we were fighting. I don't remember stabbing him four times. I don't even know where. The last thing I remember was stabbing him on his abdomen. I didn't pull the knife out. He pulled away. He ran downstairs where the bedrooms were, and that's where he died. (in McGillivray & Comaskey, 1999, p. 77)

Although courts are beginning to recognize instances of self-defence and violent resistance as reasons for homicide and assault, this woman's case led to a charge of manslaughter (McGillivray & Comaskey, 1999).

### **Psychological Impacts of Intimate Partner Violence**

We have now explored experiences of physical and sexual violence that Aboriginal women have faced. However, some may argue that the psychological impacts of abuse are often the worst, and according to Statistics Canada (2006b), rates of

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<sup>59</sup> It is important to keep in mind, however, that many of these accounts are from women who have made use of shelters and support services. It is most often individuals who are experiencing intimate terrorism that seek help, and therefore, in this sense, these accounts are skewed.

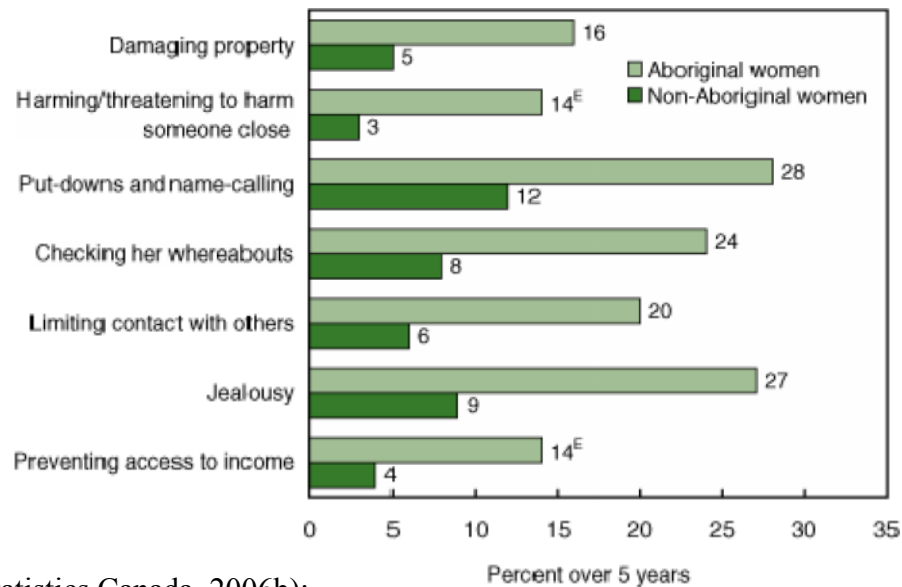
psychological abuse are higher for Aboriginal women (see Figure 5). For example, Louise Mallioux, in her discussion of violence in Inuit communities, states:

Few people who have not experienced violence can understand the pain of being slapped, punched, kicked, burned, shoved, bitten, physically or sexually assaulted, forced to surrender a pay, pension or welfare cheque, threatened with a razor, a knife, a rifle and having no one to turn to because of the shame, the degradation, the hopelessness and the isolation. People who have not experienced violence cannot really fathom the emotional pain of being routinely insulted, screamed at or called a bitch, slut, useless piece of meat and worse. Yet, this is the reality for many women...The cost of violence is felt primarily by the recipient of that violence, the person at the big end of the stick, the person lying on the floor pleading or flying against the wall. It is not possible to put a price on that pain, the mental exhaustion, the crushed spirit, the loss of self-esteem, the dreams that can't be dreamed anymore, or the nightmares you can't wake up from (in Lane et al., 2003, p. 36).

Many of us have been injured in our lives and can likely relate the physical pain we have felt to something described by some of these women. However, it is much less likely for us to have been constantly insulted by someone who loves and cares for us, made to feel like we are both the best and worst people in this world. One Aboriginal woman from Manitoba tried to communicate these feelings of psychological abuse when she stated: "One night...he kept me up all night, which was a regular night [of violence] for us for many, many years. I had lost a lot of weight and I was burnt right out. He says, "You're not even worth touching. You're not even worth raping." He went upstairs and I went up quietly." (in McGillivray & Comaskey, 1999, p. 68). Another woman stated:

It was years he was hitting me but...it was the name calling that lasted the longest. And for me the hardest part was the name calling. He would call me down in my own language [Ojibwa]. He would just sit me down on the bed and call me down for hours without stopping. He would only stop to take a shot of beer or something. He could go for three or four hours. He called me every angry name you can think of... (in McGillivray & Comaskey, 1999, p. 68).

**Figure 5: Rates of psychological abuse by spousal partners, by type of abuse and Aboriginal status, 2004**



(from Statistics Canada, 2006b):

<sup>E</sup> use with caution (coefficient of variation is high, 16.6% to 33.3%)

Women who are being psychologically abused may show symptoms of “battered woman syndrome” (Health Canada, 1999). Such symptoms can include fear, depression, guilt, low self- esteem, and symptoms related to post-traumatic stress disorder. Rates of clinical depression, anxiety disorders, substance abuse, mental illness, alcohol and drug abuse, suicide, as well as back, chest, pelvic and gastrointestinal pain, headache, insomnia, choking sensations, hyperventilation, and non-compliance with medication are higher amongst women who are being abused<sup>60</sup> (Health Canada, 1999). With the constant emotional abuse that takes place in some women’s lives, it is not hard to believe that some of them would begin to internalize and blame themselves for the abuse that occurs. According to Lane et al. (2003), if the abuse progressed to involve excessive control and eventually breaks the will of the victim, the trauma experienced is likely to be more

<sup>60</sup> Again, note that these symptoms are not specific to Aboriginal women although Aboriginal women do experience these symptoms as well.

severe. Some Aboriginal women from Manitoba reported internalizing what their partners were saying about them and self-blaming for the abuse. One woman stated: “I believe them [the excuses], and then he started blaming me, and then I started blaming myself.” (in McGillivray & Comaskey, 1999, p. 68). While another reported:

I blame myself, like maybe, I’m such a bitch, like that’s why I get beaten up. Or, it’s my fault, if I hadn’t said this, it wouldn’t have happened. Like, I blame myself a lot...I feel like, one time I feel like committing suicide, in my last one, relationship, when he would hit me...When the first guy abused me a long time, when I was in my late teens, I felt like he loved me, that’s why he did it, because, like, that’s all I knew. My dad hit me, and he hits me because he loves me, that’s what I thought (in McGillivray & Comaskey, 1999, p. 69).

Such self-blaming and self-hate can lead to problems in parenting (Bowlby, 1988), and can increase the likelihood of alcohol and substance abuse (Gale, 1991), which are both known to increase one’s chances of being violence (Brownridge, 2003). Women reported their partners’ alcohol and substance abuse, and its role in their violent behaviour: “The only time he used to abuse me was when he came home drunk. That was every Friday.”; “The only time he never used to abuse me was when he was not drinking.”; “He was verbally abusive, he sexually assaulted me, physically as well. Every time he drank, I feel I was his punching bag.” (in McGillivray & Comaskey, 1999, p. 66). However, alcohol and drug abuse were not always involved when abuse occurred (McGillivray & Comaskey, 1999). Unfortunately, as mentioned previously, abusers are not the sole consumers of alcohol and drugs, women turn to them too. Some report that it numbs the pain while others report that they use these substances to forget the abuse. One Aboriginal woman from Manitoba stated “I used to drink so I wouldn’t feel it when he started hitting me.” (in McGillivray & Comaskey, 1999, p. 66).

## **Intimate Partner Violence and Family Dynamics**

The feelings of isolation and powerlessness may further increase the likelihood for maladaptive coping strategies (e.g., drugs, alcohol, violence) if she feels she has no social support. Isolation often includes breaking connections with friends and family—the people we would most likely turn to in times of need and distress. However, there are some family characteristics that are associated with the likelihood of family<sup>61</sup> members supporting the woman being abused. It is important to note, first of all that, due to the closeness of many Aboriginal families, most family members are likely to find out about the abuse. The response of the family is likely going to be affected by the history of abuse, and past reactions to abuse; if, in the past, families have turned a blind-eye to violence, this is likely to occur again (Lane et al., 2003). Alcohol and substance abuse patterns within the family also play a role in not supporting the woman experiencing violence. Such patterns of maladjustment within family networks may also lead to family members trying to stop the woman from disclosing the abuse (Lane et al., 2003). Such reactions are likely to lead to the spread of violence within the community (through children witnessing violence and then behaving violently, through other family members believing such behaviours and beliefs are acceptable, etc.). Unfortunately, alcohol and substance abuse, as well as incidences of mental illness, are high amongst Aboriginal populations (Brownridge, 2003); this likely means that it is much more common to come across maladjusted families who do not support the victim of abuse, which is why family reaction is one of the reasons rates of reporting violence are so low (LaRocque, 1994).

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<sup>61</sup> It is important to note that the term “family” does not necessarily mean immediate family. Many Aboriginal communities have tightly knit groups within them, and *family* extends to many members of that group. Because of the closeness of this group, often many people’s needs and desires are taken into account (Lane et al., 2003).

On the other hand, if the family is united, relatively free of violence and substance abuse, and mutually supportive, it is much more likely that members will intervene to stop the abuse (Lane et al., 2003). Keeping the family together is essential for many Aboriginal women and fear of causing conflict within the family seems to be a deterrent for disclosure. It seems as though many put the well-being of their families ahead of their own health and safety. Some women also fear their family's reaction, especially if members feel as though disclosure may jeopardize family unity. Some women stated: "Someone from the family might get mad and get involved. The family is against you. You feel like the argument is with the entire family rather than the person you're dating." (in Government of Canada, 2008, p. 15). "We don't report it because we have to keep the family together—it's an important value for Aboriginals." (in Government of Canada, 2008, p. 16).

First responders (i.e., individuals who are at the frontline of crisis situations, working with victims of intimate partner violence as intake workers, crisis counsellors, etc.) have also addressed some problems with disclosure to family members. One first responder stated: "Parents often get involved, siblings...Some people are believed, some aren't, and some are seen as troublemakers, there's a stigma for being a rat." (in Government of Canada, 2008, p. 21). Another commented:

The violence doesn't stop with the abuser, it continues with the extended family members...The families on both sides of the victim often become abusive, partly because the abuser's family are going to protect and be supportive of their family member. Many times the victim's family wants to re-victimize for fear of reprisal from the abuser's family, or for fear of financial responsibility. (in Government of Canada, 2008, p. 21).



Disclosure can be a very difficult decision, and if family members deny the abuse is occurring or blame the woman for the abuse, this can further her internalization and self-blaming for the abuse. Historically, the Church advocated the sanctity of marriage, and this sanctity was to be maintained even if the woman and her children were being battered and/or sexually abused (LaRocque, 1994). Moreover, divorce, separation, polygamy and common-law marriages were all outlawed through the Indian Act, and therefore made to be highly stigmatized within Aboriginal communities (McGrath & Stevenson, 1996). These beliefs have prevailed (LaRocque, 1994) and as such, families may not always be the “safest” places for women to seek refuge or support (LaRocque, 1994). Such family reactions can be very difficult for the woman, considering the community is likely to have similar reactions to abuse (as will be explored in the next chapter). One’s family’s reactions, as well as one’s community’s reactions, can replicate feelings of isolation and low self-worth that women experience from the abuser. As families are often tightly knit, they are likely to favour unity over conflict<sup>62</sup>, and therefore not support the victim of abuse (LaRocque, 1994). This differs from non-Aboriginal families who often have a different family dynamic (Fearn, 2006) and are likely to react differently to the violence.

Again, it is important to recognize that although beyond the scope of the study, Aboriginal women do not remain silent throughout their experiences of violence. Moreover, their options are not simply to stay in or flee the violent relationships—there is a much more complex dynamic of agency and resistance. While this study does not

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<sup>62</sup> Moreover, in general, Aboriginal peoples are known to avoid conflict and confrontation, usually averting blame to some third party external force (Aboriginal Justice Implementation Commission, 1999).

discuss such forms of resistance, this does not imply that they do not exist, but that sufficient literature is not available on the subject.

## **Conclusion**

Women's experiences with intimate partner violence are severe—it extends from physical violence, to sexual violence, to emotional violence. All have psychological repercussions but it seems to be the constant emotional violence that causes the most trauma. Furthermore, control and isolation seem to be common patterns for the abuser, signifying high levels of intimate terrorism. Women are often worried for their children and want to keep the family together—this often creates a barrier for disclosure and seeking assistance. Moreover, witnessing abuse in childhood increases the likelihood of being an abuser in adulthood, creating a cycle of violence. This cycle will affect family dynamics because, as we know, the more common violence is within the family, the less likely the family is to intervene with the violence. The interpersonal relationships of the family are important to many Aboriginal women, and affect how women perceive, internalize, and react to the violence.

## **Chapter Five: The Importance of Social Support – Looking to the Community and Resources**

Thus far we have explored the existing literature on the severity of the intimate partner violence that exists within Aboriginal communities and we have identified what renders women's circumstances unique, as well as the commonalities they share with non-Aboriginal women. Intimate partner violence experienced by Aboriginal women, especially those living on reserves, is exceptional due to isolation, tightly-knit families<sup>63</sup>, and a history of oppression and racism. Identities and culture are felt to have been lost through this oppression, and therefore women are not only battling the oppression they experience by men (through violence and exclusion from band politics), they also experience discrimination by the outside world<sup>64</sup>, poverty, and efforts to keep their families together. In this chapter, we will explore community reactions to the violence, and examine the resources available for women experiencing intimate partner violence and the adequacy of said resources. A woman is always surrounded by her community, and its reaction to violence may be an indicator of whether she will perceive the violence as unacceptable. Feelings of rejection within one's community can foster maladaptive behaviour and mental illness (Choenarom et al., 2005), and can therefore significantly affect women's experiences with violence. Moreover, women who choose to seek professional assistance in order to cope with the violence are likely to use the types of

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<sup>63</sup> Not only does Aboriginal culture foster a unique, tightly-knit family dynamic (Fearn, 2006) but extended families also often live in the same household or in very close proximity to one another, creating a chemistry that is often different from non-Aboriginal families.

<sup>64</sup> Not all Aboriginal peoples may feel discriminated against. Moreover, the discrimination felt by different Aboriginal peoples may differ—this is because each person internalizes their situations uniquely, but also because not all reserves and Aboriginal communities are treated the same. In the past, many treaties were made with tribes independently (i.e., decisions were not made for collective Aboriginal peoples all the time). Therefore, funding and access to resources differ. Moreover, oppression through Band politics is not the same in every community—some communities have now begun to include women in politics while others have not.

reactions they get from first responders and service providers to gauge how they interpret the violence—if the service providers isolate the women and ask her questions such as “what did you do to make him violent” a woman is more likely to self-blame. The adequacy of services and women’s satisfaction with them plays a large role in whether violence will continue and in women’s next steps once they have sought assistance. It is therefore crucial to understand the community dynamics and adequacy of services in order to better understand how Aboriginal women experience intimate partner violence. In terms of the social ecological framework, this chapter speaks directly to the community and institution/organization levels of a woman’s ecosystem.

### **Aboriginal Communities**

Before an understanding of community reactions can be achieved, it is important to understand what community looks like for many Aboriginal individuals living on reserves. In northern Ontario, Nishnawbe Aski Nation represents 49 Aboriginal communities (see Appendix B) and is the regional organization representing the social, political and economic interests of Aboriginal people in northern Ontario (Nishnawbe Aski Nation, 2010). There is a total of approximately 45,000 Nishnawbe Aski Nation members (including on and off-reserve) and Ojibway, Cree and Ojicree are the traditional languages spoken by the people of Nishnawbe Aski (Nishnawbe Aski Nation, 2010). In northern Manitoba, Aboriginal peoples comprise 57% of the population, and approximately 70% of those individuals live on a reserve (Hallet, Nemeth, Stevens, & Stewart, 2000). Therefore, we are talking about a large proportion of Aboriginal peoples living on reserves in these two geographic areas.

In terms of housing, those who live on reserves likely live in band owned houses

(this includes 84% of Aboriginals living on reserves in Manitoba; Hallet et al., 2000). This means that the individuals living in these houses do not own the house or the property—it is owned by the government and managed by the Band. The need for adequate housing has been recognized by Canada, as well as by the United Nations, and has been deemed a basic prerequisite to health and well-being (Durbin, 2009). Among Canadian Aboriginals, those living on reserves have been identified as most at risk for living in substandard housing (Durbin, 2009). Overcrowding, mould, limited access to potable water, inadequate sewage systems and need for major repairs are but some of the barriers that many individuals living on reserves face (Durbin, 2009; Hallet et al., 2000; Assembly of First Nations, n.d.). Living in substandard housing can be a cause of distress and can lower overall well-being (Durbin, 2009), and as we already know, stress can contribute to violent behaviour (Straus, 1980).

Housing is but one determinant of health that causes stress in the lives of Aboriginal individuals living on reserves—there is also a lack of employment opportunities, substandard education, and a lack of basic services, such as health services (Health Canada, 2005). Under the Indian Act, it is the federal government’s responsibility to ensure Aboriginal peoples are living comparable lifestyles and have access to comparable resources as their non-Aboriginal counterparts, but even the Prime Minister himself has acknowledged the federal government’s failure to do so (Assembly of First Nations, n.d.). Unfortunately, the Indian Act further states that Aboriginal peoples are restricted from providing these basic services to themselves unless authorized to do so by the Crown<sup>65</sup> (Assembly of First Nations, n.d.). This means that not only is the federal

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<sup>65</sup> Section 91(24) of the Constitution Act of 1867 explains that the Crown is the exclusive authority on Indians and lands reserved for the Indians (Assembly of First Nations, n.d.). While

government failing to provide adequate resources, standard education, and opportunities for economic growth to these individuals, but it is also preventing them from being able to help themselves. The Canadian government's refusal to provide adequate standards of living for Aboriginal peoples is furthered by the lack of employment opportunity that exists on reserves, the high cost of food, and the need to travel off the reserve to access many services that are not available on the reserve.

These are barriers that almost all individuals living on reserves face. However, beyond this, Aboriginal women are more often unemployed (Stout, Kipling & Stout, 2001) and are also the ones most often responsible for ensuring family well-being. Therefore, it is often women that experience the brunt of the burden of poverty, and as Kline (1993) states, when women are unable to take care of the family, they are perceived as "bad mothers". All of this stress is likely to impact how each individual lives on a reserve.

### **Community Reactions to Intimate Partner Violence**

When intimate partner violence is added to the community, the community's reaction to the violence is likely to be a reflection of the oppression felt by many of the individuals living within that community. Stout and Kipling (1998) describe how community members' views and perceptions of intimate partner violence play a crucial role in allowing the degradation of women to continue. Because of the community's lack of support for women, women experiencing intimate partner violence feel further

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self-government is now supposed to be a right for Aboriginals, this is still not yet the case—very few Aboriginal self-governments exist to date, and the government is moving very slowly to increase this number (Indian and Northern Affairs Canada, 2010; Henderson, 2010). As long as the Indian Act is still in place, it is the duty of the Canadian government to ensure comparable access to resources and opportunities for Aboriginal people, and Aboriginal people will still be under the regulation of the Canadian government.

marginalized within their communities. It is also important to keep in mind that many Aboriginal communities are still male-dominated (men are still the majority if not the only members of Band councils<sup>66</sup>; Canadiana.org, n.d.), and therefore the needs and voices of women are ignored.

Even though intimate partner violence is so prevalent within Aboriginal communities, there is a sense that intimate partner violence is a private matter; the ideology that "what happens in the house stays in the house" remains<sup>67</sup>. Because of such beliefs, action is not taken to support the woman and often there are no social repercussions for the men. Some women reported: "Something tragic happens, and it only lasts for a month. Someone comes to talk to you but then they leave and it's forgotten about." "Everybody knows about it, nobody does anything. There's a lack of solidarity. In reality, everybody's involved in your business, but when you need help no one wants to get involved." "The woman gets beaten, and the man holds his head high, but the woman has low self-esteem, and hangs her head low." (in Government of Canada, 2008, p. 23). One first responder discusses intimate partner violence within the community when she says: "On the surface it's frowned upon, but the leaders themselves do it...it's accepted,

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<sup>66</sup> Band council members are nominated and elections are held, much like elections in the Canadian government (Assembly of First Nations, n.d.). In this sense, perhaps one could argue that Band councils have a similar make up to the Canadian provincial and federal governments. However, while woman began infiltrating the male-dominated political system in the 1950s (Canadian Broadcasting Corporation, 2009), the change in the inclusion of Aboriginal women in positions of power within Aboriginal communities has been described as "small, slow [and] painful" (Canadian Broadcasting Corporation News Online, 2005). In this sense, while changes are happening, and more Aboriginal women are gaining positions of leadership, these changes are much smaller (although by means less significant) than in comparison to women's inclusion in Canadian politics. Moreover, women in general had been fighting for equal rights for much of history; Aboriginal women, on the other hand, only recently lost their equal status, and therefore their fight is much more recent and has existed for less time than that of non-Aboriginal women.

<sup>67</sup> This ideology is not unique to Aboriginal populations; however many communities are coming together to create awareness about issues such as intimate partner violence, and men are also advocating for women's rights—such initiatives are still scarce in Aboriginal communities.

it's almost part of their culture now. On the surface, if you were to ask them, they would say it's bad, but they also do it." (in Government of Canada, 2008, p. 24). Again, even though many are aware of the violence within the community, there is not a lot of support for the women who are being abused. Moreover, the women may feel further fear of humiliation through community gossip and fear of being ostracized<sup>68</sup> (LaRocque, 1994). The perpetrator and his supporters (be they friends or family) may also intimidate the woman being abused and members of her support network, in order to prevent disclosure (as would likely also be the case for non-Aboriginal populations). However, this is rendered even more difficult when the abuser is a member of the Band council, a police officer, worker at the health clinic, etc. There may be a complete lack of confidentiality because of the small community (and in a small community, there is likely also few options of where women can turn—this is especially the case on isolated reserves). Disbelief, anger, and feelings of betrayal and denial may all be reactions to violence that women experience within the community (LaRocque, 1994). This may lead to further internalization, self-blaming and low self-esteem. Some women express: "It's a feeling of failure." "You're scared no one else will want you." "I don't deserve any better." (in Government of Canada, 2008, p. 17). These feelings are much more prominent if, as a child, abuse was experienced. It becomes a normal, expected part of women's lives.

Prevalent community reactions include an absence of consequences and personal immunity (Lane et al., 2003). This is often the case when violence is normalized and excuses such as "you must have done something to deserve it" are made. When men

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<sup>68</sup> While these feelings are likely to exist for non-Aboriginal women as well, there are far fewer options for Aboriginal women—it is more difficult for Aboriginal women to move to a new place or meet new people, the communities are often very small, Aboriginal women are less likely to have the financial means to re-locate, and everyone in the community is likely to know what is going on (LaRocque, 1994).



know that their choices will not lead to any severe consequences, they are basically free to make whatever choices they want—even if this means violence. One frontline worker raises an interesting point when she says:

Why is it that the same man who repeatedly violates and physically abuses the woman he lives with because "she made me mad" doesn't attack or even confront the three-hundred-pound bouncer who threatens to throw him out of the bar or any other man who happens to annoy him? The reason he attacks the woman is because he can. He is physically stronger than she is. The other guys would beat the crap out of him. He knows this, so he doesn't dare resort to violence, or even open aggression. The man in this example who cannot "manage his anger" at home seems to have no problem managing his anger when he is faced with consequences. In other words, this man is not "out of control". He is very well in control of himself, and he is making choices. (in Lane et al., 2003, p. 52).

While such statements may hold true for non-Aboriginal individuals, due to the lack of social consequences and legal consequences (as will be further explored in the next chapter), as well as the blind-eye turned to intimate partner violence, Aboriginal men are more likely to abuse their intimate partners than other members of the community. This is further the case when the man or his family holds positions of power within the community. According to the Ontario Native Women's Association (1989), only one in 35 incidences of abuse is reported (this is in comparison to approximately 37%, or around one in three, of incidences of abuse being reported by non-Aboriginal individuals; Canadian Centre for Justice Statistics, 2001). This is likely the case because many women feel as though there is no point in reporting such violence if the abuser will not face consequences. Furthermore, after abuse is reported, men are more likely to abuse their intimate partners, and the abuse is more likely to be severe (McGillivray & Comaskey, 1999). For example, studies show that a married woman in Canada is nine times more likely to be killed by her husband than a stranger. Moreover, for every man

killed by his wife, approximately four women are killed by their husbands. This ratio jumps to 10.1 women killed by their husbands once they have left the relationship (compared to every husband killed by an ex-wife). Separation increases the likelihood of a woman being killed by her husband by six times (McGillivray & Comaskey, 1999). Therefore, there is often little reason for a woman to disclose violence or leave the abusive relationship. Disclosure and the limited options a woman has are both deterrents in themselves; moreover, abuse is likely to worsen if either of these actions is taken—therefore taking action does not seem like a advantageous decision. Inaction on behalf of the community can clearly answer the so often posed (although unfairly so) of why women do not "just leave" or tell someone about the abuse. The inaction of the community is illustrated by one woman's response to the question "What does the Band Council do in these situations?". Her response: "Nothing. Nothing. Nothing. They don't get involved in these questions." (in Government of Canada, 2008, p. 31).

Again, it should be noted that, while not illustrated throughout this study, the action that communities take to end violence and address the disparity that exists likely help alleviate some of the trauma that is experienced. Such actions, although not a focus of this study, should be considered when trying to understand the complex community dynamics that exist.

## **Women's Experiences with Services**

### **Barriers with Services**

An Ontario Native Women's Association (1989) survey reveals that 44% of Aboriginal women living on a reserve surveyed in Ontario could not think of any resources available to family members suffering from the effects of family violence. A

more recent study found that 55% of Aboriginal women used social services<sup>69</sup> (Statistics Canada, 2006b). Clearly many individuals are unaware of the availability of resources and how to access them. This poses a problem in terms of what options women see for themselves. However, even if women are aware of available services, they may need to seek permission from the Band to be able to access the services and be subsidized for them (Smith, 2010). Moreover, when and if women turn to the police, members of the band council, or medical professionals for assistance, they are often sceptical and feel unsupported (Stoker, 1998). The police, Band counsellors, and medical professionals may not have the knowledge, resources, or skills to appropriately deal with such disclosures (Canadian Council on Social Development & Native Women's Association Canada, 1991). Therefore, even when trying to escape the violence, when trying to overcome the barriers, women still need to "seek permission" in order to leave the community to get the help they need. And, as mentioned before, if they do not seek permission from the Band (knowing what the reaction towards the violence will be), women are forced to incur the costs and risk being homeless and alone.

The Toronto Star (Smith, 2010) covered a story on the process for seeking abortions for women living on reserves. While Aboriginal women are subject to the same rights to choose whether to have an abortion, the federal law is often just acknowledged, while more cultural traditions are enforced. An unwanted pregnancy may be a reality for a woman being sexually abused by her partner (seven% of women surveyed by the

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<sup>69</sup> Although this statistic was used in the discussion of violence against Aboriginal women, it did not explicitly state what kinds of social services were being used and the reasons for seeking out such services. Knowing the complex factors that are associated with high rates of violence, such as alcohol and substance abuse, mental health concerns, etc., it is very possible that these services were being sought for reasons other than violence. Moreover, this source did not state where these Aboriginal women lived (i.e., on a reserve, or rural or urban area).

Ontario Native Women's Association (1989) had unwanted pregnancies), and getting help from within the community may seem impossible. According to Valerie Gideon (Smith, 2010), the regional director for Ontario of the First Nations Inuit Health Branch, seeking to terminate a pregnancy is a straightforward process once the woman seeking to do so informs the registered nurse or visiting primary care physician<sup>70</sup>. Gideon goes on to state that “[the woman] would be provided with all that information about what those options would be, what services are available to her . . . and then if she made an informed decision where she wanted to access the service then she would be referred to the appropriate centre” (para. 11). Further, there exists a federal program that would cover the cost of transportation, meals and accommodation. Unfortunately, this is not how many women on the reserve see this process. Most abortion clinics are located in large cities, such as Toronto. Some women may have never travelled to the city by themselves, and even if they have, to do so under such conditions can be terrifying. Moreover, in a small community, confidentiality can be a big barrier. This is especially the case when the woman needs to seek permission from the Band, when the people working at the front desk of the health clinic are members of the community (which is almost always the case), or when a translator is needed to assist the communication between patient and physician. Moreover, cultural stigma makes it near impossible for women to discuss abortion openly within the community. For example, Aboriginal Minister of Parliament Rod Bruinooge (of Winnipeg South) stated: “My aboriginal elders have taught me that the cycle of life honours both birth and death, and respect for the unborn is a foundation

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<sup>70</sup> Recall that registered nurses are often individuals who live on the reservation and are therefore part of the tightly knit community—anonymity becomes much more difficult under such circumstances. On the other hand, physicians are not always physically present in the community (the frequency of visits from physicians varies depending on communities), and this may not give a lot of opportunities for women to seek abortions within the recommended time frame.

of this philosophy” (Smith, 2010, para. 29). Such beliefs are ingrained within many individuals within Aboriginal communities, making seeking a service such as abortion next to impossible. This is not only the case with abortion, but with many of the services women need in order to be able to control their own lives.

This is but one example of the barriers that Aboriginal women have to face. If they look past the difficult circumstances and if they choose to seek services to deal with violence and discrimination, there are even more barriers to be faced—often there is nowhere to go, no way to get there, and there is concern for the well-being of the children. Even if services are physically accessible, further challenges exist. Frank (1992) outlines some of these: racism, fear of losing one's children, fear of being victimized by the institutions, feeling of not being understood, needs not being met (e.g., lack of cultural sensitivity and a misunderstanding about the emphasis on family unity), lack of resources to afford adequate treatment of support services, and jurisdictional disputes between the federal and provincial governments, leading to individuals falling between the cracks (ex. status Indians' lack of provincially subsidized daycare, non-status Indians not having access to federal services). These are not minor barriers—these are the types of barriers that may make women feel as though it is easier to stay in the violent relationship than to seek help from outside. Moreover, often abuse is a form of isolation; having to leave the community, one's family and friends is a further form of isolation. Therefore, women who seek help from available resources risk being further isolated by taking action to escape. One woman expresses her discontent with the current system by stating: "Men are prejudiced, every time I call for help I get no help from the Band. And once you leave the reserve, you have no access. You still have your band card but you

have no help." (in Government of Canada, 2008, p. 31).

This creates a disjointed scenario: a woman can stay in the community and seek help from within, knowing that help and support will unlikely be given, and knowing that the abuser will likely discover the disclosure and aim to make the woman pay for her betrayal, or leave the community and seek help from outside, abdicating all potential support from within the community and potentially having to survive without support. Recall that many Aboriginal women are unemployed (for example, 21% of Aboriginal women are unemployed, in comparison to 9.7% of non-Aboriginal women; Stout, Kipling & Stout, 2001) and do not own their property (land is owned by the government and managed by the Band council). This means that if and when women decide to leave the community, they are likely to do so with essentially nothing. If they cannot access assistance outside the community, it is probable that they will become homeless (Novac, 2007).

### **Availability and Adequacy of Services**

Interestingly, while a lack of availability of resources is a problem on reserves, and many Aboriginal women in general are not aware of the resources available to them, Aboriginal women living on reserves seem to have a better idea of the services available to them than Aboriginal women living off-reserve (Ontario Native Women's Association, 1989) and have been found to make more use of social services than their non-Aboriginal counterparts (Statistics Canada, 2006b). Aboriginal women who participated in a focus group suggested that posters in health facilities or within the communities, through "word of mouth", the telephone book, and brochures and pamphlets were the main means of obtaining information about support services (Indian and Northern Affairs Canada,

2006<sup>71</sup>). These same women expressed that use of internet-based information was not useful (Indian and Northern Affairs Canada, 2006). One woman stated: “Most people can’t get to locations to access computers because they don’t have computers at home. So no, web-based services are not useful” (in Indian and Northern Affairs Canada, 2006, p. 34).

Unfortunately, knowing about available services does not mean that such services are meeting the needs of the women, nor does it mean that the services are being accessed. According to the Ontario Native Women’s Association (1989), many of the services available on reserves are not seen as very helpful by those living on the reserve (see Appendix C). In addition, more than half of the women surveyed by the Ontario Women’s Native Association (1989) thought that very few women sought assistance outside the family when experiencing violence. This may be because women are not aware of the available services, services are actually not available, or because services are not perceived as very helpful (Ontario Native Women’s Association, 1989). Of importance is also the fact that most women do not report violence until it is seen as a last resort (Indian and Northern Affairs Canada, 2006). At this point, immediate and effective help is needed. Some Aboriginal women from across Canada reported that the most commonly used resources included transitional houses, women’s shelters or crisis centres, and crisis hotlines (Indian and Northern Affairs Canada, 2006). They further reported that these resources usually included services such as temporary accommodation, financial assistance, counselling services, security and safety, like skills courses, drug and alcohol treatment, and more (Indian and Northern Affairs Canada,

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<sup>71</sup> The participants in this study were both on and off-reserve Aboriginal women, thus information reflects opinions and information that may not be completely reflective of on-reserve Aboriginal women.

2006). While some women reported satisfaction with these services (as will be explored later in this chapter), others expressed frustrations. For example, language barriers are one of the many obstacles that women and workers must face when seeking help within the community. Some women express their concerns by stating:

There will be an alcohol counselling centre opening here in the spring. They have a young girl working there. She doesn't speak Inuktitut. She's going to be the Inuit counsellor but she doesn't speak Inuktitut. They have somebody giving her a crash course in how to speak Inuktitut. So, you can be a counsellor for the Inuit population if you take a crash course, if you can believe that! (in Canadian Council on Social Development & Native Women's Association Canada, 1991, p. 10)

I refer native women to the transition house but, for the life of me, I'll never understand how people that don't speak Inuktitut can actually help somebody, can counsel the women. Somebody could come in here and talk Russian to me all day, counsel me. But it's not going to do me any good if I can't understand what the counselling's about. So, it's just a roof over their heads and something in the mouths for that short period of time. And then, after six weeks, what do you do? You go back to your husband. (in Canadian Council on Social Development & Native Women's Association Canada, 1991, p. 10).

One woman clearly illustrates many more of these barriers when she states:

On the reserve, I know a lot of girls that want to leave. But they don't have the money. One day, they want to leave and if they find somewhere to go for a while, they find that they can't pay their way to go any further. And so, after a couple of days, they make up with their husbands. And it keeps going like this. A transition house cannot be on the reserve. The men just come in there—they are so rough—shooting guns or something. Some of them are that crazy. A lot of women are afraid to leave. They have nowhere to go and they don't know anybody that can help. (in Canadian Council on Social Development & Native Women's Association Canada, 1991, p. 5).

This is a very important point to consider—while there may be an argument for inadequate services within the community, it does not logically make sense to have some of those services available—from what would a woman be sheltered if she stayed within the community? However, one woman expresses her dismay at not having such services



available:

As you look out this window, you can see it's not a very friendly environment to sleep outdoors, on a porch. This is what is happening to them. There is no housing here for battered woman. Period. Nothing. People are living in condemned houses just to have a roof over their heads. But it's ongoing. It seems that if you're native, no matter how much you try to bring yourself up to what white people expect of you, you still haven't got very far beyond that. (in Canadian Council on Social Development & Native Women's Association Canada, 1991, p. 10)

Such solutions may not be the most appropriate, however, as we have already discussed, it is difficult to leave the community in search for help as well. One woman expresses the difficulties in moving from the reserve to a larger city:

People have grown up on the reserve all their life are not used to the city. They hate city living. It is harder for native women because most of us have never learned how to drive vehicles and we don't have anything of that sort. We have to walk if we want to get anyplace. And we don't know where to go when we need help. We've never heard of some places to help us. And some of the women can't read. Some of them don't even know how to speak English. So it is really hard for them. It's not easy for someone who is born on the reserve to try to adapt to living in a city. (Canadian Council on Social Development & Native Women's Association Canada, 1991, p. 15).

This illustrates the complexity of the problem. While this likely does not reflect the situation of all Aboriginal women, it is a true representation for some. Clearly traveling to the city to access the needed support can prove to be challenging for some women. Also moving from a place where you know everyone to a place where everyone is a stranger, while already feeling vulnerable and scared, can cause a woman to decide that staying at home is simply easier.

### **Services Available to Aboriginal Women in Northern Ontario**

If a woman does manage to get out of her community and seek help from one of the few available services, this does not necessarily mean that the services will meet her

needs. This is especially the case if the services being offered are not especially offered for Aboriginal women and their families. Some Aboriginal women have expressed their frustrations with non-Aboriginal services, stating that many workers are not aware of the Aboriginal beliefs and priorities. Many services offer more individualistic approaches, they encourage women to leave their partners (as opposed to trying to resolve the problem), and they advocate the use of the criminal justice system<sup>72</sup> and punitive measure (Stoker, 1998).

I conducted an online search of available shelters in northern Ontario, using [canada211.ca](http://canada211.ca) (an internet- and telephone-based resource that offers information on services) that are located in areas highly frequented by Aboriginal peoples. A total of eight shelters were found. I then contacted each of these shelters, first through email, and then (for those who did not respond) by telephone. Questions asked included: what services does the facility provide?; how long can women stay?; and is the facility Aboriginal-specific?<sup>73</sup>.

While eight shelters may suggest a range of options for women, it is important to keep in mind that a large number of women in Aboriginal communities are experiencing violence. Even though all women may not want to leave their abusive relationship, the option should be available—clearly it is not. Moreover, many of the websites for these shelters lack information that may be necessary for women to plan for the future.

Moreover, considering information is rarely found using the internet (Indian and

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<sup>72</sup> Aboriginal women generally tend to steer clear of the criminal justice system because they feel that justice will not be served, and for fear that their children may be taken away. Unfortunately, in Manitoba, Employment and Income Assistance will cover the costs of abused women seeking shelter from their reservations only if they have already taken legal action. This means that many women will not get support from the province when seeking refuge.

<sup>73</sup> A list of these shelters, and their amenities along with responses to these questions, can be found in Appendices D and E.

Northern Affairs Canada, 2006), updated and useful information may be even more difficult to access. For example, if a woman does not know how long she will be able to stay at the shelter, she may be deterred from going. There are already many unknowns in these women's lives, it is important to provide them with as much information as possible so they may make educated decisions. Paper literature (such as pamphlets and handouts) may be available at the nursing station; however, women are less likely to pick one of these up at the risk of being noticed<sup>74</sup>. Moreover, while having transition workers is important for women who want a new start, few of the shelters listed above explicitly mentioned services available for men and the whole family<sup>75</sup>. As we know, the unity of the family is important to many Aboriginal women; therefore, programming that allows the family to stay together should be an option for women. Services for the whole family are rarely available, and accessing them is rendered even more difficult due to the far distance of many of these facilities—it is highly unlikely that all family members will willingly travel away from home to seek assistance. However, counsellors from Aboriginal-specific shelters often encourage women to return to their families (Urbanoski, 2001). If no counselling is available to rehabilitate the family, women will be returning to the same dangerous and volatile environment—potentially at further risk than before. Lastly, once women leave their community, it is often very difficult for them to return—they may feel shame, rejection, ostracism, etc.—programming should involve ways of coping with such feelings, something else that was missing from many of the programmes. Programmes should also consider and offer options for both temporary and

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<sup>74</sup> Many websites for women looking to flee violent and dangerous situations offer tips on how to erase one's internet history, in order to avoid their abuser's suspicions.

<sup>75</sup> A lack of funding and resources would make the provision of services difficult, and may risk further limiting the services available to women.

permanent leave from the community—some women may plan on returning home<sup>76</sup>, while others have no intentions of going back.

Through the responses from my questions to the shelters, I found that most shelters expressed that they were quite accommodating to women—even when they had a limited amount of time that women could stay, this time period was extended if necessary. Moreover, resources that women would need, such as clothes, toothbrushes and food, were provided. Counselling, whether in a group or individual setting, was almost always included also. Most of the shelters were at- or over-capacity; however, all (i.e., the five that responded) of the shelters stated they never turned women away—either they made space and accommodated her or ensured that she was accommodated elsewhere. Transportation to the shelter was provided in some of the cases. It is important to note that many of the shelters available did not participate in this study, making large conclusions difficult to draw; however, those that did participate stated that efforts are made to help women in whatever ways possible.

### **Women's Reflections on Services**

In terms of what services are offered and the kind of atmosphere the shelters provide, many Aboriginal women seem satisfied with the help they have received (Stoker, 1998). However, some Aboriginal women who visited Aboriginal-specific shelters found that there was too much emphasis on the well-being of the family, and not enough on the self (Stoker, 1998); making the assumption that all Aboriginal want to return to their partners and to their communities is wrong. Striking the perfect balance

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<sup>76</sup> Stoker (1998) makes the interesting point that if women do return to the community, they may have no where but their abusive partners' homes because of the lack of housing on many reservations.

between individual safety and security, and recognizing women's feeling towards family unity can prove to be a difficult task. Moreover, some women (also visiting Aboriginal specific shelters) reported that there was too much pressure to accomplish the goals they set out for themselves at the beginning of their stay at the shelters. Some Aboriginal women reported that they needed time to recover from the traumatic events they were experiencing and reflect on their decisions, before they could start working on themselves (i.e., re-building their self-esteem, figuring out what happens next, etc.; Urbanoski, 2001). For example, one woman explained:

We come in here scared, the children are terrified, and we're being pushed right back out that door. We don't have one or two days to just sit back and try to think about what's going to happen next...not enough time to think, 'OK, I'm here, I'm safe now, let me calm my children down'. It's like, 'get out the door and do what we say'...A lot of women think it's terrible that they come in here and don't feel safe here. We know we're here for 21 days...sure it's no excuse to sit back and do nothing, but let us sit and breathe at least, and counsel us. (in Urbanoski, 2001, p. 114).

Leaving an abusive intimate partner, and potentially one's whole community, whether permanently or temporarily, is a difficult and life-changing decision. Women should be offered some sort of transition period before being encouraged (perhaps forcibly) to figure out everything that happens next. This is why it is also important to let women know ahead of time how long they are able to stay in the shelter—women can mentally prepare for how quickly they need to be able to get back on their feet, and such indicators can ease the process. When living in the shelter, women usually work cooperatively to accomplish tasks; some women clean, others watch the children, etc. This gives women a sense of independence—they are supporting themselves while still receiving assistance. Again, it has been suggested (Urbanoski, 2001) that women be allowed to opt-out of some of these tasks for their first couple of days at the shelter, should they feel it

necessary. Further, some women expressed the difficulties they experienced living with the other women—women felt they had a lack of privacy and personal space at the shelters<sup>77</sup> (Urbanoski, 2001). Moreover, although some support for children is given, some women also suggested that having more support for the children (whether for education or counselling purposes) would have been helpful for the children, and for the mothers. Some women also found sharing their experiences in a group setting to be difficult. For example, one woman reported:

When I heard all the other women and their stories and what happened to them, for me, I just thought, ‘maybe it’s my fault’. The only person I liked talk to was X and I went and talked to her about that. I just broke down crying. It just seems like mine isn’t as bad as their. She said, ‘don’t say that...all of are here for a reason’. It’s just the words she said to me made me feel better. (in Urbanoski, 2001, p. 117).

Counsellors should be aware that feelings such as these may emerge, and should know how to appropriately deal with them. Some may also find the shelter’s environment to be emotionally trying, as women are constantly aware of their situation and the situation of others (Urbanoski, 2001). It may be difficult to always be emotionally available to the other women that are in the shelter, especially if she is emotionally drained herself. At the same time, connecting with other women may prove to be another means of support.

Some woman stated:

It seemed that I got more out of the women than the counsellors themselves...because they share their experiences and we’re kind of going through the same thing. It’s easier to see someone else’s life than your own...and how they’re dealing with it and how differently you’re going to deal with it if you were in that situation. (in Urbanoski, 2001, p. 121).

It’s nice to see that there are other women who are going through the same stuff you are...that’s actually been pretty helpful because believe it or not, more than

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<sup>77</sup> Some shelters require women to share bedrooms with other women (Urbanoski, 2001).

the counsellors here, I've been getting more support from the other women. It feels more real when you talk to them. I don't mind sharing my stuff with them, but I find it really hard to talk to the counsellors about my situation. (in Urbanoski, 2001, p. 121).

Vicarious learning was part of the experience for many women, and observing patterns of abuse helped women process and understand their own experiences.

Lastly, just because shelters were deemed “Aboriginal-specific” did not imply that the counsellors and staff of the shelter were of Aboriginal ethnicity. It was therefore frustrating for some women to be working with counsellors who were not aware of and/or did not understand their personal and cultural beliefs (Urbanoski, 2001). One woman expressed her discontent when she said:

...I expected to walk in here to a Native place...but it wasn't, and I was kind of disappointed. Why do they call it the Native Women's Shelter?...I wanted people the same as me, and you come walking in and there's white women. I thought, isn't the purpose of a Native Women's Shelter, that they're Native?...I thought people would understand because they're Indian and I'm Indian. I'm not saying that all Indian relationships are abusive, but a majority of them are...Having someone understand where I just came from because being an Indian, you do have to deal with the prejudice and the stereotyping. (in Urbanoski, 2001, p. 132).

This type of disappointment can be very difficult for women leaving abusive relationships to deal with—they may have made an extra effort to go to an Aboriginal shelter thinking that the experience would be different, when in fact it is very similar to the experience that they would have had at any other shelter. If Aboriginal shelters have non-Aboriginal counsellors, or non-Aboriginal specific programming, women should be aware of this before going to the shelter.

Although some women were frustrated by the way they were treated at the shelter and by the support they were given, most women were grateful for at least having a place

to get away and reflect on what was happening to them. Moreover, as mentioned, many women were satisfied with their experiences at the shelters. This is a positive note considering the often negative experiences women have when seeking help and support from their families and communities.

## **Conclusion**

It is clear that within most Aboriginal communities, there are a variety of factors impacting Aboriginal women, including poverty, racism, gender-based inequities and inadequate housing, among others. These are significant contributors of stress for many individuals. Moreover, for many Aboriginal communities, intimate partner violence is common and therefore not seen as of crucial importance. Because of this, many community members turn a blind-eye, do not get involved, and do not offer women the help and support that they need. There are also many barriers when women try to seek assistance outside of their community, making this a less than appealing option for them. However, once they attempt to seek help from such services, many women find that the help they get is not what they had hoped for: the number of services offered to women are not adequate to meet the demand of women, women feel as though their needs are not being met and they still experience cultural insensitivity. Fortunately, it seems as though some shelters are offering services that do in fact meet women's needs. Many women find that simply having somewhere to go to seek refuge and being amongst women experiencing some of the same things helps them come to terms with their own experiences. Without support from their communities and adequate help from services, women are likely to find difficulty in overcoming intimate partner violence, allowing the cycle to continue.



## **Chapter Six: Following the Rules: Women's Experiences Reporting Intimate Partner Violence within the Judicial System**

As has been explained previously, women who experience intimate partner violence are encouraged by many shelter counsellors, police officers, and medical professionals (i.e., nurses and doctors) to report the violence and take punitive measures against their partners. While taking such measures may potentially allow for women's long-term safety and well-being, punish men for their unacceptable behaviour, and remove these men from environments where they may continue to victimize, many women do not see reporting the violence and taking legal or punitive measures to be the appropriate or best way to deal with intimate partner violence. Because of this, women may miss out on some of the options they have for support from such institutions. For example, Manitoba's Employment and Income Assistance may cover the costs of travelling to a shelter for an Aboriginal woman living on a reserve only if she has taken legal action (Stoker, 1998). Moreover, some shelter counsellors, police officers and medical professionals may begin holding the woman responsible for the abuse she is experiencing because she is "not doing anything to stop it" (McGillivray & Comaskey, 1999)<sup>78</sup>—it is important to keep in mind that just because she is not reporting the violence does not mean she is passively letting it happen. Reporting the violence is not the only option women see for themselves, and is often not an ideal solution to the problem. As will be further elaborated upon in this chapter, reporting abuse may cause many more problems for women, such as increased risks for violence, not being believed and feeling ashamed, having one's children taken away, having one's intimate partner

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<sup>78</sup> It is unlikely women are doing "nothing" to stop the violence they are experiencing. Women may resist their intimate partners, may coach their children on what to do in violent situations, and may decide to flee the home in search for a safer environment (McGillivray & Comaskey, 1999).

taken away, etc. As has been previously discussed many women want to keep their family together—reporting the violence is likely to do the complete opposite, as well as pose further risk to the woman should the process not go as planned. This chapter will explore women’s experiences reporting violence to the police (both Native and non-Native police), and justice measures that deal with intimate partner violence. In addressing these issues, the policy level of the social ecological framework will be addressed, and again we will see how Aboriginal women are discriminated against on many different levels.

### **Intimate Partner Violence and the Law**

While the Canadian Criminal Code is still silent on some forms of intimate partner violence (such as psychological/emotional violence), many forms can now be prosecuted, such as: culpable homicide, all levels and degrees of physical assault, uttering threats of death or serious bodily harm, threatening with or using a firearm or other weapon, breaking-and-entering, unlawful confinement, abduction, fraud, theft, arson, robbery, wilful damage, breaching the peace, and breaching a recognizance, protection, or probation order (McGillivray & Comaskey, 1999). Unfortunately, even though some of the crimes punishable by law include emotional abuse (for example, uttering threats), psychological and emotional abuse alone are not enough to press charges (Health Canada, 1999). With such an extensive list of possible ways an intimate partner can be charged with abuse, it may come to a surprise to some that women would be reluctant and untrusting of this system. However, according to McGillivray and Comaskey (1999),

charges of any kind are rarely laid in intimate partner violence<sup>79</sup>—the problem lies at the first level of engagement with the criminal process: the police.

### **Experiences Reporting Violence to Police**

There are policies regarding sensitive issues such as intimate partner violence, but according to McGillivray and Comaskey (1999) and Amnesty International (2004), police are often insensitive when dealing with such issues. McGillivray and Comaskey (1999) describe that:

[police] refused to lay charges on the spot, and the complainant had to swear charges formally at the police station by noon of the following day. Police perceived the victim's continued contact with the abuser as implying consent...and often experienced women's reluctance to carry charges forward, having them dropped the next day or 'forgetting' on the witness stand. (p. 88).

In terms of women's experiences with calling the police, some women reported:

I've always called the police. As a matter of fact, one time when I called the police, the staff sergeant was upset with me. He says, 'I'm getting pretty upset with you, you're always phoning, calling here, you're getting to be a bloody nuisance...I should charge you for harassing, phoning here all the time.' (in McGillivray & Comaskey, 1999, p. 96).

Because they always seemed like they were getting disgusted with you, because it is repeated over and over again, being abused and then charge him, and then it would happen again, being abused and then I would charge him. Pretty soon it seemed like even the police or whoever got tired of it and didn't take it seriously any more. (in McGillivray & Comaskey, 1999, p. 96).

I called the police quite a few times. I'd say maybe ten times in a total of four years I was with this person. That's including the times when I would call them and they wouldn't show up because they probably looked on their computer and said, 'Oh, it's her again' [and] there were times he would make me phone them back and say we didn't need them to come. (in McGillivray & Comaskey, 1999, p. 96).

It is the responsibility of the police to serve and protect. Many women acknowledged this as the police's role (McGillivray & Comaskey, 1999); however, women are clearly

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<sup>79</sup> This is not unique to Aboriginal women, but a problem for all victims of intimate partner violence.

disappointed by the amount of protection they are receiving from the police. There are several possible law enforcement bodies provided to individuals living on reserves (depending on the reserve and the geographical area; Imai et al., 1993). These can include the Royal Canadian Mounted Police (RCMP), provincial police, municipal police, and First Nation constables (Imai et al., 1993). Either one (or sometimes all) is responsible for enforcing the law in Aboriginal communities. According to the Ontario Ministry of Aboriginal Affairs (2007), 20 First Nations communities are served directly by either the Ontario Provincial Police or a municipal police service; 19 First Nations communities are served by First Nations police officers who are administered by the Ontario Provincial Police; and 95 First Nations communities are served by nine self-administered First Nations police services. First Nations constables are appointed by the commissioner of the Ontario Provincial Police, and they must be approved by the First Nation council (or the reserve's police governing authority; Imai et al., 1993). The Nishnawbe Aski Police Service (NAPS) is an example of a self-administered police force serving the Nishnawbe Aski First Nations<sup>80</sup>. On their website, NAPS states:

The mission of the Nishnawbe-Aski Police Service is to provide a unique, effective, efficient and culturally appropriate service to all the people of the Nishnawbe-Aski area that will promote harmonious and healthy communities.

To achieve this mission, in partnership with the communities we serve, we shall:

1. Be representative of the communities that we serve;
2. Employ a community oriented style of police service;
3. Protect persons and property through crime prevention, community education, and appropriate law enforcement; and,
4. Provide a level and standard of police service of the same or higher quality that exists elsewhere in Canada. (NAPS, 2009, n.p.).

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<sup>80</sup> NAPS polices 38 of the Nishnawbe Aski First Nations. The Ontario Provincial Police and the Royal Canadian Mounted Police (RCMP) collaborate with NAPS, and also police many other reserves (NAPS, 2009).

NAPS promotes community-oriented policing and aims to be culturally appropriate in terms of their style of governance and law implementation. One would hope that in such cases, they would be more sensitive to the needs of Aboriginal women; however, as has been expressed, this is not always the case—it seems as though much of the needed sensitivity and cultural appropriateness that is desired by women experiencing intimate partner violence is not actually part of such services. Women are often still blamed and held responsible for the abuse and inaction from the police seems to occur frequently. Moreover, even though there are policing bodies available, the best interests of the woman and her children are not always the priority<sup>81</sup>. The fear of not being believed or taken seriously becomes a reality for many of these women<sup>82</sup>. This fear in itself is enough to prevent women from calling the police in the first place, as some women expressed: “[A] lot of times I feel, like, ashamed and I always feel guilty and embarrassed.” “I guess because I felt that if I wasn’t hit enough or something and the police may get mad if they don’t see marks on me and stuff.” (in McGillivray & Comaskey, 1999, p. 97).

Many women experiencing abuse likely have trouble trusting others, especially if they feel abandoned and betrayed by friends and family. Further rejection and disbelief from police is likely to cause internalization of abuse and lower women’s self-esteem.

Some women explained how they were treated by police officers when they stated:

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<sup>81</sup> It makes sense that police cannot simply decide that one parent should have custody of the child (or children), however because of this gray area (of with which parent is the child safest), police often remain uninvolved—perhaps making the situation harder for the victim.

<sup>82</sup> Again, the fear of not being taken seriously by the police or others is not a concern that is unique to Aboriginal women. However, because of the prevalence of violence (Brownridge, 2003) and the type of violence (i.e., most often intimate partner violence), some Aboriginal women use these services more frequently, making their experiences more unique. Moreover, as can be seen by the personal accounts, there is often the stereotype with Aboriginal women that alcohol (and/or other substances) was involved, and as such, they will be treated differently and held somewhat (if not completely accountable) for the violence.

I thought the police wouldn't—like, I feel when you're drinking and especially when you're Native—they don't, I don't know, they don't really want to get involved with you. Like it's your fault. Like, I felt it was my fault, like I shouldn't have been drinking with him. So I didn't do anything about it. (in McGillivray & Comaskey, 1999, p. 100).

There were lots of times when I did call...I don't think they believed me. Or else they would take one look at me and say—well, I got a lot of smart comments from them like—'You probably deserved it, look how drunk you are.' 'If I had an old lady like you that was as mouthy, I would slap her around, too.' You know. (in McGillivray & Comaskey, 1999, p. 100).

It seemed like nobody cared. Often, I would look for help. But it was like it was my fault. So I didn't bother. I just kept taking it. I took it for 17 years. There were cops there that could help. I usually took off and went to a place where he wouldn't be looking for me. Then, I'd make a phone call to the cops. They'd say, 'I'll be there in 10 or 20 minutes.' And I'd end up waiting for an hour-and-a-half. They just took a statement from me and then they'd wait for my husband. Then, they'd usually end up walking away. They never took him in. I wanted them to charge him and take him to jail. (in Canadian Council on Social Development & Native Women's Association Canada, 1991, p. 16).

These women's experiences with the police are likely enough for them to be sceptical about the help and support they will receive the next time they call. Furthermore, many women reported having to wait extended periods of time before the police actually arrived (McGillivray & Comaskey, 1999); this is because there are not always police located directly within the community (Royal Canadian Mounted Police, n.d.). Police have been reported to take hours to arrive at a woman's home once she has reported abuse (McGillivray & Comaskey, 1999). In a small and isolated environment, there are not a lot of places to seek refuge—especially if one is not being supported by her family and friends. The lengthy police response time can put a woman in more danger, potentially at risk for more severe abuse, and at times, can lead to her death.

Furthermore, if police become involved, children are likely also going to be involved in the process. Contacting the police means that either the woman will be

removed from her current dangerous environment (with or without her kids), or she has already fled (with or without her kids) and is now contacting the police<sup>83</sup>. Either way, the simple act of contacting the police is likely to cause significant changes in the children's lives, and cause further stress for the woman<sup>84</sup>. Some women reported that, in order to save themselves, they had to leave the community without one or all of their children (McGillivray & Comaskey, 1999). For example, one woman stated:

I first called the RCMP and they said, 'Go to [an Aboriginal child protection agency]...' I went all over and talked to them, the RCMP, and I told them, 'Can you help me? I need help, I need my kids. I'm trying to take my kid. Because if I ever go over there, my ex will be there and he won't ever let them go.'... They said, 'We can't help you,' and I said, 'Why?' 'Because we're not on anybody's side.' They couldn't do anything. Then I called the [band] cops again, and they couldn't do anything too. I guess they're scared of the chief... But the RCMP, they couldn't really do anything in that reserve [and they were told by chief and council], 'You have to tell us first if you want to come to our reserve.' (in McGillivray & Comaskey, 1999, p. 99).

As will be seen in the next section, reporting violence to the police can have large implications for the family, and often, these implications are not desirable.

### **The Effects of Reporting Intimate Partner Violence on the Family**

Another barrier to women reporting and pressing charges on their intimate partners is the fear of having their children taken away—this can occur whether women flee with their children or whether their children are left at home with the abuser. As was previously mentioned, Aboriginal children are much more likely to be removed from

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<sup>83</sup> Women often do not report the violence until it has escalated to near death occurrences (McGillivray & Comaskey, 1999). It is therefore likely that they have also taken other measures to help ensure their safety.

<sup>84</sup> Non-Aboriginal women often face the same challenges and concerns about their families and children when contacting the police; however, as will be further explored, Aboriginal women's concerns are unique in the way that their children are treated by children's services.

their families than their non-Aboriginal Canadian counterparts. Unfortunately, it is not only physically being removed from the family that makes entering child welfare services so difficult, but Aboriginal children involved with such services are also often treated worse and live under poorer conditions. For example, in an article published by the StarPhoenix on May 28<sup>th</sup>, 2010, a human rights battle between various First Nations groups and the Canadian government is described. In 1990, the First Nations Child and Family Caring Society was established by the Canadian government (Cuthand, 2010). Its mandate involves offering love and respect for First Nations children, youth, families and communities; respecting the people who work for such populations; the sharing of individual and collective resources to ensure the nurture and care of First Nations children in Canada; and respecting the values of diverse First Nations teachings (First Nations Child and Family Caring Society of Canada, 2007). This program supports 100 child welfare agencies across Canada, and serves approximately 160 000 children and youth (Cuthand, 2010). Today, this agency receives 22% less funding than provincial agencies. Across the country, the same child welfare rules apply; however, the same funding is not given, creating a two-tiered child welfare system: one for Aboriginal children and another for the rest<sup>85</sup>. Interestingly enough, a report created in March 2009 by the Standing Committee on Public Accounts of the House of Commons suggested that it would be reasonable to expect First Nations agencies to receive more funding than their non-Aboriginal counterparts due to the unique and severe circumstances (Cuthand, 2010).

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<sup>85</sup> On average, Aboriginal child welfare services receive 22% less funding than non-Aboriginal children (Blackstock, 2009). This is because non-reserve child welfare services are funded provincially, while the provincial government expects the federal government to fund on-reserve child welfare services (Blackstock, 2009). The federal government does not provide the same level of services to children on reserves, and the provincial government usually does not contribute to this funding, resulting in a two-tiered system (Blackstock, 2009).



Clearly, this is not the case. Moreover, as we know, ten percent of Aboriginal children are currently in child welfare services (in comparison to one percent of non-Aboriginal Canadian children). Aboriginal children tend to be placed in child welfare services due to issues of poverty and poor living conditions (Cuthand, 2010). Considering the high rates of domestic violence found in Aboriginal communities, it is interesting to note that non-Aboriginal children will get placed in the system due to issues of domestic violence more often than Aboriginal children (Cuthand, 2010). It seems as though Aboriginal children are being removed from their homes not because of immediate safety concerns resulting from high levels of violence, but due to more structural problems such as poverty. For example, food security is of concern for 21 to 83% of the time for First Nations communities<sup>86</sup> (Smylie, 2009). In the Cree community of Fort Severn in northern Ontario, a 2002 household survey indicated that the rate of food insecurity was 67%, and that 24% of all the households surveyed with children were categorized as having food insecurity with hunger (Smylie, 2009). It is for reasons such as these that children will more often be taken away—problems related to structural inequality as opposed to bad parenting. According to Claudette DeWitt: “You put a child into care and they get counselling immediately...but when a biological parent is looking for those sources or that funding to maintain their own family and keep it together, it’s not available to them” (in Amnesty International, 2004, pp. 17-18). Clearly, there is still a focus on taking Aboriginal children out of their homes; however, this focus seems much less overt and obvious. The discrepancies in resources are not solely seen in the Child and Family Services—according to Cuthand:

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<sup>86</sup> Although not addressed in Smylie’s text (2009), the large discrepancy between communities is likely related to geographic location, services available, and overall socioeconomic status of the community—not all communities have the same services, nor are all living in poverty.

First Nations programs are seriously underfunded. It has been estimated that children on reserves receive \$2,000 to \$3,000 less per year than do off-reserve students. Also the Department of Indian Affairs has placed a two per cent cap on First Nations funding since 1996 in spite of the fact that population growth and inflation have been increasing at a greater rate<sup>87</sup>. (2010, para. 31).

It therefore comes as no surprise that many Aboriginal women would be concerned with reporting intimate partner abuse to the appropriate authorities—their children are more likely to be taken away, and their children are also less likely to get the services and treatment they deserve through the system. Regardless of the reason children are taken away from their families, when women report violence, they are drawing attention to their families, making it more likely for problems within the home to be identified.

### **Effects of Mandatory Charging Policy**

It is clear that women are reluctant to report abuse due to fears and shame, as well as due to concerns about the guardianship of their children. Testifying against an intimate partner may also be a stressful, emotionally draining and dangerous decision for a woman to make. For this, among other, reasons, a mandatory charging policy has been initiated in the Canadian Criminal Code. With this mandatory charging policy, police are responsible for charging an abusive partner when there are reasonable and probable grounds for doing so. This is to ease the process for women who may find it difficult to carry out this process themselves (Native Women's Association of Canada, 1994; Department of Justice, 2010). In Manitoba, for example, a zero-tolerance for domestic violence policy was implemented. This policy states: "Where a police officer has reasonable and probable grounds to believe that a husband or wife has been assaulted (by

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<sup>87</sup> On a more positive note, the Assembly of First Nations and the First Nations Child and Family Caring Society of Canada have taken the Canadian government to court (Cuthand, 2010)—action is being taken, and hopefully changes will be made.

their partner), the police have been requested to lay the appropriate charges” (Native Women’s Association Canada, 1994, p. 12). Such a policy has had positive impacts for several women, as they report: “I feel that, yes, it’s good to protect us again. You see, if they had this policy when this was happening to me, I would have charged him. I wouldn’t have been afraid.” “[He] ceased to [physically] abuse me altogether. He would raise his hand to me once in a while, but he never followed through with the body contact...I think he knew that I would phone the police should he ever touch me again.” “I think a lot of women use it just to scare their men, to have a little more control, power over them...” (in McGillivray & Comaskey, 1999, p. 104).

Unfortunately, “reasonable and probable grounds” mean different things to different law enforcers. Some Native police officers required concrete evidence (such as medical examinations, eye-witnesses, etc.), while non-Native police lay the charges without such evidence, even when the woman requests that no charges be laid (Native Women’s Association Canada, 1994). Native police’s reluctance to press charges without evidence renders this policy somewhat ineffective, as women are still forced to face the burden of seeking out evidence—their accusations of abuse are not always enough for the police to take action. On the other hand, non-Native police are likely to press charges against a woman’s wishes. Although such an approach may seem like the appropriate response, “saving” women from their abusers, mandatory charging takes away a woman’s sense of agency and ability to make decisions regarding her whole life (Native Women’s Association Canada, 1994; Metropolitan Action Committee on Violence Against Women and Children, 2008). As we already know, family unity is important for many Aboriginal peoples; with such a policy, the ability for a woman to keep her family

together is largely taken out of her hands, and her fate is left to the justice system. The system of mandatory charging also forces women to testify, as without victim-support, charges are often dropped<sup>88</sup> (Native Women's Association Canada, 1994). This again puts women in a difficult situation because she must either testify against her intimate partner (potentially against her will), or the charges will be dropped (and she is at risk of more severe abuse than before (McGillivray & Comaskey, 1999). In some regions in Canada, even third party individuals (i.e., family members, friends, witnesses, etc.) may report the violence, and this may also instigate the mandatory charging policy. While this may be for the protection of the woman being abused, and while a woman being abused may have no means of reporting the violence herself, this may cause discontent and disempowerment for some women. One woman expressed:

It was a neighbour of mine who called the police. When the police came in it was out of my hands totally. My whole life changed. All of a sudden I wasn't allowed to make any decisions. He [police] didn't have discretion...Officers are to charge everybody no matter what. So the officer did what he was told and destroyed my life without even asking me...They were really upset when I refused to go to court. The process of court and jail is not a solution to the problem. (in Native Women's Association Canada, 1994, p. 18).

The police-abused relationship demonstrates an interesting dynamic: with such a policy, police have the ability to intrude on women's lives without their consent, women may then choose to resist by not appearing in court or not testifying (Department of Justice, 2010), in turn frustrating police officers and causing them to not take cases of intimate partner violence seriously. Essentially, police often do not act in cases of intimate partner violence because either women report it too much or do not comply with police officers,

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<sup>88</sup> Although mandatory charging supposedly removes the responsibility of reporting from the woman being abused, she is still expected to testify against her partner—if not, charges may be dropped.

women do not comply with police officers or report violence often because the issue is not being dealt with appropriately<sup>89</sup>. Aboriginal couples (and other people of colour) have also been found to experience dual charging more frequently than their white counterparts (Metropolitan Action Committee on Violence Against Women and Children, 2008). Dual charging involves both parties being charged for domestic violence. This is because they are rarely seen as “meek” and “defenceless” the way white women are (Metropolitan Action Committee on Violence Against Women and Children, 2008). Clearly there is a problem within the system.

## **Measures of Justice**

### **Peace Keeping Measures**

Often, protection orders are put in place by the police as temporary or preliminary steps to avoid repeated abuse. They serve two main functions: to legally bind the abuser to refrain from behaviour set out in the order and to alert the police to the danger that such a person may represent. Such measures offer a more peaceful solution to the problem, and serve as a “warning” before more extreme measures are taken. It is primarily the responsibility of the police to enforce the conditions of the protection order, however the burden of complaint is on the abused (McGillivray & Comaskey, 1999). Moreover, most women feel as though protection orders do not actually protect—they serve more so as evidence so that police believe the woman. Moreover, many offenders knew how to circumvent the orders (McGillivray & Comaskey, 1999). For example, some Aboriginal women from Manitoba stated: “You have to have this restraining order

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<sup>89</sup> Again, mandatory police charging policies apply to non-Aboriginal women as well, and many of them will feel similar feelings of frustration with the system; however, what police deem to be ‘reasonable cause to believe abuse is taking place’ differs (Native Women’s Association of Canada, 1994), especially where abuse, alcohol and abuse, and nepotism are so present.

with you twenty-four hours a day for it to work. I did not know that. They can easily be torn up. Your partner can just take it, grab it, and rip it, and it's your word against theirs.” “It is really hard to use a non-molestation order or even a restraining order. Even though I know I have the law backing me up, it is still me that has to do the calling and deciding, and none of my partners have respected or obeyed these restraining orders.” (in McGillivray & Comaskey, 1999, p. 101). “He came to my home, yes, to my home, but he stayed in the vehicle, so he couldn't breach his order as he didn't have any contact with me...It was like he was taunting me...” (in McGillivray & Comaskey, 1999, p. 102). One woman explained:

He was in my home when I called them, and now they were giving me heck for having allowed him in the house. So I just told them it was not for them to judge whether or not he was in my house or not, that it was their job to charge him for being there...I don't know what happened with that. I haven't heard from them since. They said they were going to charge him for breaching the non-molestation order and that they would let me know when they caught him or arrested him. But I haven't heard anything since that time. (in McGillivray & Comaskey, 1999, p. 102).

Unfortunately, it seems as though this form of law enforcement is largely disrespected and circumvented. If a woman can still be forced to stay inside her house because of the fear involved with leaving, then she is not being protected from abuse.

### **Retributive Measures**

If and when charges end up being resolved in court, the experience, once again, is not favourable for many of the women. As we know, levels of Aboriginal incarceration are significantly higher than their non-Aboriginal Canadian counterparts (Green, 1998). This is likely because events that take place in courtrooms are often unfavourable for Aboriginal peoples (Green, 1998). Moreover, as many have argued, jail does not serve as

the best method for decreasing recidivism. For example, Chief Judge Lilles of the Yukon Territorial Court explained:

Jail has shown not to be effective for First Nation people. Every family in Kwanlin Dun [the Yukon] has members who have gone to jail. It carries no stigma and therefore is not a deterrent. Nor is it a “safe place” which encourages disclosure, openness, or healing. The power authority structures within the jail operate against “openness”. An elder noted: “Jail doesn’t help anyone. A lot of our people could have been healed a long time ago if it weren’t for jail. Jail hurts them more and then they come out really bitter. In jail all they learn is ‘hurt and bitter’.” (in Green, 1998, p. 18)

When going to jail loses its stigma, is clearly not proving to be rehabilitative and happens so often, it becomes ineffective. Many Aboriginal communities have recognized the ineffectiveness of sending individuals to jail and have turned to other options for justice. The sentencing circle is one of the most prominent methods of alternative justice and it is the most widely discussed within Aboriginal justice literature (Green, 1998; Goel, 2000).

### **Sentencing Circles**

According to Goel (2000), the sentencing circle is among one of the newer attempts to help heal the offender and his community, essentially bringing down recidivism in the process. This is an alternative to the traditional sentence hearing; the offender has already pleaded or has been found guilty, and this is therefore the next step in determining the “punishment” for the offender. In the past, justice practices amongst Aboriginal populations involved decision making that included the participation and consent of the community at large (Green, 1998). Behaviour was regulated by shame, ostracism, and compensation (including symbolic compensation) for the victim’s losses (Green, 1998). Conflicts were often mediated by the Elders within the community. Social control was used to deter crime through internal community pressure and sanction (Green, 1998). Today, the sentencing circle involves more familiar judicial players (such

as defense lawyers and psychologists), as well as other community members such as Elders, and the offender's and victim's family members. Other individuals that may be involved in the process include social workers or case workers, probation officers, and other rehabilitation experts (Goel, 2000). Justice Coordinator Mary Crnovich has explained: "The theory behind the circle is that everyone in the circle is of equal status. The circle is intended to promote equal access and equal exposure with everyone facing each other" (in Goel, 2000, p. 314). Discussion moves around the circle, with everyone taking turns and having equal say in the situation, until the group determines appropriate disposition—consensus is necessary for a final decision<sup>90</sup> (Goel, 2000). This is in line with Aboriginal beliefs that do not place as high a premium on individual responsibility, and do not address conflict in a direct and confrontational manner—emphasis is placed on reconciliation, the restoration of harmony, and the removal of greater underlying pressures that generate conflict (Goel, 2000). The Canadian government has accepted sentencing circles as an acceptable application of the Canadian Criminal Code, and provides funding for sentencing circle programs (Goel, 2000). Interestingly, some general guidelines for when sentencing circles would not be appropriate have emerged. These include:

- i) for purely punitive sanctions or where a term of incarceration in excess of two years is realistic;
- ii) where there have been frequent repeat offences of the offence is indictable;
- iii) where the attitude of the offender prohibits his/her involvement;
- iv) where there are no community sentencing options available to the circle;
- v) where the community is not prepared to be involved in the circle. (excerpt from Goel, 2000, p. 318)

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<sup>90</sup> It is important to note that the individual right of the accused are not compromised by the procedure; the role of the Crown and defense counsel still remain, open court is maintained, and written summaries or full recordings are filed (Goel, 2000).



It is also important that the individual being tried in the sentencing circle participate willingly in the process and have deep roots in the community where the sentencing circle is being held, amongst other things (Goel, 2000).

While such an approach seems to follow Aboriginal traditions and beliefs, in the case of intimate partner violence, many women are not happy with such an approach (Goel, 2000). In terms of the criteria for an offender being tried through a sentencing circle, it is important to realize that abusers are often “repeat offenders”—it often takes women an extended period of abuse before they report it (McGillvray & Comaskey, 1999), therefore the criteria of repeated offences is already not met. Moreover, the purpose of such sentencing circles is to allow a healing and restorative sentence for the offender—there is little attention paid to the needs or feelings of the victim. Justice Coordinator Mary Crnkovich notes after watching a sentencing circle in a domestic violence case:

...to suggest that [the victim's] attendance [for counselling] would keep the accused honest, demonstrates, in the author's view, the judge's misunderstanding of the life circumstances of this woman as a victim of violence. How could she speak out against the Mayor, the Chair of the Inuit Justice Task Force, and others in her community? Did the Judge really believe she would speak out, based on the history of this case to date? The victim's actions, or lack thereof during the circle, demonstrated the degree of fear and deference paid to her spouse. (in Goel, 2000, p. 321)

Studies (ex. The National Organization for Men Against Sexism, 2008) further highlight the necessity for blame not to be shared; it should rest squarely on the shoulders of the abuser (Goel, 2000). In the case of intimate partner violence, whether accredited equal status, all members of the circle are not of equal status—one member of the circle has

spent a period of time hurting another; as Goel (2000) states: “While the sentencing circle is designed to give the victim a voice, the abuse has already stolen whatever voice she had” (p. 323)<sup>91</sup>. One woman expressed her concerns with community-based sentencing options by explaining:

It’s too easy. It’s too easy for them. Because most abusers don’t realize what kind of pain they put their partners and kids through...I don’t mind him being sentenced by Aboriginals, but it’s just, like it’s too easy for them. Restitution, or going to counselling, community service—that’s just too easy for them. (in McGillivray & Comaskey, 1999, p. 127).

Green (1998) points out that women are participating less and less in sentencing circles, and receiving less support: a process that prioritizes the voice of the victim has essentially managed to shut her out. Some women do find the sentencing circle alternative to be acceptable and holistic, but often believe that justice is not being served by the circle. Just consequences through such community-based means are even more difficult to achieve in the discussion of intimate partner violence because many individuals within the community partake in such behaviour—therefore while punishable by law, it is often sanctioned by the community. This is the case especially when women fear speaking up or are threatened by others to keep quiet—as we have explored through family and community reactions, not a lot of people are willing to support the victim, and therefore the hearing can conclude without anyone representing the views of the abused.

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<sup>91</sup> I do not agree with Goel’s (2000) assumption that the victim is rendered powerless and voiceless by the abuse because everyone has the ability to effect change in their lives in one way or another—no one is ever rendered completely powerless or voiceless, although they may feel as though they are. However, it is important to recognize that these types of feelings may be experienced by the victim, rendering the sentencing circle a difficult place to be for the victim.

## **Improving Services**

Many individuals are dissatisfied with the way matters of justice are dealt with on reserves. Imai et al. (1993) suggest that there are many internal conflicts that could be dealt with within the community that are brought to the provincial and federal courts, because of a lack of means to deal with crime and conflict within the reserve. This does not imply that communities are not capable of dealing with conflict internally, but more so that the opportunity to build structures to do so have been limited. Some projects are underway to better suit the legal and justice needs of Aboriginal peoples. Native court workers' responsibilities include ensuring the Aboriginal defendant has legal counsel, providing information and support to the individual undergoing the court process, and act as a bridge between the Aboriginal defendant and the court process. They do not give legal advice, nor do they represent people in court (Imai et al., 1993). Community legal clinics provide legal advice and representation at no charge to people who cannot afford a lawyer. There are several clinics with expertise in the law and how it affects Aboriginal people (Imai et al., 1993). Moreover, section 718.2(e) of the Criminal Code of Canada states that judges should consider the circumstances of Aboriginal offenders (Borg, personal communication, November 12, 2010<sup>92</sup>). Thus, Gladue reports began to be included in some Aboriginal offenders cases. Gladue reports consider the unique systemic or background factors which have played a part in bringing the particular offender before the courts, and the types of sentencing procedures and sanctions which may be appropriate in the circumstances (Borg, personal communication, November 12, 2010). Gladue reports can be requested from offenders' lawyers (Borg, personal communication, November 12, 2010.). Resource centres, such as Friendship Centres, are

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<sup>92</sup> Darren Borg is the Gladue Services Worker at the Thunder Bay Friendship Centre.

good ways of accessing these and other services (Borg, personal communication, November 12, 2010). Aboriginal justices of the peace bring different perspective to the law, and can lead to interpretations of the law which may improve the quality of justice that Aboriginal people receive (Imai et al., 1993). Nishnawbe-Aski Legal Services Corporation deliver a wide range of law-related services, including public legal education and legal workers. They also conduct interpretation services, research, and make recommendations about reforming the law (Imai et al., 1993). Criminal justice pilot projects involve sentencing panels made up of community members (often elders), who conduct the trial and determine what the sentence should be. This information is then passed on to a judge who passes the sentence, based on the advice given (Imai et al., 1993). These are but some projects that are on their way to give more control to the communities. In the next section, women's reflections about current law enforcement measures will be seen. Readers should also keep in mind the involvement and opinions of community members, family members, and Band counsellors in understanding women's reflections. Such reflections may carry-forward to the current, more community-based, projects that are being established.

### **Women's Reflections about the Justice System**

Unfortunately, women are also not satisfied with the sentence that most abusers receive from the courts (McGillivray & Comaksey, 1999). Many men are often sentenced to short periods of time and then can come back into the community and continue to harass and abuse others. Moreover, women live in constant fear of the return of the abuser. Some women expressed: "Those guys got it so easy today, like some went to court and got a fine option, so they know it's an easy way out... They don't care." (in

McGillivray & Comaskey, 1999, p. 119); “Most cases you could have, they could half kill you and walk away with a slap on the wrist, basically. When they get out of jail, they’re just going to turn around and come looking for you, whether they got a restraining order or not.” (in McGillivray & Comaskey, 1999, p. 119). Others stated:

I find the court process is very, it is quite traumatizing, because it is hard to talk about your personal things in front of how many people are there...I felt really, when I was going to court with regards to charging my ex-husband, I felt very alienated and just, like, I felt I was in the way. I felt like I was just another number, another page. (in McGillivray & Comaskey, 1999, p. 108).

I feel that I am being victimized again, victimized by the system. From past experience, you have to tell your story to the police and then once again if the individual pleads not guilty. Then he has to go to a preliminary hearing, and then next is the final trial. I feel that I’m continually being victimized. And you get emotionally drained out. (in McGillivray & Comaskey, 1999, p. 108).

Women want to see justice, and this is currently not what the system is tailored to provide. Instead, even with initiatives such as mandatory police charging and sentencing circles, which are thought to protect women and give them more power within the justice system, women are still discriminated against, made to be *victimized again*. If projects are to be implemented that are to empower women, as well as protect them, their needs and desires must be taken into consideration.

## **Conclusion**

It is clear that Aboriginal women do not feel they are able to trust the courts for appropriate punishment and sentencing circles do not offer appropriate justice. Justice is not being served in these situations. Moreover, women are likely to find it difficult to report the violence at all—they are often mistreated by police, not taken seriously, or blamed for the violence. Reporting the violence to such authorities may also risk turning their lives upside down, forcing them to leave their communities, confront their abusers, increase their chances of being severely injured or killed by their abusers. Lastly,

reporting violence can lead to her children being taken away from her, and also being placed in a child welfare system that is not adequately funded or resourced to provide the necessary support and assistance which children and their families need. While some women have expressed satisfaction and positive experiences with police and the justice system, most are dissatisfied and feel further victimized by it (McGillivray & Comaskey, 1999). Obviously there is a flaw in the justice system, allowing justice to overlook Aboriginal women.

## **Chapter Seven: Conclusion**

This thesis aimed to understand Aboriginal women's experiences with intimate partner violence while they are living on a reserve. It has sought to highlight the structural limitations that were and are posed on Aboriginal peoples by the Canadian government, and how such limitations contribute to the experiences of Aboriginal women who have lived through intimate partner violence. Reserves are often isolated places where access to urban areas and much needed resources can be difficult. Moreover, Aboriginal women experience a variety of levels of oppression that directly and indirectly impact their health outcomes, including their experiences of abuse. These are not just added burdens in their lives, all of these factors affect every single part of how they live, and how they are treated by other Aboriginals (inside and outside the community), by non-Aboriginals, by medical professionals and nurses, by police (both Native and non-Native), by staff that work at shelters and by the Canadian government. Every single part of their lives is scrutinized and judged by others on all of these factors, creating a unique experience of intimate partner violence for them. This is not to say that all Aboriginal women are scrutinized on all these factors, nor is it implying that all Aboriginal women's experiences are the same—they are not. This statement, and in general this thesis, is demonstrating some of the ways in which Aboriginal women experience discrimination and violence. And, as the United Nations has made clear, this is a human rights' issue (Amnesty International, 2004).

### **Recapturing the Experience**

In answering the question of how Aboriginal women's experiences of intimate partner violence are shaped by their lives on the reserve and their access to resources, we

can see that they experience unique circumstances in each of the layers of their ecosystems. More specifically, this means that at the individual, interpersonal, community, institution/organizational, and society/policy levels of an Aboriginal woman's life, she is living unique circumstances that shape her experiences. They have had unique and specific experiences of oppression through colonization<sup>93</sup>, shaping the way they grew up and their current lives on their reserve; experiencing a lack of government support and access to basic needs and resources important for survival and well-being; a loss of status and power within their own home communities (Perrault & Proulx, 2000); and high rates of alcohol and substance abuse, low-employment, and low academic achievement (Brownridge, 2008). Moreover, families have broken down due to separation of generations and a shift in the role of women within the family, as well as by the high rates of Aboriginal children that are in the child welfare system in Canada. Recall that families, communities and, in some cases, whole tribes were destroyed through the process of colonization (Perrault & Proulx, 2000). Then, families' and communities' movement was restricted by being forced to settle on reserves, and children and families were separated through the institutionalization of Aboriginal children in residential schools and the child welfare system (Perrault & Proulx, 2000). Whole communities were uprooted and very little support has been given to help put the pieces together again. While high rates of abuse are prevalent within communities, and abuse tends to be more severe within Aboriginal populations, communities seldom show the support and assistance that women need to adequately cope with and respond to violence. Due to such isolation, lack of support, and rejection from their social support networks,

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<sup>93</sup> This is not to say that each of their experiences with colonization was the same—it was not. However, there were some experiences that affected most if not all Aboriginal individuals and women specifically.



women often feel alone and helpless, and may begin to internalize and blame themselves for the abuse. While such stigma and reactions may be present within all families and communities experiencing violence, it is more prevalent in Aboriginal communities that prefer non-confrontation and peace (even if this means denial), and that often condone the violence and participate in the violence themselves. Moreover, family unity is a priority for many Aboriginal families, and beliefs exist that disclosures of abuse and actions taken to resolve it may jeopardize this unity—therefore, inaction and silencing the victim are often the coping measures of choice<sup>94</sup>. Band councils are largely male dominated<sup>95</sup>, and therefore do not always take women’s needs into consideration. Moreover, Band counsellors may turn a blind-eye or victim-blame (as many community members do), making the situation very difficult for women. Often, women need the Band council’s approval to receive funding for services, which means that women may be put in a compromising position and may feel a lack of privacy in matters of intimate partner violence. This system can prove to be extremely ineffective, especially if family members or friends of the abuser (or even the abuser himself) are members of the Band council. When women seek assistance outside the community, they are met with inadequate services, pressure to make decisions they are not ready to or do not want to make, and cultural insensitivity. Many women feel vulnerable when seeking refuge at shelters, and negative experiences when using these shelters may compound the negative feelings that a woman may be feeling at the time of abuse. Native and non-Native police,

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<sup>94</sup> Moreover, families with a history of violence and maladaptive behaviours are more likely to inadequately deal with disclosures of violence (e.g., not taking action or victim-blaming). As we know, many Aboriginal families fall into this category, making more likely that families will fail to support the victim.

<sup>95</sup> Historically, women were not allowed to be members of the Band council. Although women are now allowed to run for positions on the Band council, these governing bodies are still largely male-dominated.

those who are supposed to keep individuals safe and free from crime, do not seem to deal with intimate partner violence adequately—they often fail to respond in a timely manner, they are thought to be insensitive to the needs of women, and they sometimes intrude undesirably. Moreover, measures of justice such as peace bonds are thought to be ineffective in keeping women safe. And lastly, many Aboriginal women feel as though both retributive and restorative measures for justice do not sufficiently keep women safe, nor do they provide appropriate consequences to the abuser. While more community-based approaches are being used (such as sentencing circles), women are not satisfied with their resolutions.

All of these factors, whether directly or indirectly, are shaped and influenced by Aboriginal women's interactions with colonization. It is the impacts of colonization that have created isolation, poverty, societal rejection and racism, shifts in religious and community beliefs, and stress (leading to problems such as alcohol and substance abuse). Again, while it is not helpful to assign blame to colonization, it is important to understand the root of many of the problems that now face Aboriginal women, and for the Canadian government to take some accountability for the current situation.

It is through a social ecological framework, while keeping in mind the various forms of oppression that Aboriginal women face (through a lens of intersectionality), that we can clearly see these multiple layers of oppression, thus more accurately understand unique experiences of intimate partner violence. While many feelings of shame, internalization and self-blame are not unique to Aboriginal women, the environment in which many Aboriginal women grew up and the people with which they are surrounded

have created a distinct setting for these feelings to foster<sup>96</sup>. Similarly, while many women may feel frustrated by the support and assistance provided by their friends and family, as well as by service providers and law enforcement officials, the exceptional and multifaceted way in which Aboriginal people are discriminated against creates an isolated experience of frustration and hopelessness. Violence against Aboriginal women is not simply a form of sexist oppression, nor is it simply a form of racial discrimination, nor is it only rooted in poverty—Aboriginal women are more likely to face oppression under all three of these fronts, thus creating a more unique circumstance and experience.

Moreover, as explored through the social determinants of health, Aboriginal women are at risk of having less healthy lives not only because of the violence, but because of all of their current living conditions—being under educated, low levels of employment, food insecurity, inadequate housing, low income, social exclusion, and more. These are tied in with the race, class and gender levels of discrimination, in that Aboriginal women are discriminated against at all of these levels. As can also now be understood, these circumstances are necessarily associated with Aboriginal people's history of colonization and how this has led to the living conditions of today. Again, looking at Aboriginal women's lives from a social ecological perspective allows us to understand their lives on multiple levels, thus illustrating the many forms of discrimination that they experience.

These, along with the many other social, economic and political disadvantages faced by Aboriginal women, create a mosaic of oppression. The problem of intimate

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<sup>96</sup> It is important to note that not all Aboriginal women have experienced the same kinds of oppression, nor do all Aboriginal women experience and internalize situations in the same manner. Not everyone grew up in the same environments and not everyone felt the impacts of colonialism or gender-based violence; however, many Aboriginal women have been affected by these circumstances and thus these play a large role in how they affect and are affected by the multiple layers of their ecosystems.

partner violence will not be rectified by simply educating individuals about violence prevention—there are many contributing factors to the violence and the oppression faced by Aboriginal women. Each of these contributes to and creates the experience of the violence faced by Aboriginal women.

The Canadian government made a commitment to provide a certain standard of living to all Canadians, and specifically to Aboriginal peoples (through the signing of treaties and the agreements in the Indian Act). The fact that the Canadian government is providing substandard services to Aboriginal populations, that it is staying mainly silent on the situations surrounding violence and racism, that it has not ratified the United Nations' Declaration on the Rights of Indigenous Peoples<sup>97</sup> (United Nations, 2008) demonstrates the Canadian government's lack of concern over its Aboriginal populations. Such disregard can be interpreted as an act of structural violence, wherein "a host of offensives against human dignity: extreme and relative poverty, social inequalities ranging from racism to gender inequality, and the more spectacular forms of violence that are uncontestedly human rights abuses, some of them punishment for efforts to escape structural violence" (Farmer, 2003, in Fiske, 2006, p. 249) have taken place. The Canadian government is not fulfilling its promises and must allow for the rectification of the complex problems that have arisen because of its actions (or lack thereof).

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<sup>97</sup> The Declaration advocates that "indigenous peoples are entitled to maintain and develop their distinct cultural identity, their spirituality, their language, and their traditional ways of life; that they hold the right to political, economic and social self-determination, including a wide range of autonomy; and that they have a right to the lands they have traditionally owned or otherwise occupied and used" (United Nations, 2008, para. 25).

## Recommendations

Although this problem is complex and convoluted, by addressing the many layers involved in Aboriginal women's experiences of intimate partner violence, the problem can slowly be dealt with.

Many problems are rooted in poverty. While the federal government has promised to “take care” of Aboriginal peoples, it is not doing so acceptably; much of the housing on reserves is insufficient and houses are deteriorating, water is often not potable, and there is a lack of schooling and job opportunities. Moreover, social isolation and boredom are contributing factors to alcohol and substance abuse (Bright Eye Counselling, 2007)—and these contribute to high levels of violence. Better infrastructure and opportunities for independence from the government should be offered so that Aboriginal communities can thrive.

Self-government has been promised to Aboriginal communities and is seen as a universal right (Henderson, 2010)—however the Canadian government has failed to carry through with its promises. These self-governments are encouraged to promote “good governance”, which Indian and Northern Affairs Canada (2010) describes as participatory, accountable, responsive, efficient and effective, transparent, and that operates by the rule of law<sup>98</sup>. According to Frank (1992), Aboriginal people have continually reported problems with government systems, programs and general policies

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<sup>98</sup> While on the surface, this description of self-government may seem like a step in the right direction, it seems as though this is very similar to the relationship Band councils have with the government already—the rule of law that Aboriginal self-governments must operate within are not laws set by the communities but by the federal government. The accountability to the federal government, and the fact that the federal government and the Aboriginal communities *collaborate* to create the self-government agreements means that the federal government still has a significant amount of influence on these self-governments—essentially, these self-governments, unless given complete independence from the federal government, are going to be tokenistic acknowledgements to self-government instead of real self-government.

not being flexible enough to allow communities to plan and implement their own approaches to solutions. They would like methods for change to be community driven instead of government driven (Frank, 1992)—unfortunately, the Canadian government will not let this happen. Without self-governance, Aboriginal peoples will always be hidden in the shadow of the Canadian government<sup>99</sup>. Self-government is necessary so that Aboriginal peoples may effect change within their own lives and not be dependent on a governing body that does not take its well-being seriously.

Aboriginal-specific programming should be offered to help people cope with drug and alcohol abuse, which are large contributing factors to violent behaviour (Brownridge, 2003). Moreover, community resources teaching parenting skills, anger and stress management, financial budgeting, and personal development should be implemented. These programs should be community-based and Aboriginal-specific. According to Health Canada (1997), “there has been increased recognition of the need to ensure that resource materials, approaches to training and the organization of services are culturally appropriate to Aboriginal people. Cultural appropriateness<sup>100</sup> is now accepted as essential to creating effective services for Aboriginal individuals, families and communities” (p. 12). Culture is often reflected in the organizations and institutions of the community,

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<sup>99</sup> There is a fear that allowing Aboriginal self-government may restrict individual choices to use mainstream services (they will be forced to use the services offered or sanctioned by the Band council; Frank, 1992), however others have argued that this would not be the case—self-government would increase women’s choices (Frank, 1992). There is also a fear that women’s voices would be masked by the largely male-dominated Band councils that would be the governing body of the community (Frank, 1992). While there is no predicting the future of the success of self-governments, women are beginning to be involved within Band councils and therefore one would hope that this trend would continue, whether self-governing rights were granted.

<sup>100</sup> According to Health Canada (1997), “culture” refers to “the collective characteristics of a community’s way of life: its perceptions and values, the beliefs and customs—both ritualistic and informal—that flow from them, and the language that expresses them. Culture refers not only to the collective “knowledge” and customs of a group but also to the way that group passes these attribute on from generation to generation” (p. 12).

therefore the better the organizations reflect the culture of the community, the better the people within the community are served by the organization (Health Canada, 1997). This issue of culture, however, is rendered complex by the fact that many Aboriginal individuals feel a loss of cultural identity—because of the generations of intolerance for their culture, traditions, beliefs and values. Thus, to revert back to *old* ways is not a straightforward path. Moreover, prior to colonization, many Aboriginal cultures existed—while this may still be the case, there has been an obvious decrease in cultural diversity among Aboriginal populations, which can be seen through loss of language and more. According to Health Canada (1997), staffing organizations with Aboriginal peoples is only part of the battle. The services should also be designed by Aboriginal people to make them work as part of the culture and to fit within the belief system of the community. For a list of culturally appropriate practices, please see Appendix F. Such recommendations should not only be taken into consideration for programming regarding intimate partner violence, but all programming offered—people need to relate to the programs, understand them and be understood by them—this is a criteria for success. Moreover, if the community is involved in the development of programming, it is likely that they will also take ownership for this programming, perhaps even decreasing the stigma involved with participating in such programs.

More information and funding also need to be made available specifically for women's shelters. Unfortunately, instead of increasing funding for such services, the government has cut funding to organizations such as the Aboriginal Healing Foundation (Canadian Broadcasting Corporation News, 2010). Having access to a safe place is essential for women's safety, and also contributes to their healing process; whether

programming proved to be helpful, women found that simply having a place to get away from the violence was beneficial (Urbanoski, 2001). Women also faced many barriers getting access to shelters, such as transportation, leaving versus taking her children, etc. Shelters, Band councils, and the government should be aware of these barriers and offer easier means of accessing these services. A list of best practices for shelters is offered in Appendix G.

In terms of services needed on reserves, there is an obvious lack of available resources that community members could rely on for support. Aboriginal women who participated in a study in Manitoba responded to the question “would you list some things you would like to see that could help people in the community deal with violence?” by suggesting youth groups, crisis centres, healing circles, and a regional healing circle, among other things (Thomlinson, Erickson, & Cook, 2000). Many of the women expressed that the responsibility for change lies in all community members, Band councils, and local health boards (Thomlinson et al., 2000). Moreover, these women felt that community leaders and professionals needed to seek their own healing from violence and abuse before they could be effective role models in the communities (Thomlinson et al., 2000). When developing programming and working within communities to effect change (which Aboriginal see as an important first step; Thomlinson et al., 2000), what services women find most helpful should be of priority. Moreover, women have shown a concern about the potential ineffectiveness of Band counsellors and professionals that need to go through their own healing—this should be addressed, otherwise all further steps may be less effective.



There are also deficiencies in the policing system in Aboriginal communities. The Native Women's Association of Canada (1994) made some recommendations for how the police system can be improved in isolated Aboriginal communities (an extensive list of these recommendations is available in Appendix H). Of most importance is having an adequate number of police in Aboriginal communities—having police that are located an hour or more outside of the community are not able to effectively respond to cases of violence or emergencies. Other recommendations are largely centred around cultural and gender sensitivity training, ensuring the safety of women, and charging abusers appropriately<sup>101</sup>.

Within the justice system, we have seen that a retributive means of justice does not seem to be working effectively for offenders. However, restorative methods (such as sentencing circles) may jeopardize the safety of the victim, may enforce community norms of the acceptability of intimate partner violence, and it may put pressure on the victim to conform to community, family and/or abuser beliefs and desires. McGillivray and Comaskey (2000) further state that

despite pressure to move away from the justice system towards First Nations community-based alternatives, participants would not accept diversion and alternative sentencing unless it does what jail is now seen as doing, however unsuccessfully: punish, actually and symbolically; and protect, at least enough so that victims can get their lives back on track (p. 52).

Daly and Stubbs (2006) suggest that if restorative justice methods are going to be incorporated, “they will require significant reconceptualization of what is, ultimately, a white justice model” (p. 21). They go on to say that such methods cannot be prescribed or

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<sup>101</sup> While these recommendations are quite dated, more current literature demonstrates that many of the concerns illustrated by the Native Women's Association Canada in 1994 remain today (McGillivray & Comaskey, 1999).

adopted formulaically—rather, they need to be explored and redefined to meet Aboriginal principles of self-determination, and with the interest of Aboriginal women (Daly & Stubbs, 2006). One model that has shown to be effective is the Hollow Water First Nation (located in north-eastern Manitoba) Community Holistic Circle Healing (CHCH; Public Safety Canada, 2010). The CHCH is based on a sentencing/healing circle model, and includes the victims, the victimizers, and their respective families, offering a spiritual, physical, emotional and intellectual balance that benefits the entire Hollow Water community (Public Safety Canada, 2010). The process includes 13 steps (see Appendix I), and offers an opportunity for individuals affected by the violence to heal individually, and with the others being affected by the violence. Systems that are effective and community-based should be used as models for other communities to develop their own systems—however, it is crucial for women to feel as though justice has been served. The current sentencing circle model seldom does this (McGillivray and Comaskey, 2000).

The OCAP principles that allow Aboriginal peoples to conduct and own their research should be respected. As it currently stands, much of the data collected by the Canadian government does not respect these principles (Assembly of First Nations, n.d.), and, as such, is not an accurate reflection of Aboriginal communities. Moreover, by not respecting these principles, the Canadian government is undermining the autonomy and independence of Aboriginal peoples. This is not acceptable, and new, collaborative research methods must be sought.

While not a focus of this study<sup>102</sup>, it is crucial to acknowledge that many Aboriginal women are working within their communities and across the nation to overcome issues of violence, poverty and discrimination. One such organization is the Native Women's Association of Canada. Their goals include "preserving Aboriginal culture, achieving equal opportunity for Aboriginal women, and having a role in shaping legislation relevant to Aboriginal women" (Native Women's Association, n.d., n.p.). Furthermore, they aim to "enhance, promote, and foster the social, economic, cultural and political well-being of First Nations and Métis women within First Nation, Métis and Canadian societies" (Native Women's Association, n.d., n.p.). The Métis Women's Circle (Leclair, Nicholson & Hartley, 2003), the Ontario Native Women's Association (Ontario Native Women's Association, 2009), and many other organizations offer very similar goals to that of the Native Women's Association of Canada. There are also less formal structures of change within communities, and outside of them (Maracle, 2003). These individuals, these agents of change, should be looked to for support and suggestion. This is important for two reasons: 1) Aboriginal women are not passively being abused and oppressed, they are rising up to the challenge and effecting change within their homes, communities, regions and within the country; 2) we have learned that programming that is not community-based is seldom successful, and therefore available

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<sup>102</sup> Aboriginal women's initiatives would have fit within multiple layers of her ecosystem. Including the community level, the institutional organizational level, and the societal/policy level (as it is these institutions that are currently advocating for change within policies and government funding). However, I chose not to widely examine these initiatives as they widely vary in terms of size, goals, populations served, etc. This in itself could have served as a study and to attempt to address the dynamics of these organizations within this paper would have not done justice to them. Thus, I am simply including information about them so that readers can understand some of the current initiatives. Should readers be more interested in these organizations, much of their information is readily available on the internet.

bodies of knowledge should be used, and should also be allowed, to create programming that will be useful to individuals living in Aboriginal communities.

There are steps that can be taken to improve the situation of Aboriginal women experiencing intimate partner violence, and these steps should be considered in the development of future programs and policies for Aboriginal communities. A holistic perspective, looking at every layer of a woman's ecosystem and with an understanding of the multiple ways in which she can experience oppression, needs to be taken in order to completely understand how her community and her circumstances affect her life.

## Appendix A

The social determinants of health have four criteria:

- They all must be important to Canadians
- They must be understandable to Canadians
- They must have clear policy relevance to Canadian decision makers, as well as citizens
- They must be timely and relevant

It is using these criteria that the 12 social determinants of health were established. They are:

- Aboriginal status: this represents the interaction between public policy, culture, as well as the mechanisms by which systematic exclusion from participation in Canadian life can adversely affect one's health
- Early life: one's earliest years of development have a large impact on their health and well-being for the rest of their lives, thus intersecting with all other social determinants of health
- Education: one's level of education and academic achievement is necessarily related to the kind of lifestyle they live, as well as their self-worth
- Employment and working conditions: working in a safe and enjoyable working environment positively affects one's well-being
- Food security: having adequate and appropriate access to food is linked to one's health and well-being

- Gender: the way in which the meaning of gender is constructed within Canadian society is in itself an important social determinant of health, and also interacts with all other social determinants of health
- Health care services: it is believed that a well-organized and rationalized health care system could be an important social determinant of health
- Housing: adequate housing not only affects levels of stress, but bad housing conditions can adversely affect one's health (e.g., through mould contamination and limited access to potable water)
- Income and its distribution: not only is having a secure income a social determinant of health, but the income gap within a community also affects health and well-being (i.e., the smaller the gap, the better the health outcomes overall)
- Social safety net: ensuring individuals do not fall below a certain level of poverty by offering social and welfare services
- Social exclusion: being socially excluded is related to inadequate access to resources and may involve feelings of rejection or loss of identity, thus adversely affecting one's well-being
- Unemployment and employment security: job insecurity can lead to high levels of stress, as can unemployment. Stress is necessarily related to health outcomes

(Raphael, 2008)

## Appendix B



Retrieved from Nishnawbe Aski Nation, 2010

## Appendix C

Services Listed	No Response	Not Available	Available	Degree of Helpfulness: Not Much	Degree of Helpfulness: Somewhat	Degree of Helpfulness: Most Helpful
Family/Prevention Worker	30 %	11 %	59 %	21 %	32 %	36 %
Crisis Counsellor	45 %	21 %	34 %	19 %	38 %	25 %
NNADAP	34 %	9 %	57 %	26 %	32 %	30 %
CHR/Referral Clerk	35 %	10 %	90 %	18 %	61 %	21 %
Priest/Minister	41 %	6 %	53 %	24 %	48 %	16 %
Mental Health Worker	47 %	13 %	40 %		53 %	26 %
Chief	32 %	2 %	66 %	42 %	35 %	16 %
Band Counsellor	34 %	9 %	64 %	50 %	30 %	17 %
Children's Aid Worker	36 %	11 %	55 %	19 %	35 %	31 %
Education Counsellor	38 %		51 %	63 %	13 %	8 %
Other Services Mentioned:						
Police	94 %		6 %	33 %		66 %
AA	96 %		4 %	50 %		50 %

Taken from Ontario Native Women's Association, 1989, p. 11

In their survey regarding the availability of services on reserves, the Ontario Native Women's Association (1989) asked specifically about access to:



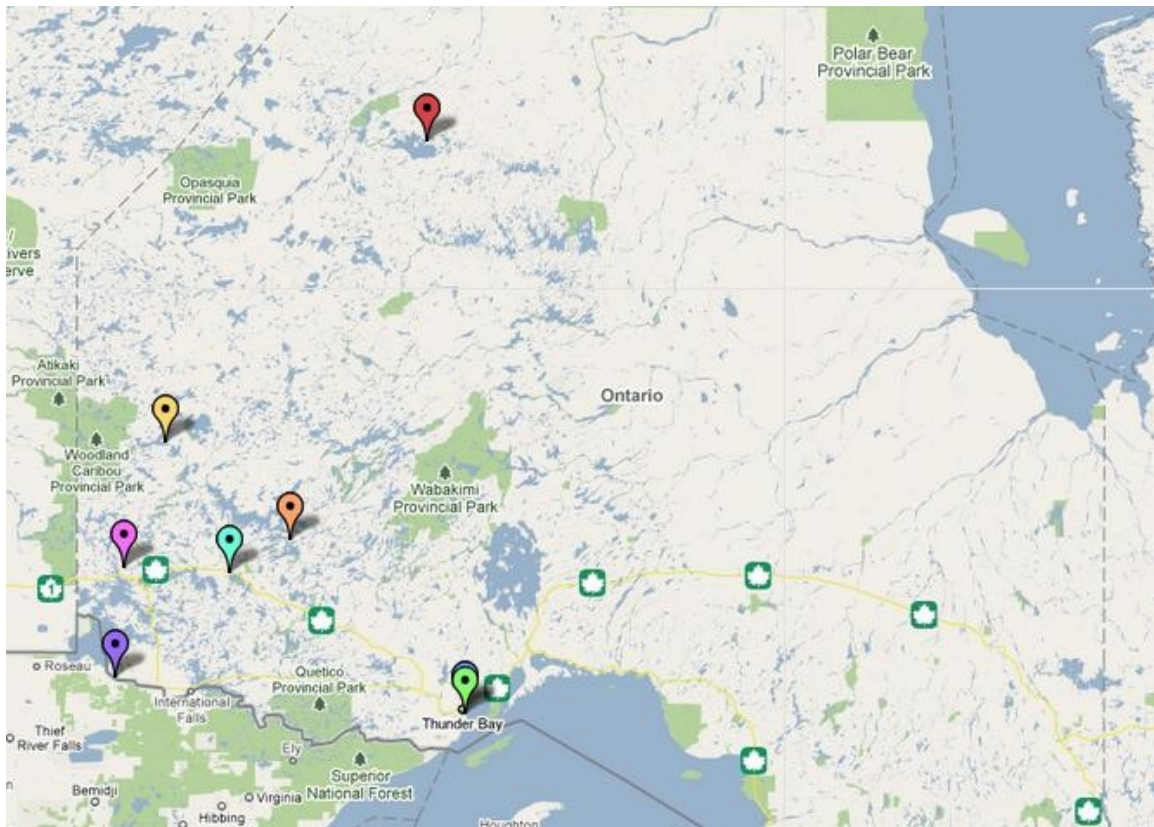
- ↪ a family/prevention worker (a worker that aims to reduce family violence and create a more secure family environment for children on the reserve; Indian and Northern Affairs Canada, 2010);
- ↪ a crisis counsellor (a short-term counsellor to attend to immediate causes of stress; Tidwell, 1992);
- ↪ National Native Alcohol and Drug Abuse Program (NNADAP; aimed at reducing high levels of alcohol, drug and solvent abuse in on-reserve populations; Health Canada, 2006);
- ↪ community health representative (CHR)/referral clerk (provides support to clients and families through clinical and home visits, referrals, medical transport, etc.; Naandwegamik Health Centre, n.d.);
- ↪ a priest and/or minister;
- ↪ a mental health worker;
- ↪ a Chief;
- ↪ a Band counsellor (Band political representative);
- ↪ children's aid worker (emphasize well-being and protection of children; Ontario Association of Children's Aid Societies, 2010);
- ↪ and an education counsellor (guide and support Native students in order to help them achieve their goals; Ontario Native Education Counselling Association, 2010).





Furthermore, people listed police and Alcoholics Anonymous (AA) as available services on some reserves.

While not all of these serve directly as support to women experiencing abuse, we

now know that the causes of abuse, and the means with which women cope with abuse, vary—these services can support women experiencing abuse in a variety of ways.

## Appendix D



Title	Name/ID	Address	Latitude	Longitude
 Faye Peterson Transition House		Thunder Bay, ON P7B 6T7	48° 24' 28" N	89° 15' 17" W
 Beedigen Inc.		100 Anemki Dr Ste 103, Thunder Bay,	48° 21' 12" N	89° 15' 45" W
 First Step Women's Shelter		Sioux Lookout, ON P8T 1B8	50° 5' 39" N	91° 55' 5" W
 Women's Shelter, Saakaate House		Kenora, ON P9N 3X1	49° 49' 39" N	94° 28' 5" W
 Rainy River District Women's Shelter		Rainy River, ON	48° 43' 20" N	94° 33' 40" W
 Hoshizaki House		Dryden, Ontario	49° 46' 55" N	92° 50' 15" W
 Kitchenuhmaykoosib Equaygamik		Big Trout Lake, Ontario	53° 49' 8" N	89° 50' 6" W
 New Starts for Women Inc.		13 Birch Street, Red Lake, ON	51° 1' 26" N	93° 49' 28" W

## Appendix E

The following questions were sent to 8 shelters (see Appendix D):

- Can any woman come to the shelter or does she need to be from a specific area?
- How many beds are available?
- What does the facility provide? (i.e., food, emergency clothes, etc.)
- How long can women stay?
- Are women turned away because of insufficient resources? Are they referred to another organization?
- How do women come to the shelter? Is transportation from their reserve free? And what about from the airport to the shelter?
- Are there transition workers? What is their primary role?
- What services are available for women who want to return to their communities?
- Is the facility Aboriginal-specific? What does that mean?
- Are counsellors Aboriginal?
- Can non-Aboriginal women stay at the shelter also?

Of these 8 shelters, 5 shelters replied to the email (Faye Peterson Transition House; Beendigen Inc.; First Step Women's Shelter; Rainy River District Women's Shelter of Hope; and Women's Shelter, Saakaate House). The other 3 shelters were subsequently contacted with no success (and also did not have websites, thus no information could be gathered).

Essentially, all of the shelters has "catchment areas", meaning specific areas that they serve. Faye Peterson and Beendigen accept women from anywhere, while First Step,

Rainy River and Saakaate House had specific areas that they served (although they all stated that a woman in crisis would not be turned away).

Moreover, all of the shelters had specific and limited amounts of time for which a woman could stay. Time limits ranged across shelters, allowing women to stay from 6 to 8 weeks. However, all shelters made it clear that under extreme circumstances, women were able to extend their stay for as long as necessary (and acceptable).

Shelters ranged in number of beds available (from 10 to 25 beds), and were usually at full capacity. Women, however, will not be turned away in time of crisis—even if the shelter is at full capacity. All the shelters will accommodate individuals in need in whatever way possible, whether this be referring them to nearby shelters, or having them sleep on sofas, sleeping bags, etc.

All of the shelters provided food, clothes, and toiletries. Most shelters had individuals, whether they were called “transition workers” varied, helping women create new lives for themselves. This included emergency planning, skills development, and finding a new place to live. None of the shelters offered services or explicit support for women who wanted to return to their communities—responsibility for this was usually assigned to the communities. Interestingly, all of the shelters are aware of the limited access to resources within communities. This is a clear gap in service provision and reinforces the idea that the set of options available for women are limited.

Most of the shelters do not provide transportation from reserves (this is left to the responsibility of the community, which, as we know, can cause problems for women who

want to flee). Transportation from airports, homes, and other nearby locations are sometimes provided. Shelters also rely on police to help bring women who are at risk in their homes.

Aboriginal programming was not specifically offered at any of these shelters; however all were made to be culturally sensitive. Beendigen offers more Aboriginal culturally-sensitive programming—thus women who request such services are often referred to Beendigen. All of the shelters had at least 2 Aboriginal counsellors, therefore one would hope that Aboriginal women feel more comfortable in such environments. None of the shelters were exclusively for Aboriginal women (although for some, up to 95% of women who came in were Aboriginal).

Considering that these shelters can accommodate up to 25 individuals, and there are only 8 of them, it is quite easy to see how this area is under serviced. Moreover, we know that rates of women abuse (whether by an intimate partner, family member, or someone else) are high. Women need to be able to go somewhere to seek refuge, and should be able to be safe while there. The shelters all seemed accommodating to meeting women's needs; however when there is not enough space to allow everyone who needs the service to access it, accommodating needs is not enough.

## Appendix F

Program Characteristics that Reflect Cultural Appropriateness	Resulting Practices
Valuing of Aboriginal tradition and culture	<ul style="list-style-type: none"> <li>• Resources, approaches and the organization of the services themselves are presented in a way that is deemed by the community to be compatible with Aboriginal culture</li> </ul>
Recognition of the importance of ritual and ceremony	<ul style="list-style-type: none"> <li>• Appropriate use of rituals and ceremonies within programs</li> </ul>
Valuing the wisdom of those Elders who understand the dynamics of family violence, and a recognition of their role as important carriers of knowledge	<ul style="list-style-type: none"> <li>• Involvement of such Elders in program planning and implementation</li> </ul>
Strong sense of community and shared responsibility	<ul style="list-style-type: none"> <li>• An attitude toward privacy and confidentiality, in the context of service delivery, that is different from that found in mainstream services</li> <li>• Involvement of community in the initial awareness-raising process</li> <li>• Community-wide commitment to healing as a community</li> <li>• Community effort toward healing both the abuser and victim at the same time</li> <li>• Effort to keep abuser in the community while protecting the victims(s)/survivor(s)<sup>103</sup></li> <li>• Support for and connection with abusers who have been convicted, given prison sentences and then been taken out of the community, as well as children who are removed from it</li> </ul>
An emphasis on connectedness (that is, to the land, the family, extended family, clan, family of spouse)—resulting in a view of the individual in context	<ul style="list-style-type: none"> <li>• A progression through individually centred programs to those that are conjoint or group or community centred</li> <li>• Connection of concurrent programs (for example, a program for batterers one for survivors and one for children)</li> <li>• Recognition of the need to deal with related issues (for example, drug and alcohol abuse and co-dependency)</li> <li>• Teaching of practical life skills together with more psycho-social therapeutic interventions</li> <li>• Recognition of the need to deal simultaneously with long-</li> </ul>

<sup>103</sup> While keeping the abuser within the community is important, safety of the abused should be the priority. Therefore, unless safe places are available within the community and safety plans are established for the victim, the abuser should be kept away from the victim.

	term community education issues, especially the education of children
An objective of restoring balance	<ul style="list-style-type: none"> <li>• The development of related programming that is positive and life enhancing (for example, family recreation in support of therapy)</li> </ul>
Placing value on nurturing and mutually respectful relationships	<ul style="list-style-type: none"> <li>• A focus on rebuilding relationships</li> <li>• A recognition of the loss of the traditional male role and unfortunate emergence of a role based on pervasive male dominance</li> <li>• A recognition of shame on the part of both the abuser and the victim</li> <li>• An importance placed on networking among staff of difference programs, even over long distances</li> <li>• A collaboration between Aboriginal political leadership and service providers</li> </ul>
An honouring of the central place of women	<ul style="list-style-type: none"> <li>• A recognition that the role and position of women in Aboriginal communities is changing</li> <li>• A concern for the equality of women</li> <li>• Recognition of the need for women to be central to the decision-making process for program design and delivery</li> </ul>
Acceptance of and respect for the client as a whole person	<ul style="list-style-type: none"> <li>• Flexible rules and individualized programming where required</li> <li>• Acceptance of staff-client personal relationships that are supportive to therapeutic intervention (within an understanding of social work ethics)</li> </ul>
A sense of equality between service provider and service recipient	<ul style="list-style-type: none"> <li>• Client direction and pacing of program</li> <li>• Importance placed on storytelling as part of therapeutic programming</li> <li>• Staff attendance at related program events</li> <li>• Predominance of staff of Aboriginal ancestry</li> <li>• Use of simple, everyday, jargon-free language</li> <li>• Use of resource material (posters, pamphlets, etc.) that depict Aboriginal people or symbols</li> <li>• Use of Aboriginal language</li> <li>• Staff-client relationships characterized by openness and informality</li> </ul>
A central attitude of caring	<ul style="list-style-type: none"> <li>• A recognition of the importance of worker wellness and self-care</li> <li>• A requirement for healthy trained staff (that is, people committed to becoming healthy)</li> <li>• A focus on support programs and healing strategies for the helper</li> <li>• Programming that breaks down individual isolations and promotes sharing</li> <li>• Limited and appropriate self-disclosure of personal</li> </ul>



	experience by staff <sup>104</sup>
A preference for forgiveness rather than judgement and punishment	<ul style="list-style-type: none"> <li>• A tendency to provide time and resources to all members of the family to consider the possibility of forgiveness of the abuser<sup>105</sup></li> <li>• An acceptance of personal responsibility by the abuse as a starting point</li> <li>• A recognition of Aboriginal mechanisms for achieving justice (for example, sentencing circles)</li> <li>• A recognition of the potential of such justice system mechanisms as the first part of a therapeutic intervention for the abuser</li> </ul>
A holistic connection of body-mind-spirit	<ul style="list-style-type: none"> <li>• Program management that values client process as much as staff-defined results</li> <li>• A focus on healing at all levels: individual, family, community, global</li> <li>• A view of program development as unfolding</li> <li>• Use of a range of programming, including art therapy</li> <li>• Creation of opportunities for grief, anger and acceptance of the need for clientele to go through stages of “denouncing, announcing and going beyond”</li> <li>• Understanding of long-term grieving issues</li> <li>• Use of the medicine wheel and similar symbols of holistic approaches both within programs and among different programs</li> </ul>

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<sup>104</sup> Many service providers are survivors of abuse and are therefore also on a healing journey. Staff should be encouraged to share personal stories as long as they are thought to be beneficial to the healing journey of the women seeking support (Health Canada, 2007).

<sup>105</sup> Forgiveness of the abuser should not minimize the need for accountability on the abuser’s part. This forgiveness should not be pressured on to the abused, and the abuser cannot expect the relationship between the abused and the abuser to return to what it originally was (although it may, depending on what is desired by the woman; Health Canada, 2007).

## Appendix G

### A List of Best Practices for Aboriginal Shelters (National Aboriginal Circle Against Family Violence, 2006, excerpts from pages 23-37)

#### STAFF

- Shelter directors are vital to the successful delivery of services and programs offered within their shelters; they must be uniquely suited to their jobs. Some essential characteristics are:
  - Creativity in procuring funding and fund-raising;
  - Well-versed in “thinking outside the box”;
  - Willing and able to raise the profile of the shelter within the community;
  - Assertive and aggressive when necessary;
  - Not easily intimidated;
  - Able to deal effectively with constant stress;
  - A committed team builder;
  - Have strong communication skills;
  - Adventurous, but sensible — not afraid of trying innovative solutions;
  - Know how “the system” works — how provincial, territorial, federal and municipal service agencies work, especially for shelters for Aboriginal women, and how they differ from those for non-Aboriginal people;
  - Able to accomplish many tasks — supervising staff, marketing services, overseeing administration, able and willing to work at all levels of employment within the shelter, etc.;
  - Empathetic and understanding of victims of family violence;
  - Understanding of historical changes that ushered in the status quo of Aboriginal family violence;
  - Able to understand the various cultural stories of their clients (clients from diverse indigenous cultures often express life realities with their own stories);
  - Be a leader — provide structure and establish shelter policy; and
  - Able to represent the programs and perspective of the shelter to outside agencies, organizations and the general public.
- Take special efforts to hire a qualified, knowledgeable (particularly about the shelter’s operation) and competent administrative assistant.
- Ensure that staff members understand their responsibilities of assessing the situation at the time of initial contact with a client and have the skills to determine the appropriate actions to be taken.
- Staff ought to approach the initial contact with the client with caution. Do not overwhelm her with unnecessary or inappropriate information at this time, while recognizing her need for immediate help. Later on, staff may present the options that are available to her.
- Some shelters under Band management are required to submit to mandatory random drug testing (although this is seen by some as a barrier) for all staff and clients.

- Confidentiality is a very important part of shelter life; ensure that staff and volunteers are trained in how to maintain confidentiality at all stages of providing services and programs.
- Shelters must be client-centered and work only with the agencies that directly involve the client; this also helps to maintain confidentiality.
- All staff must comprehend the meaning of a client-centered shelter, and know how to achieve and maintain this on an individual level, as well as on a team level.
- An alternative to firing staff persons who “don’t quite work out” is to help them to define boundaries as to what ought to be done and what should not be done while on the job. They need to know what not to do, as well as what they should do.
- The shelter needs a strong staff team so clients cannot take advantage of them and the shelter.
- Individual staff persons need to be aware of the “rescue syndrome”; they can help avoid this by reminding clients that they are strong and that, in most circumstances, can look after themselves.
- Staff must be allowed some flexibility when clients break house rules (enforcement of guidelines). While emphasizing client accountability, staff need to understand that all people make mistakes and that sometimes miscommunication is a reality of life.
- Staff must act as positive role models for clients. Shelters cannot be fully effective if staff lead chaotic and disorderly lives.

### **SHELTER POLICIES**

- For on-reserve shelters that serve both Aboriginal and non-Aboriginal women, Aboriginal women must be given priority.
- Shelters must maintain a non-judgemental, non-demeaning, open-door policy so that women who come in feel encouraged about asking for help.
- In spite of how little money there may be for shelters, the aim must be to connect with the human side and to make the place as pleasant as possible for everyone. For example, weekly clients’ meetings can help the group divide up chores and provide a way for them to get to know each other.
- Provide small birthday surprises for clients and children, as much as possible.
- Provide language support by using the most common language of the clientele. Remember that not speaking a common language makes a client even more vulnerable and that, as empowerment of women is a common goal, efforts should be taken to establish good communication.
- English may be used as the common language, and all staff should have a good working use of it. However, at least one staff person should be able to speak the common language(s) of the large sub-groups within the overall clientele group.
- Each shelter needs a policy on the maximum length of time that women are allowed to stay.
- Some provinces have a “fleeing allowance” for clients; shelters need to know more details about these funds and how to access them.
- Clientele need to be constantly reminded about the confidentiality regulations within the shelter; post abbreviated regulations in each room or apartment and in all common areas.
- Shelters need to establish clear policies and practices for clients who have broken the

rules. For example people who have given away the shelter's location are coded on a "pink card" — this makes administration easier. A "yellow card" is used for those who need to be admitted with caution because they have severe drinking issues, have been guilty of theft, etc.

- To minimize costs, procure gifts in kind and use volunteers; ensure that both are effective in maintaining the continuity of shelter operations.
- Some shelters get extra help from volunteers to serve as coaches, team leaders, recreational leaders, etc.
- When appropriate, former (recovered) victims may volunteer as peer counsellors.
- For shelters that take both homeless and abused women, implement shift notes that have to be filled in twice a day. This keeps staff informed about clients' state at all times.
- Some shelters do not operate with a Board of Directors but directly with the Chief and Council who act in that capacity (some may not see this as a best practice).
- For shelters in urban environments, finding service providers such as physicians, health educators, nurses, etc. within a medical and/or health facility can be a definite advantage since it allows clients to more easily access medical attention and care.
- Ensure that staff members have some knowledge of the regional and overall legal and/or justice system so clients have at least some help in this area. Remember that Canada's systems may be as foreign to them as if they had come from another country. Be aware that clients may be unjustly treated by the justice system (e.g., many abused women, especially prostitutes, may be treated as the criminals rather than the victims). Many clients need help with paperwork and advice as to how the "the system" functions.
- Shelters need to address the question of what to do when fathers want access to their children who are in the shelter's care. Some deal with this through a childcare worker who may work within the shelter or at Social Services to avoid compromising staff and other residents.
- Periodically, a needs assessment is done internally to help keep the shelter in good working order all the time and make sure required supplies are always in stock.
- Create an "inspiration wall," where both staff and clients can post inspirational or motivational quotes. This promotes a sense of ownership for making the shelter a personal and pleasant place.
- In second stage housing, ensuring that no staff members work on weekends or at nights helps residents to integrate into the eventual reality of living outside the house.
- Lock up medications in special rooms or in special cabinets / cupboards; when signing out, both the staff member and the client must make an entry into the "med book / log." Do not dispense medications unless the pills are signed out; keep records up-to-date all the time and write everything down. Use surgical gloves.

## **INVOLVING THE COMMUNITY**

- Because community and local support are essential to a shelter's success, unrelenting efforts must be expended to establish and maintain this essential relationship.
- All programs for change absolutely require the community's buy-in or support, from grassroots or ordinary people to community leaders. Without this support, the risk of failure is high.
- Appoint a Liaison Officer who contacts all relevant agencies when clients come into a shelter. She can:

- network with abusers, encourage treatment and follow up on their programming;
  - network with community workers in the areas of men’s counselling, justice, police, child and family, healing and health promotion, home support workers, social services, etc.;
  - coordinate inter-agency case management meetings to better serve victims, and to better ensure that resources and services offer the maximum safety and protection to families at high risk;
  - be involved in exchanges of information between agencies on a need-to-know basis while respecting privacy laws.
- Work to change how the community thinks about violence or help build a framework among all appropriate agencies to guide, develop and implement policies to prevent family violence.
  - Work to get the community to view family violence, as a community or societal issue, not just a women’s issue. A community cannot fix a problem if it does not acknowledge or recognize that it exists.
  - Shelter clients can be encouraged to attend social gatherings within the community in order to re-introduce the client to normal and healthy relationships.
  - Community partners must understand confidentiality issues to help safeguard the shelter and its clients. They may need reminding as to the reasons for being given limited information or for restrictions on the support services they provide.
  - Work towards being a model organization within the community. Realize the importance of responsible, disciplined, ethical staff and Board members; develop effective policies and adhere to them; develop good operating systems; and keep up good accounting practices.
  - Educate doctors in nearby areas by preparing a simple package for them, with tear-away slips with the shelter’s name, address and phone number that doctors can hand to clients whom they suspect or know are being battered.
  - Shelter services must be made known to the community, far and wide. The Board can be of help to reach as many people as possible.
  - Recognize the need for a coordinated approach to Aboriginal family violence services; reach out to as many organizations in the area to help integrate various services.
  - Coordination of family violence services enhances the capacity of communities to deliver effective, culturally appropriate services, with long-term healing from the causes and effects of family violence as the main goal.
  - For isolated shelters, networking is vital for access to current information; it can also be a much-needed source of support. Urban shelters should initiate meaningful communication with more isolated ones.
  - All strategies designed for more than one region or area must be flexible, responsive and adaptable to meet the specific needs of each community and of each women’s shelter, and allow for variations over time and in different locations.

## **PROGRAMMING**

- Programming must be developed as needed by the counsellors who work with clients. Work must be “progressive” and adaptable to changing community and government policies.

- Always include cultural components in programming. Always provide programs, services and the shelter décor itself in as culturally appropriate ways as possible.
- Present Aboriginal culture in a favourable and pleasant way that also upholds, confirms and validates it. • Aboriginal culture states that women are life-givers; the basis of cultural programming should reflect the theme “woman is life.”
- Ensure clarity in programming by hiring shelter directors whose philosophy is consistent with Aboriginal cultural values. Different shelter directors may not agree with prevailing Aboriginal thought and values, and lean more towards Western-based / Christian values; while there may be nothing wrong with this, controversy can quickly arise from the community and clients themselves. Most First Nations and Métis want to reclaim their own cultural traditions and practices.
- Unless everyone is comfortable with the idea, do not adopt Western-based values and ceremonies or those from other First Nations’ cultures.
- Group meetings and sessions must be conducted and led by Aboriginal facilitators as much as possible.
- All programs must convey hope to women and keep their hope alive. Clients must be encouraged to believe in themselves and be reminded that they are doing good things for themselves and their children.
- In second stage housing, ensure that there is a range of choice for compulsory “personal growth” programs for residents (e.g., life skills, self-discovery, Alcoholics Anonymous, effective parenting, healthy relationships, etc.) so they can gather together and keep in touch with each other. These programs can be of short duration (an hour each), but residents should have to attend at least two per week.
- Programs for second stage housing should be geared towards helping residents continue their healing journeys and teach them how to be proactive in discovering new ways of living.
- In second stage housing, residents must be discouraged from “sitting around” just surviving; they need to continue getting help as they learn how to move on in their lives.
- Do not mix programs between first and second stage housing because programs for the first stage are the foundation for programs for the second stage.
- All programs must make healing a positive and supportive progression.
- Avoid programs that “blame the victim,” whether these are for men as perpetrators or for women as victims.
- Always ensure that clients’ goals are achievable and practical, and according to the length of their stay in the shelter (if this is known); only short-term goals can work for a short-term stay.
- Client programs should include topics such as affirmations, benefits of fitness, budgeting, Co-Dependants Anonymous (CODA), depression, domestic violence, disciplining children, the effect of violence on children, anxiety disorder, stress, self-esteem for children, etc.
- Since most clients with drug, alcohol and other types of addictions require medical help, some shelters find that alternative counselling services, such as dance and / or art therapy, help victims considerably.
- Certified trained counsellors are needed for addicts who come into the shelter; meet this need as much as possible.

- Programming must address the needs expressed by the clients themselves; be sure to ask clients what they need.
- Where there is no specialized counselling, clients can be sent out to organizations that provide this service.
- Support mechanisms must include programs that teach an understanding of successful family dynamics.

## Appendix H

### **Recommendation 1**

It is recommended that adequate resources be provided by government to policing agencies, especially those in geographically isolated aboriginal communities.

### **Recommendation 2**

It is recommended that charges be laid in aboriginal domestic violence situations where there are reasonable and probable grounds to believe an offence has been committed.

### **Recommendation 3**

It is recommended that accused in domestic violence situations be removed from the home when there are reasonable and probable grounds to believe an offence has been committed, and that accused not return to the home until the matter has been resolved in the criminal justice system by the courts or through a community sentencing process.

### **Recommendation 4**

It is recommended that charges be dealt with in a timely fashion. Failure to do so promotes the withdrawing of charges by abused aboriginal women.

### **Recommendation 5**

It is recommended that the imposition of a non-communication order, as well as the enforcement of 'stalking legislation', be enforced to keep aboriginal women from being threatened by the behaviour of third parties acting on behalf of the abuser. For example, relatives or friends of accused men may threaten women who lay charges.

### **Recommendation 6**

It is recommended that further research be conducted into the reluctance of aboriginal women to report domestic violence, including their fear of retaliation, community abuse or non-support, and economic factors.

### **Recommendation 7**

The charging policies are necessary to fulfill the obligations of the State to respect the section 7 [security of the person] rights of victims under the Canadian Charter of Rights and Freedoms<sup>106</sup>. It is recommended that while the Charter rights of accused must be respected, equal consideration and weight be given to the Charter rights of victims. There is a duty under the Charter to enforce the assault provisions within aboriginal communities to the same standard as in other parts of Canada.

### **Recommendation 8**

It is recommended that enforcement agencies convene a meeting to discuss the problems arising from the differences in mandatory charging policies across jurisdictions.

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<sup>106</sup> Elizabeth Sheehy, "Personal Autonomy and the Criminal Law: Emerging issues for Women" (Ottawa: Canadian Advisory Council on the Status of Women, 1987) at 53.



**Recommendation 9**

It is recommended that where there are tribal police and Band constables that they benefit from having a uniform charging policy to better protect abused aboriginal women and other victims.

**Recommendation 10**

It is recommended that further research be conducted into eradicating racism in the criminal justice system, and that amendments be considered to the Criminal Code to accommodate the Canadian mosaic, for example, cultural defences, community sanctioned crime prevention and community punishment, retribution and preservation of community harmony.

**Recommendation 11**

It is recommended that more alternative resources be made available in domestic violence situations for aboriginal women. For example, community diversion projects need to be developed and implemented in the aboriginal context. The development of these alternatives may include specifying that family violence is a criminal act.

**Recommendation 12**

It is recommended that consideration be given to introducing a Family Violence Act enforceable at the community level.

**Recommendation 13**

It is recommended that police in aboriginal communities enforce a mandatory charging policy which has been developed in consultation with the community. Social control policies at the community level need to be developed and enforced at the community level to prevent violence against women and children.

**Recommendation 14**

It is recommended that leadership, elders and women within aboriginal communities develop and enforce social control policies through local police including the R.C.M.P., Band Constables, tribal police, peace keepers and Women's Control Committees.

**Recommendation 15**

It is recommended that Indian reserves across Canada and aboriginal women's organizations be consulted to develop an agreeable policy on mandatory charging in aboriginal domestic violence situations and that these policies be enforced by the R.C.M.P., tribal police, Band Constables, peace keepers and others responsible for law and order in aboriginal communities.

**Recommendation 16**

It is recommended that aboriginal women and elders be given a meaningful role in eradicating violence on Indian reserves and in aboriginal communities.

**Recommendation 17**

It is recommended that aboriginal women be informed of their right to involve police in aboriginal domestic violence situations where communities have not acted to protect women in these situations.

**Recommendation 18**

It is recommended that there be a standardization of mandatory charging policies among various jurisdictions.

**Recommendation 19**

It is recommended that federal, provincial and territorial Attorneys-General address the need to create safe environments for aboriginal women who lay charges in domestic violence situations including creating halfway houses for violent men; shelters for men removed from their home for violent behaviour; community carceral facilities for violent men [and women]; and counselling services to prevent violence.

**Recommendation 20**

It is recommended that there be more dialogue between law enforcers and victims of domestic violence to ensure consistency in enforcing criminal assault violations against women, children and elders.

**Recommendation 21**

It is recommended that mandatory charging policies be developed in every jurisdiction with direct consultation with aboriginal women's organizations. It is recommended that the charging policies accommodated the use of aboriginal women's circles at the community level to deal with offenders who commit violent acts within the aboriginal community.

**Recommendation 22**

It is recommended that aboriginal women participate with federal, provincial and territorial agencies in forming mandatory charging policies and setting up alternative resource centres. There is a need to establish elders' services, women's sentencing circles, healing lodges, counselling services, sex offender programs and men's support groups in all aboriginal communities.

**Recommendation 23**

It is recommended that hotlines, radio and cellular phones be made available to aboriginal women and victims of violence in isolated, northern aboriginal communities.

**Recommendation 24**

It is recommended that police services be made available to aboriginal women and victims of violence in isolated, northern aboriginal communities and that communications services to outside police forces be increased including 1-800 numbers and other emergency communications services.

**Recommendation 25**

It is recommended that holding cells and temporary shelters be made available in all aboriginal communities where crimes of violence are a regular occurrence and where numbers warrant.

**Recommendation 26**

It is recommended that healing centres be established in all aboriginal communities with a population of 150-plus where crimes of violence are a regular occurrence, and that funds be made available for the training of sex offender counsellors and traditional healers.

**Recommendation 27**

It is recommended that healing lodges be established in central locations-isolated, rural and urban aboriginal communities-to service populations of 2,000 aboriginal persons or 500 families. Healing lodges should provide services to children of violence, aboriginal women, and aboriginal men.

**Recommendation 28**

It is recommended that counselling by traditional aboriginal psychiatrists, psychologists, elders or traditional healers be mandatory treatment for all abusive men, even when incarcerated.

**Recommendation 29**

It is recommended that services in aboriginal languages be made available throughout the criminal justice system.

## Appendix I

The Hollow Water First Nation Community Holistic Circle Healing model includes 13 steps. The following is an excerpt from “A Cost-Benefit Analysis of Hollow Water’s Community Holistic Circle Healing Process” (Solicitor General Canada and the Aboriginal Healing Foundation, 2001, pp. 83-94).

It is imperative to know that the following steps are in constant process of evolving as each case comes up. This is due to the uniqueness of the victim, victimizer, families, and worker's needs. At this moment the process or steps are being reviewed and partially re-written to reflect the evolution of the process, thus the following is to be considered a draft.

### **Step 1: Disclosure**

Disclosures come from many sources, some accidental and some intentional. They may come from a victim, a family member, a spouse, a community member who witnesses an abuse, or even the victimizer him/herself.

It is important that all members of the Resource Group be available to the community for disclosures. The person who receives a disclosure regarding the victimization of a child has three primary responsibilities:

- to get as much information as possible as to the FACTS of the allegation;
- to continue as "natural" ally to the person who made the disclosure; and
- to pass the information to the Assessment Team Coordinator immediately.

Upon receiving this information, it is then the responsibility of the Coordinator to:

- contact the RCMP a. to inform them of the disclosure; and b. to invite them to attend a meeting of the Assessment Team where the information received will be discussed and the subsequent intervention planned;
- call a meeting of the Assessment Team to:
- discuss the disclosure;
- complete an assessment/history of the individuals and families involved; and
- plan the actual intervention that will follow. This plan will identify specifically who is taking responsibility for what and when. The safety of all family/community members will be a primary factor to be taken into consideration in the details of the planned intervention.
- ensure that all 13 steps of this process are followed in proper sequence (Steps 2 and 3 occur simultaneously, with priority given to step 3, protecting the child).

### **Step 2: Protecting the Victim/Child**

The person(s) from the Assessment Team taking responsibility for assisting the victim, using whatever Resource Group members necessary, must:

- involve Child & Family Services;
- identify a safe home and make arrangements for the victim's stay;
- validate the disclosure. Since the community will have a say in the role which the court system will play, this process can concentrate on healing rather than punishment. The victim does not have to be defensive, and consequently, the openness of the process promotes the beginning of a return to balance of the individuals involved;
- take the victim to a safe home;
- ensure that an ally is available to the victim;
- ensure training and on-going support to the safe home; and
- make whatever arrangements are necessary for the victim (e.g., medical assessment, admission to victim's/survivor's group, etc.)

### **Step 3: Confronting the Victimizer**

Although the protection, support and healing of the victim takes priority, we believe that the major focus of dealing with sexual abuse needs to be shifted to include the victimizer, thereby also dealing with the source of the problem and beginning the process of restoring balance within the individuals, families, and community involved. The person(s) from the Assessment Team taking responsibility for assisting the victimizer should feel comfortable with alleged offender and see him/herself as a potential ally to the victimizer. It is also important that this person has already begun their own healing process. This person (confronter) using whatever Resource Group members necessary must:

- approach the alleged victimizer and confront him/her with the information gained in the disclosure;
- explain that the victim has been removed and will be staying in a safe home until the community can resolve the situation (The other option, if the alleged victimizer is willing, would be to "remove" the victimizer to a safe home);
- explain that there is a good possibility depending upon:
  - the severity of the offence(s); and his/her willingness to cooperate
  - that the matter could be handled by the community, in conjunction with the court system;
- make it clear that any attempt at interference with either the process or the victim will result in the community assuming a secondary role and the matter being handled primarily by the court system;
- ensure that an ally is available to the alleged victimizer. This ally will have to be extremely sensitive to the potential for suicide and/or violence toward others, and offer non-threatening and non-judgmental support, without reinforcing the alleged victimizer's denial system;
- inform the alleged victimizer that it will be necessary for him/her to:
  - accept full responsibility for what has happened; and
  - undergo a psychological assessment if he/she is going to chose the community alternative.
- tell the alleged victimizer that he/she will be contacted within five days as to:

- what the community concludes after completing the assessment; and
- what the community can offer in terms of dealing with the offences(s) in a traditional healing manner;
- make whatever arrangements are necessary for the victimizer, e.g., psychological assessment, admission to victimizer's group, self awareness, etc.

#### **Step 4: Assisting the Spouse**

As with the alleged victimizer, this can be an extremely difficult time for the spouse. Denial, anger, possible suicide, and potential violence toward others are all real possibilities. The person(s) from the Assessment Team taking responsibility for assisting the spouse, using whatever Resource Group members necessary, must:

- approach the spouse and present him/her with the information gained in the disclosure;
- explain what has happened thus far in terms of both the victim and alleged victimizer;
- explain the possibility of the matter being handled in the community, in conjunction with the court system;
- ensure that an ally is available to the spouse; and
- make whatever arrangements are necessary for the spouse, e.g., admission to survivors' group; self-awareness, women's therapy, etc.

#### **Step 5: Assisting the Family/ies/the Community**

In some cases the family of the victim and victimizer will be one and the same. In most cases they will be from the same community. In all cases the pain brought about by a disclosure will have a rippling effect throughout the community and many people, in both immediate and extended family/ies will be affected.

The person (s) from the Assessment Team taking responsibility for assisting the family/ies using whatever Resource Group members necessary, must:

- approach appropriate members of the immediate and extended family/ies and present the information learned in the disclosure;
- explain what has happened thus far;
- explain the possibility of the matter being handled by the community, in conjunction with the court system;
- ensure that an ally is available for all members requiring this kind of support;
- make whatever arrangements are necessary for the family members, e.g., admission to survivors' group, women's therapy, self-awareness, etc.

#### **Step 6: Meeting of Assessment Team/RCMP/Crown**

This meeting will be called by the Coordinator as soon (within four days of disclosure) as the first five steps of this process have been completed. The purpose of this is to:

- present all information obtained thus far;
- decide how to proceed. There are three possibilities:
- the facts do not support the allegation. In this case the victim would be returned to the family and the family worked with until it is back into balance;
- the facts support the allegation, but for some reason (offence too serious, community resources too limited, victimizer not willing, etc.) it is most appropriate for the court system to assume the primary role; or
- the facts support the allegation and the victimizer should be given the choice of proceeding within the community alternative. In this case a Healing Contract\* would then be drawn up for presentation to the victimizer;
- review responsibilities of respective meeting participants regarding the decision as to how to proceed (who will do what, and when).

### **Step 7: Victimizer must Admit and Accept Responsibility**

The person(s) from the Assessment Team taking responsibility for assisting the victimizer, using whatever resources necessary, approaches the victimizer, and

- informs him/her of the outcome of the investigation;
- explains the two primary alternatives available (community/legal; legal/community);
- explain to the victimizer that, in order to restore his/her healing process, he/she must admit to the offence(s) and accept full responsibility for his/her actions. To this end, the victimizer must:
- provide a voluntary statement (cautioned statement) to the RCMP outlining specifically his/her total involvement with victim(s). This statement will be made with full knowledge on the part of the victimizer that if:
- the assessment team becomes aware of any victim(s); or information not included in the statement; and/or
- the victimizer refuses to comply with the community alternative procedure at any point, and/or there is any recurrence of the offence the court system will immediately be asked to assume the primary role; and
- undergo a psychological assessment and agree to releasing the information obtained in this assessment to the Assessment Team.
- present the Healing Contract; and
- inform the victimizer that he/she has to:
- make a decision as to which primary alternative will be pursued; and
- inform the Assessment Team of this decision within two days. Failure to comply with the above would result in the court system assuming the primary role.

### **Step 8: Preparation of the Victimizer**

If the victimizer admits to the allegations and is willing to accept the community alternative, he/she must then be prepared for the next step in the healing process: an

appearance before a special gathering of the Resource Group, selected members of his/her family, the victim(s), and selected member of his/her/their family/ies.

This preparation would be completed by the person(s) from the Assessment Team who has/have taken responsibility for assisting the victimizer, again using whatever resources are appropriate, and would include:

- an explanation of what will happen; and
- what will be expected of him/her.

### **Step 9: Preparation of the Victim(s)**

As with the victimizer, the victim(s) must be prepared for the next step in the healing process, the appearance of the victimizer before him/her/themselves, selected member of his/her/their family/ies, and the Resource Group. The victim(s) must be prepared to the point where he/she/they are at least willing to **TRY** to forgive the victimizer for what has happened. This preparation would be completed by the person(s) from the Assessment Team who has/have taken responsibility for assisting the victim(s), again using whatever resources are appropriate, and would include:

- an explanation of what will happen; and
- what will be expected of him/her/them.

### **Step 10: Preparation of All the Families**

As with the victimizer and victim(s), selected members of the victimizer's family the victim(s) family/ies must be prepared for the next step in the healing process: the appearance of the victimizer before themselves, the victim(s), and the Resource Group. The selected members of the family/ies must be prepared to the point where they are at least willing to **TRY** to forgive the victimizer for what has happened. This presentation is completed by the person(s) from the Assessment Team who has taken responsibility for assisting the family/ies, again using whatever resources are appropriate, and would include:

- an explanation of what will happen, and
- what will be expected of them.

### **Step 11: The Special Gathering**

Once the victimizer, the victim(s), and selected family members have been prepared, the Coordinator will arrange for the victimizer to come face-to-face with:

- the Resource Group, who represent the (healing) community;
- the victim(s);
- selected members of the family/ies to answer for his/her misconduct.



The gathering will occur at a time and place agreed upon by all involved, and the seating arrangement will take the form of a circle.

### ***The Special Gathering has Ten Steps***

The ceremonial opening. This marks the gathering as an event of importance. Preference as to the exact nature of the opening will be given to the victimizer/victim(s) but could also include a song, a prayer, or some form of religious or traditional ceremony.

The Coordinator will address the gathering and explain its purpose as follows:

- a. to hear the details of the offence;
- b. to speak publicly to the victimizer about the offence;
- c. to look at ways of dealing with the offence that will heal all persons involved and reunite the community;
- d. to demonstrate that such behaviour is unacceptable, but that healing is possible and supported;
- e. to learn something about sexual abuse in general through an educational process, and
- f. to have all people present accept responsibility for supervising the Healing Contract.

The explanation of the offence. The Assessment Team members will then explain the offence.

The Assessment Team members will then explain the offence. The Coordinator then asks the victimizer if he/she

- a. accepts the charges as true; and
- b. is willing to participate in the proceedings. If the victimizer rejects either or both conditions, the Coordinator explains that the gathering must be brought to a close and that the court system will be asked to assume the primary role. If the victimizer accepts both conditions, the gathering can continue. It is the community's responsibility to support the action of the Coordinator, based on the offender's decision.

### ***The Educational Process:***

This part sets the stage for the rest of the proceedings. It helps to educate all the people present about the seriousness and the dynamics of the offence. It sets the emotional stage necessary for change in attitudes to occur. It is, in effect, a mini-workshop, and can include lectures, videos, and hand-outs. "Something about Amelia", a video which runs through the dynamics involved in sexual abuse and ends with the reuniting and healing of all family members will most likely be used.

The victimizer verbally accepts full responsibility for his/her action.

Now that all present have a better idea of what it is they are dealing with, the victimizer is asked by the Coordinator to accept full responsibility for the offence, without rationalization, justification, or reservation. Again, if the victimizer fully accepts the responsibility for the offence, the gathering can continue. If not, it is turned over to the court system as the primary agent. (If a break is necessary, this would be a good time. It will give people time to think about what they have learned, and to gather their thoughts about what they would like to say to the victimizer).

### ***The Participants of the Gathering Speak***

This is the heart of the traditional healing process, and allows the Community to show its concern for all involved. Here the people have a chance to speak openly to:

the victimizer, telling him/her how they feel about the offence, encouraging him/her to accept full responsibility, and offering their support for his/her healing;

the spouse, about his/her responsibility in helping in the healing process, or perhaps talking to him/her about their part in the abusive situation if it is appropriate; and

the victim (s), relieving them of any guilt they may feel, reassuring them that they are not responsible for the offence, and offering support.

When appropriate, and the victimizer, spouse, and victim(s) are willing, the idea of the family reuniting in the future (after the healing process has taken enough to ensure that such behavior will not be repeated) is encouraged and supported. Members of the group are free, if they feel that it will help in the healing process, to relate their own experiences in the past of being abused or being an abuser, and the problems that occurred as a result.

### ***Healing Contract is Presented***

At this point the Coordinator will present the Healing Contract developed in Step 6 to the whole group for their:

- comments and feedback
- support
- eventual supervision

The Healing Contract contains/addresses three general areas:

- some degree of punishment, but the result must enhance the community as well as the victimizer's self-esteem. This would likely take the form of community service work;
- protection against further victimization. This would likely take form of restricted access to potential victims for a specified period of time;

- treatment. This would likely take the form of individual counseling, attendance at support groups, etc.

If the participants of the gathering, through consensus, recommend changes in the Healing Contract, it would be the responsibility of the Coordinator to contact the RCMP and Crown with the recommendations for their approval before the changes are accepted.

In the future, after the community has progressed in its own healing, we anticipate that the Healing Contract will actually be drawn up by the participants at the gathering, rather than by the Assessment Team/RCMP/Crown. It would then be the responsibility of the Coordinator to contact the RCMP and Crown with the proposed Healing Contract, for their approval.

The victimizer publicly apologizes and accepts the Healing Contract. At the request of the Coordinator, the victimizer is now asked to:

- publicly apologize to:
  - the victimizer, accepting full responsibility for what has happened, and reassuring the victim(s) that it will not happen again;
  - the spouse;
  - the group-at-large.
- will publicly agree to abide by the conditions of the Healing Contract, and state that he/she understands that any failure to comply with the conditions will result immediately in the court system being asked to assume the primary role.

### ***The Ceremonial Closure.***

This again marks the gathering as an event of importance. Preference as to the actual content of the ceremony will be given to the victimizer/victim.

### **Step 12: The Healing Contract is Implemented**

It is the responsibility of the Coordinator, using whatever Resource Group members necessary, to ensure that the conditions of the Healing Contract are implemented and carried out as intended. The role of the participants of the Special Gathering in supervising the contract is essential to the healing of the victimizer, victim(s), family/ies, and community. ANY failure of the victimizer to comply with ANY conditions of the Healing Contract will result immediately in the court system being asked to assume the primary role.

### **Step 13: The Cleansing Ceremony**

This is a ceremony that marks the completion of the Healing Contract, the restoration to balance of the victimizer, and a new beginning for all involved. The Coordinator will be

responsible for arranging for ceremony at the appropriate time. The appropriate time will vary, depending upon the healing process of each individual victimizer. We do not anticipate that this would happen before at least two years from the time of the Special Gathering. The victimizer will have input into the content of the ceremony, but it will be open to the community and will likely include some form of a community feast. It is time to honor the victimizer for completing the healing contract/process. As the community continues to heal, we anticipate having some form of annual celebration to recognize in a general way the healing and cleansing of our members.

These steps are under constant revision. The latest written version is dated March 13, 1996.

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