

**BC ASSOCIATION OF SPECIALIZED VICTIM ASSISTANCE AND COUNSELLING  
PROGRAMS  
STOPPING THE VIOLENCE COUNSELLING PROGRAMS  
REGIONAL TELECONFERENCES  
MAY 2004  
SUMMARY REPORT**

**INTRODUCTION:**

In April and May of 2004, the BC Association of Specialized Victim Assistance and Counselling Programs (BCASVACP) conducted a series of six regional teleconference calls with Stopping the Violence (STV) Counsellors around the province. The Ministry of Community, Aboriginal and Women's Services (MCAWS) generously provided the use of Provnnet Teleconference Services for these calls.

A total of 43 STV Counsellors participated on these calls. Communities represented include:

Dawson Creek, Tumbler Ridge, McBride, Valemont, Fort Nelson, Fort St. John, Trail, Invermere, Creston, Kaslo, Grand Forks, Keremeos, Princeton, Armstrong, Enderby, Salmon Arm, Kelowna, Vernon, Prince George, Smithers, Houston, Victoria, Port Alberni, Uclulet, Courtenay, Comox, Duncan, Nanaimo, Powell River, Squamish, Mission, Abbotsford, Surrey, Delta, Langley, North Vancouver, Burnaby, Coquitlam, Port Coquitlam, and Vancouver.

The agenda for these two-hour calls was deliberately kept open in order to invite counsellors to identify and discuss whatever issues were most relevant to them. Topics identified have been organized into themes and are summarized here with discussion of concerns, challenges, responses, and recommendations.

**1. CUTS TO PROVINCIALY FUNDED PROGRAMS**

**1.1 Family Law Legal Aid:**

Counsellors reported they are providing far more family law support, including increases in custody and access cases, than ever before.

*"I can't tell you how many custody cases I'm dealing with."*

Some expressed concerns about having insufficient knowledge and training to do this adequately. In response to this need being identified a year ago, the BCASVACP produced the **Family Law Resource Manual for Community-Based Advocates Assisting Women Dealing with Violence Issues**. This was done in partnership with the BC/Yukon Society of Transition Houses with funding from the Ministry of Community, Aboriginal and Women's Services (MCAWS), and Legal Services Society. This manual is available on the BCASVACP's website, [www.endingviolence.org](http://www.endingviolence.org). A series of one-day family law training events based on the information in the manual was also held regionally around the province. Legal Services Society and Victim Services Division funded this training. Counsellors who attended the training expressed appreciation for the information, describing the manual as very practical and helpful,

though one day of training was not enough to meet their need to understand the complex area of family law.

*"[Now] I can give women valuable and useful information. I really appreciate how well organized and well laid out [the manual] is."*

*"The manual is extremely relevant to our work. It is more than useful. It is essential. With the cuts to Legal Aid, we are encountering more and more women who have no legal representation and are looking to us for help with custody and access/divorce issues."*

*"The manual and the workshop were extremely useful. The workshop was long overdue and I have a much clearer idea about family court now. I can't thank you enough for offering the workshop and providing such a useful tool."*

Others said they were looking forward to attending the training scheduled for their location.

Counsellors agreed however, that there remains an urgent need for paralegal family law support services in BC. Many counsellors reported that women are not leaving abusive partners for fear of losing their children in custody disputes.

*"Clients ask, 'How will I get a lawyer?'"*

*"Legal Aid runs out so quickly, lawyers drop them."*

*"Lawyers are burnt out and not treating women as well."*

Many counsellors expressed concern that many judges, Crown, and lawyers still aren't acknowledging the significance of men's violence when awarding custody. Counsellors reported that some judges are clearly biased against women in family law cases, and that many abusive men are being awarded custody.

*"When I found out who the judge was going to be, I knew my client didn't have a chance."*

In another example, a counsellor shared a case where a man who had assaulted his children 25 years previously won partial custody of a child that he wasn't the father of. He had been with the child's mother for a short time, they hadn't married, and he hadn't adopted the child. However, he spoke in court about how much money he had and how much he had to offer.



**Recommendation 1: In view of cutbacks to Legal Aid for family law cases, there is a clear need for funding for family law case support provided by lawyers, paralegal professionals or other legal advocates.**

**1.2 Women's Centers:** At the time of these calls, the MCAWS core funding to Women's Centers had been eliminated. Many counsellors reported that Women's Centers in their communities had found funding for an additional six months or so, with the future being very uncertain. Several reported that, as a result of news coverage of the closing of Women's Centers, many clients thought the funding for the STV program was being eliminated and thus the service no longer existed.

*"People ask if I'm still going to be here."*

*"Some stopped coming or decided not to start."*

*"Women's Centers used to refer and now, with the cuts, there are fewer referrals to us."*

In some communities, media reports were inaccurate, giving the impression that all programs in women-serving agencies had been cut. Several agencies have put considerable time and resources into informing their communities they are still providing services.

Cuts to Women's Center funding have destabilized some agencies, with STV Counselling Programs now having to contribute a higher percentage of overhead costs because Women's Center core funding previously supported a lot of the STV program costs, i.e. shared equipment, administrative, office rental and other infrastructure costs. Some counsellors wonder where their program will go if their agency closes, and whether they will still be employed if the program is relocated elsewhere.

*"We don't know where we'll go if the center closes."*

*"Everything's up in the air."*

*"The uncertainty is not easy. This isn't easy work even when things are going well."*

Counsellors in STV programs attached to Women's Centers reported challenges in planning as a result of not knowing whether their agencies, societies, and therefore their programs, will survive over the next few months. In particular, planning for groups is a challenge for some. Others have had to address clients' reluctance to start counselling for fear it may be terminated due to funding cuts. Some STV counsellors are now providing services previously offered by Women's Centers, i.e. filling out forms and providing advocacy related to poverty and other issues.



**Recommendation 2: That funding for Women’s Centers be reinstated in recognition of their role in service provision on the anti-violence continuum, as the loss of this funding is causing great strain and putting women at greater risk. It is essential to recognize the importance of maintaining adequate infrastructure for STV Counselling Programs, especially in light of the additional workload resulting from cuts to other programs.**

**1.3 Other Programs:** In addition to the losses to Legal Aid and Women’s Centers, counsellors reported huge impacts resulting from losses or reductions in other services in their communities, including: Ministry of Human Resources (MHR) offices, court houses, social workers, hospitals, Sexual Assault Centers, Bridging Programs, Assaultive Men’s Programs, adult communication programs and youth programs.

*“We really feel the impact of each service lost in rural areas.”*

#### **1.4 Changes Observed for Clients:**

Since implementation of the cuts, counsellors have reported huge changes to the challenges faced by their clients. The majority of counsellors reported seeing the following trends in their client populations:

**1.4a) Increased Complexity and Severity of Problems:** Counsellors have observed a dramatic increase in the complexity and severity of problems women are bringing to counselling.

*“Clients are more stressed, upset, overwhelmed and powerless.”*

*“There’s more hopelessness.”*

*“We are seeing more clients who are falling through the cracks.”*

*“There are extraordinarily complex issues that clients are dealing with, and we are the last resort – there’s nowhere else for women to go.”*

The complexity of issues STV counsellors identified on the calls included addictions, severe post-traumatic stress disorder, other mental health issues, and other factors as detailed below.

**1.4b) Mental Health and Addictions:** Counsellors reported a significant increase in the number of clients presenting with mental health and addiction issues. They spoke of these issues as being more acute and severe than in the past. Mental health problems mentioned included bipolar disorders, dual diagnoses, eating disorders, and depression. Several also noted increases in cocaine and crack use among clients.



*"[Is society] stressing people to the max? Is this [increase in mental illness] socially constructed?"*

*"Stress is so high, people are pushed right over the edge."*

Counsellors also expressed concerns about Mental Health clients being over or under-medicated.

*"Often their meds are not balanced. Lots of women are so highly medicated they can't function."*

*"Medicated numbing."*

Counsellors reported an increase in referrals, both appropriate and inappropriate, from psychiatrists and other Mental Health professionals who, in some cases, then prematurely closed the Mental Health file.

*"I'm getting extremely complex referrals from psychiatrists, dual diagnoses, women not stable. Often trauma work is not doable, and I spend a lot of time explaining why."*

*"STV has to handle everything. Mental Health shovels clients over ASAP to me."*

*"There's lots of attention deficit disorder and post-traumatic stress disorder."*

*"I have a Mental Health background so I feel comfortable with mental health, but a lot of the referrals are not appropriate. Sometimes Mental Health refers and then closes the file."*

**Recommendation 3: That the MCAWS access funding from the Ministry of Health in order to provide STV Counselling Program funding increases to reflect services these programs are providing to Mental Health clients.**

**1.4c) Poverty, Bankruptcy and Housing:** Counsellors have observed increases in the severity of client poverty. This, coupled with increases in housing costs and decreases in housing availability, is leaving many women struggling to find a place to live. The problems were reported to be especially severe in northern and isolated communities. In many resource-based communities, schools and hospitals are closing and there are fewer jobs available. One counsellor requested that the BCASVACP advocate at a provincial level for affordable housing.



Some counsellors reported seeing increasing numbers of women declaring bankruptcy. One described cases where men have coerced their wives into putting the bills in her name and then left. Women have found it difficult to access legal aid for filing bankruptcy. Counsellors said they could use more information about how to help clients either avoid bankruptcy, or file for it if necessary.

*“Women are just trying to stay afloat and put food on the table.”*

**1.4d) Women Staying With Abusive Partners:** As a result of increased barriers to leaving, counsellors reported that more of their clients are deciding to stay with abusive partners. With fewer social supports available to them, more women are faced with the prospect of severe poverty if they leave.

As a result of this, combined with cuts to family law Legal Aid, more women face a very real risk of losing their children if they leave. Many cannot afford to hire a lawyer, and are aware of judges taking finances into consideration when making custody decisions.

*“Women go back. There is nowhere else to go.”*

This raises serious concerns about risks associated with continuing violence.

**1.4e) Transportation Barriers:** With fewer services available locally, women in northern and isolated areas who lack their own transportation are often unable to access services even when they do exist in another community. For example, many communities no longer have MHR offices, with the nearest office hours away by car, and no bus service available. One counsellor reported the nearest office is a one and a half hour drive away, taxi fair for the round trip is \$100, and MHR will not pay for women to make the trip. She often has three clients per week facing this situation and it is a major problem. Much of the MHR work can be done over the phone, but the client’s signature is required in-person.

*“Many women don’t have transportation.”*

*“There are lots of transportation barriers”*

*“Lots don’t have time and money to travel.”*

For women with vehicles there is sometimes the fear of being followed by the offender on long stretches of isolated highway where there is no cell phone reception.



**Recommendation 4: The current system of requiring in-person signatures from MHR clients is causing severe hardships. We recommend that the MCAWS negotiate with the MHR to eliminate this requirement.**

### **1.5 Changes in the Nature of STV Counselling Work:**

Counsellors reported significant changes in the focus of their work:

**1.5a) Service Provision:** Counsellors are providing much more support for clients' basic needs than previously, and are dealing with more crisis work. Many are providing information and advocacy services for women, either by phone, or accompanying them to appointments with the MHR or Legal Aid. On the other end of the spectrum, many clients are presenting with more complex challenges requiring specialized counselling interventions.

*"I spend a lot of time trying to find solutions for clients' basic needs. Often there are no solutions."*

*"The poverty advocate doesn't have enough time. I end up doing a lot of poverty support work. I'm working from a broader social work approach."*

*"Therapy now takes second place to advocacy for housing, Legal Aid, etc."*

*"I was told it's supportive counselling. It's not. [It's intense trauma counselling.] I see dissociative identity disorder. One client was held hostage and threatened to be killed. She has pretty severe post-traumatic stress disorder."*

**1.5b) Workload:** The majority of counsellors reported significant increases in their workload since implementation of provincial service cuts. Other remaining social service programs are also carrying a heavier load, in many cases resulting in increased referrals to STV programs.

*"I have way too many clients."*

*"Physicians and Mental Health are sending so many people."*

*"STV is carrying the weight of other funding cuts."*

Counsellors reported dealing with demands for services in a variety of ways. Many are squeezing more and more appointments into their days and weeks. As a result, they have less time for coordination, networking, administrative duties, consultation, professional development and updating, and are taking fewer breaks. One counsellor sees clients weekly or biweekly for a few appointments then moves them to monthly sessions. Some encourage clients to address a few issues, then take a break from counselling. Some counsellors reported doing



their best to accommodate everyone who requests service, recognizing that clients are often lost when they are placed on a wait-list.

*“Work is so intense. I don’t book a lunch, but I want to avoid burnout.”*

Some counsellors are being pressured to limit the length of time they see clients or the number of sessions they offer, and to gradually make a transition to doing only short-term counselling. This has serious negative implications for quality of service and the process of healing for women survivors of violence.

One counsellor shared that her supervisor has supported her in giving clients the length of time they need, and clients express gratitude for being able to stay.

*“We need to advocate for services to allow people the time they need.”*

As a result of cuts to services, many counsellors reported that with all service providers in their communities carrying heavier client loads, it is much more difficult for them to find time for community networking meetings. Counsellors also said they rarely had time for conference calls.

### **1.5c) Waitlists:**

STV Counsellors manage the increasing demands for services in a variety of ways, and the presence or absence of waitlists cannot be interpreted in isolation as a reflection of demand for services. Several counsellors reported seeing as many clients as their hours will allow and still having extremely long waitlists with between 20 and 100 women waiting from 7 months to 4 years for service.

*“My large waitlist is my biggest challenge.”*

Counsellors are using a variety of strategies for offering some services to women on waitlists.

*“I offer six emergency appointments to women in crisis. I have 15 women in that situation now.”*

Others offer group counselling opportunities or informational workshops. While contacting women on the waitlist to offer them group sessions, counsellors are able to update the list.

All reported that women who have experienced a recent assault and those in crisis receive some form of immediate support, either from the STV counsellor or from another program within the agency or community such as a Community Based Victim Assistance Program if it exists.



### **1.5d) Vicarious Traumatization and Uncertainty About Agency and Program Survival:**

*“The work is really hard. It’s hard not to fall into hopelessness myself. I encourage them to acknowledge what they’re doing well rather than getting stuck in what they’re not doing, offer them a life raft without jumping into the pool myself.”*

*“Sometimes I feel there is no light at the end of the tunnel. I’m worrying about work more at home. How can I fit two more clients in? It’s more stressful. There was a Sexual Assault Center person before the cuts. We could support each other.”*

*“We are living in a time of uncertainty.”*

*“Everyone is very busy and discouraged.”*

Some counsellors reported that stresses involved in uncertainty about funding outweigh stresses involved in their work with clients. Some have had their hours go up and down as additional temporary funding has been accessed and then not replaced. Many work in agencies that have had to restructure due to losses of funding for other programs.

### **1.6 Counsellor and Agency Responses to Poverty:**

In an effort to address issues of *“grinding poverty”* resulting from the cuts, many agencies have implemented a number of new programs or enhanced previous ones, including:

- Opening food banks.
- Fundraising for bus tickets, diapers, medications, etc. for clients.
- Providing free clothing.

*“Our free clothing room has phenomenal traffic.”*

## **2. JUSTICE SYSTEM**

### **2.1 Charges Being Laid Against Women:**

Numerous counsellors expressed concern that they are observing an increase in dual arrests and assault charges being laid against women who have fought back in retaliation or self-defense.



*“Three or four women were charged because they scratched him after many years of abuse.”*

*“Women are being charged for striking back after ten years of abuse.”*

## **2.2 Counsellors in Court:**

Lawyers are discrediting STV Counsellors as credible professionals in family law matters.

One client shared her experience of writing a letter for a client involved in a custody dispute. The defense lawyer discredited it, saying she was not a member of a professional association, and not credible. Some counsellors discussed the importance of referring to the draft STV Counselling Program Standards, and the option of including a cc to the BCASVACP at the bottom of the letter. Counsellors agreed it would be helpful to have training in writing letters for court.

**Recommendation 5: That the draft STV Program Standards be approved and implemented, and that the Ministry consult with the BCASVACP regarding updates, revisions, and implementation.**

## **2.3 Legal Aid Intakes:**

One counsellor also works part-time doing Legal Aid intakes and emphasized the importance of clients knowing what to say when they go for a Legal Aid intake. The BCASVACP plans to follow up on this with an article in its newsletter.

## **3. ANNUAL BCASVACP EMERGING ISSUES TRAINING**

Counsellors were asked to rate, on a scale of 1 to 10, how important the Annual Emerging Issues Training hosted by the BCASVACP is to them. They were also asked if their programs would have funds available to cover the difference if only a partial subsidy for travel, meals, and accommodation was available for the training. Subsidies in the past have covered 80-90% of the cost of travel, meals and accommodation. Counsellors were also asked to describe current training needs.

Not all counsellors responded to these questions, as some had to sign off before the calls were completed. Of those who provided a numerical ranking, one counsellor, who said she hasn't attended the training yet, ranked it as a 6, three counsellors ranked it as a 9, and seventeen ranked it as a 10.

*“It's very important, seeing everybody, feeling I'm part of a bigger social movement to end violence against women. I always feel inspired when I come back.”*



*“I loved it. It was wonderful. The speakers were incredible.”*

*“The speakers were totally inspiring. It’s my only opportunity to see people face to face.”*

*“It’s one of the training highlights of the year. I’d be really disappointed if it didn’t happen.”*

*“Vital. It’s one of the best trainings around.”*

Some counsellors reported they’ve been unable to attend in the past as their agency couldn’t cover the portion of costs not covered by the subsidy. The majority of those who responded reported they will be in a similar situation in the future as training budgets have been reduced or eliminated as a result of increased costs in other areas of their budgets, while there have been no funding increases. Counsellors reported having training budgets ranging from zero to \$500.

Counsellors requested training addressing issues of isolation specific to working in remote rural communities, and training around culture and challenges specific to the north.

**Recommendation 6: Given increased pressures and changing demands on STV Counselling Programs the need is greater than ever for subsidized annual training. We recommend that the MCAWS confirm annual funding for this event.**

#### **4. UNDER-FUNDING OF STV PROGRAMS:**

##### **4.1 Support for Research Project:**

Counsellors agreed unanimously that there is a need for research to document under-funding of STV programs. They would like to see an efficient process of gathering information about workloads, waitlists, wages, number of hours per program, and the need for funding for co-facilitation.

##### **4.2 Wages**

Counsellors discussed wage and benefit discrepancies among STV counsellors and between STV counsellors and other counsellors with similar qualifications doing comparable work. One counsellor stated that, while the counsellor for the assaultive men’s group in her community earns a salary of \$30 per hour, she makes \$21. Some noted that the STV Counsellor wages are \$5-12 per hour lower than Mental Health counsellor wages. With the exception of the Monroe Wage Lift a few years ago, most



counsellors said that the wage they were hired at is the wage they are still making, even if they have been working in the STV Counselling Program for many years.

*“The work takes a lot out of you. Personal finances shouldn’t be a stress.”*

Low wages and lack of increases contribute to a high turnover rate for STV Counsellors.

*“There are no benefits or pension. I have to think about long-term security for my family. Otherwise I’d love to keep doing this work.”*

Counsellors highlighted the fact that current wages don’t adequately reflect the education, experience and ongoing training required to do quality work, or the nature and complexity of this work. While the work is described in the Ministry contracts as “[providing] services in a flexible manner which goes beyond emotional support, but does not include clinical treatment”, the reality is that clients bring very complex problems requiring longer term counselling and skilled therapy.

*“The wage doesn’t recognize the kind of work we are doing.”*

*“I constantly need to take courses to keep up.”*

*“Our skills are not reflected in the pay.”*

#### **4.3 Statistics:**

For counsellors providing services in more than one community under the same contract, a significant portion of work hours are spent traveling. As a result, they have less time available to see clients. However, there is no place on the Management Information Systems (MIS) forms to reflect this.

*“Travel time is huge. The longest trip is 1.5 hours one way.”*

In rural areas where clients are often traveling from other communities to attend appointments it can be difficult to fill cancellations on short notice.

Counsellors expressed concern that the MIS forms do not adequately reflect the different ways in which they manage workload and waitlists. However, they would like MIS figures to be compiled and released.

**Recommendation 7: That the Stopping the Violence Branch conduct a review of MIS forms to identify ways of modifying them to capture: 1) the varying ways in which programs address demand for services, and 2) travel time required for programs serving more than one community.**

**Recommendation 8: That the Stopping the Violence Branch consult with the BCASVACP regarding analysis and interpretation of the MIS statistics.**



**Recommendation 9: That the Stopping the Violence Branch compile and release STV MIS figures to the BCASVACP regularly for distribution to programs.**

#### **4.4 Services to Young Women:**

In rural communities there are often no appropriate services for young women experiencing violence, and travel to a larger community to receive services is often not an option.

*“There’s no Children Who Witness Abuse program, and date rape doesn’t fit Addictions or Mental Health.”*

This creates a serious dilemma, both for the young women and for the STV counsellor, as the STV contract does not cover services to women under 19 unless they are “leading an adult lifestyle”.

**Recommendation 10: That the MCAWS meet with the MCFD and the BCASVACP to discuss programs necessary to address the gap in services for young women who are victims of violence.**

## **5. COUNSELLOR SUPPORT**

### **5.1 Counsellor Support Strategies:**

STV Counsellors identified many challenges and strategies for maintaining their mental and physical well-being.

*“When I find myself thinking about work at home I visualize myself putting those thoughts back at work.”*

*“When I’m lying awake at night I use the 5-4-3-2-1 strategy. I think of 5 things I can see, 5 things I can hear, 5 things I can sense, then 4 things I can see... It diverts the brain from fight or flight into rational thinking, gets me into my body, and gives me perspective.”*

### **5.2 STV Counsellor Support Plan:**

*“It’s extremely helpful. If I didn’t have that I wouldn’t have any clinical supervision and I couldn’t do the work. I wouldn’t have the money for it if it wasn’t assigned for that.”*

Many counsellors, especially those in rural and northern communities, identified isolation as a major challenge. Many find it difficult to arrange in-person counselling



supervision with someone knowledgeable and skilled in feminist counselling and feminist supervision.

One counsellor reported having done supervision by phone with someone in Vancouver for a while, but found it unsatisfying, and was then able to make arrangements with a private counsellor in her own community.

*“The STV counsellors meet together and rotate between three consultants. It’s rejuvenating and so important to talk to other STV counsellors.”*

Some counsellors have clinical supervision with someone within their agency. Others contract for external supervision.

**Recommendation 11: The STV Counsellor Support Plan is an essential service. It assists counsellors to deal with the complexity of cases and vicarious traumatization. The BCASVACP recommends the Ministry continue funding the STV Counsellor Support Plan.**

### **5.3 Regional Teleconferences and Meetings:**

The MCAWS provides regional teleconference calls, separate from those coordinated and facilitated by the BCASVACP in some regions of the province. One counsellor reported that these calls were implemented in her region in an effort to address issues of isolation when the program first began. Their calls are scheduled every two months, and they meet in-person once a year. As counsellors are getting busier, however, participation on the calls has decreased.

Counsellors in one region reported having an STV network that meets every six weeks, rotating among locations. About 15 people attend, and they have developed a method of sharing waitlists to maximize service provision in their region.

### **5.4 Community Coordination for Women’s Safety Project:**

Counsellors in rural communities expressed appreciation for the Community Leadership Training hosted by Morgen Baldwin and Gail Edinger of the Community Coordination for Women’s Safety Project. For one community, this is the first time service providers from a wide variety of backgrounds are coming together to talk about violence against women.

## **6. GROUPS**

Counsellors described a wide variety of open and closed educational and counselling groups on topics of: safety, power and control, healthy choices, coping, loss and grief,



anger, mindfulness, stress, boundaries, assertiveness, self-care, reclaiming personal power, skill development, and looking at new relationships.

One program with three STV counsellors offers 3 ongoing open groups, two on topics of violence against women in relationships, and one for survivors of childhood abuse and trauma. These counsellors also run a closed 9-week group for survivors. Once a month they offer a “Strategies Workshop” in which they present information on the biology and physiology of trauma. They reported these workshops are wonderful to do and feedback from participants is overwhelming, with women expressing relief of feelings of guilt and shame.

While some counsellors are able to team up with others within their programs, agencies or communities to co-facilitate groups, others are facilitating on their own due to lack of funds to pay a co-facilitator, or lack of availability of cofacilitators. In some cases, counsellors have been able to find volunteers or practicum students to fill that role.

*“I always get a co-facilitator. With trauma survivors it’s not optional.”*

*“I’m doing groups without a co-facilitator. It’s difficult and extremely draining. I need to debrief afterwards.”*

*“We use a team approach, run groups together, and check things out. It keeps us from burning out.”*

## **7. ACCREDITATION**

A number of counsellors reported their programs and agencies are undergoing accreditation, a very time-consuming process on top of huge client loads. They shared challenges associated with maintaining a feminist approach in the context of meeting accreditation requirements with male assessors who have no understanding of trauma. Counsellors requested assistance from the BCASVACP in identifying agencies that have completed accreditation and are willing to share their documents with others. Information was provided on the calls and counsellors were also encouraged to contact the BCASVACP office for more information if needed.

## **8. BCASVACP STV COUNSELLOR LIST SERVE**

Counsellors, especially those in isolated areas, expressed appreciation for the list serve, and reported using it, though they found time to be a significant limiting factor. Some were unaware of the service and asked to be signed up.



**Recommendation 12: There are resources required to maintain a list serve, i.e. signing people up, updating addresses, and posting information and discussion items. The BCASVACP currently doesn't have the resources necessary for this. The BCASVACP recommends that the MCAWS provide the BCASVACP with funding to cover the costs of maintaining the STV counsellor list serve.**

## **CONCLUSION**

As demonstrated through the voices of 43 STV Counsellors around the province, funding cuts to provincial programs have resulted in dramatic increases to the challenges faced by women who have experienced violence. It is now much more difficult for women to leave these partners, and many counsellors reported that more are choosing to stay in those relationships due to fear of poverty, fear of losing custody of their children, and lack of other social and legal supports.

Counsellors are also seeing a generalized increase in their clients' levels of distress, and the nature of STV work has changed significantly in an effort to partially fill gaps in social and legal services.

Counsellors are dealing with increased workloads, long wait-lists, and complex counselling challenges, while receiving lower wages than others doing comparable work. Many are faced with uncertainty about their agencies' futures as a result of the elimination of Women's Center funding, and are struggling with reduced hours and less administrative support.

In the face of all this, counsellors are seeking out support for themselves and developing innovative strategies for providing the best service possible with extremely limited resources.

With the huge challenges they are facing, these counsellors expressed a strong need and desire to continue having access to the BCASVACP's annual subsidized training event where they can network with each other and receive training updates on emerging issues.

We hope this brief identification of issues and recommendations will assist the MCAWS Stopping the Violence Branch in its work to support its programs.

