

# **ENDING VIOLENCE**

**Association of BC**

## **2017 Regional Teleconferences Report**

### **Stopping the Violence Counselling Programs**

## OVERVIEW

EVA BC facilitated four teleconference calls with Stopping the Violence counsellors, Stopping the Violence Outreach and Multicultural Outreach workers, and Community-Based Victim Service workers between April 18<sup>th</sup> and 27<sup>th</sup>, 2017. Each call was two hours long. In total, 109 workers registered for these calls.

The calls were grouped by availability and worker's schedules rather than by region as in previous years, with individual workers choosing their preferred dates. The topics for discussion were chosen by participants upon pre-registration. Stopping the Violence counsellors took part in two calls, while Community-Based Victim Services and Stopping the Violence Outreach and Multicultural Outreach Programs jointly participated in two calls.

The following report is a summary of the main topics and issues that came up in the Stopping the Violence Counsellor calls, and highlights of the discussions that took place.

## I. EVA BC UPDATES

Callers were informed of the recent staff updates at the Ministry of Public Safety and Solicitor General (MPSSG):

- Marcie Mezzarobba is the new Executive Director, Victim Services and Crime Prevention
- Rosalind Currie is the new Director of Community Programs/OCTIP, and
- Ally Butler is new Director of Policy, Victim Services and Crime Prevention

Teleconference call participants were also provided with the following brief updates on key EVA BC services, resources and initiatives:

### 1. ONGOING SUPPORT AND SERVICES FOR PROGRAMS

Teleconference call participants were reminded that EVA BC continues to provide support on a daily basis to its almost 230 member programs, including our toll-free help and information line, multiple listservs, newsletters, bulletins, backgrounders, EVA Notes, and the new Resource of the Month. We also provide as many trainings as we can find funding and opportunities for.

#### A. Listservs

This member benefit continues to provide a vital forum for discussion and information sharing among CBVS, Community Coordination Initiatives and STV Outreach/Multicultural Outreach and STV Counselling Programs, Indigenous programs and Executive Directors across BC.

The listservs are moderated by EVA BC staff, who monitor the content of the postings and proactively send out relevant updates and information. EVA BC members can join the listservs by signing up on our website.

#### B. Email

Not all programs are signed up on the listservs so we also communicate with programs via email as well.

#### C. Website

Our website, [www.endingviolence.org](http://www.endingviolence.org), contains a wealth of resources and information for anti-violence workers, including guides and manuals, newsletters and bulletins, EVA Notes, and information on our programs and gender-based violence. We average almost 50,000 visits per month.

**D. Social Media:** EVA BC is active on Facebook, Twitter and YouTube.

**E. Surveys:** EVA also develops and distributes an annual survey to all programs in the province. The last one was sent in March, 2017.

Survey questions were:

1. Service Demands – what changes (if any) are programs experiencing, what are the trends and what are the contributing factors; what strategies are programs using to manage changes in service demand.
2. Sexual Assault Response – specific initiatives and/or coordination activities programs are involved in locally and regionally; experience with Third Party Reporting, including awareness and usage of updated protocols and TPR Guidebook (released November 2015).
3. Women Mistakenly Arrested (i.e. – are police following the primary aggressor policy in domestic violence cases.)

#### **F. New Resources:**

##### **CCWS Newsletters and Bulletins:**

- *Third Party Reporting Protocol Enhancement* (March 2017)
- *Backgrounder: Third Party Reporting for Survivors Under 19* (Feb 2017)
- *Notice: Amendment to Section 13 of the Child, Family and Community Service Act Regarding Domestic Violence* (Oct. 2016)
- *Backgrounder: Disclosing Information in Women Abuse Cases* (Dec. 2016)
- *Also planned - an Information Bulletin to address knowledge gaps regarding in-custody protection orders to keep women free from contact by the offender while he is incarcerated.*

**EVA Notes** - This series of two-page briefing notes is intended to inform anti-violence workers on timely and complex issues. EVA Notes is distributed through the listservs and available on our website. Topics covered since the last teleconference calls include:

- *Bystander Education and Training* (July 2016)
- *When Disasters Strike* (August 2016)
- *Gender-Based Needs Assessment* (July 2016)
- *Advancing Gender Equality* (February 2017)
- *Animal Abuse and Domestic Violence* (March 2017)

**Revised ICAT Best Practices Manual** - The second edition of the *ICAT Best Practices Manual* includes significant changes to sections on privacy legislation, informed consent, file storage, file disclosure, member roles and responsibilities, transfer of files between communities and record keeping. MCFD has updated language on sharing of information and the link between ICAT and VAWIR policy has been made clearer.

**Western Canada Sexual Assault Initiative (WCSAI) Resources** - A number of resources were created as part of the WCSAI that wrapped up in May 2016. All were sent to all programs and can be found on our website:

- *Sexual Assault Support Worker Handbook (updated)*
- *Campus Sexual Violence: Guidelines for a Comprehensive Response*
- *Sexual Assault Disclosure Response Tips*
- *Sexual Assault Information Pamphlets in different languages*

**2016 Regional Teleconferences Report** - A 37-page summary of discussions that took place on the four teleconference calls held in May 2016 for STV Counsellors, Stopping the Violence Outreach and Multicultural Outreach workers, and Community-Based Victim Services workers.

**Newsletters:**

- *Spring and Fall Newsletters*
- *February 2017 EVA-E-News*

A spring print newsletter is in the works. It will feature an article by Dr. Margaret Jackson and retired BC Supreme Court Judge, The Honourable Donna Martinson, that highlights their recently published research on family violence and information sharing between family and criminal courts.

## **2. UPDATES ON TRAINING, PROGRAMS AND PROJECTS**

### **A. TRAININGS:**

**Annual Training Forum: #OurTimelsNow** - the EVA BC Annual Training Forum 2016 took place in Richmond on November 24 & 25, 2016. Legal Services Society of BC partnered with us on this event. Over 300 people attended from across the province – primarily anti-violence workers, but also representatives from police, health, justice, government and academia. 2016 Keynote Speeches from the Training Forum are available on the EVA TV page at: [https://www.youtube.com/playlist?list=PLs3LiiUL\\_7XT\\_6nFdZPeTVRaq3pRHSyAC](https://www.youtube.com/playlist?list=PLs3LiiUL_7XT_6nFdZPeTVRaq3pRHSyAC).

### **Be More Than a Bystander School Trainings**

Be More Than a Bystander conducted almost 50 presentations in schools province-wide, including remote communities. Ex BC Lion JR LaRose has become a very popular speaker, particularly in Indigenous communities, increasing the already strong demand for presentations.

### **Indigenous Be More Than a Bystander Presentations**

Eight Be More than A Bystander Presentations were tailored to and delivered In Indigenous Communities.

**Other Be More Than a Bystander Trainings:** UBC, SFU, BCIT, and Quest University (Squamish) all received either Be More Than a Bystander trainings, or training on best practices for dealing with campus sexual assault.

### **Safe Choices Workshops**

Our Safe Choices program delivered over a dozen workshops about healthy LGBTQ2S relationships and LGBTQ2S women's experiences. in the 2016-17 fiscal year, primarily for service providers who work in the anti-violence field, victim services, social services, and health care settings.

### **Working with Survivors of Gender-Based Violence: Understanding the Neurobiology of Trauma**

EVA BC arranged this well-attended two-day training with Dr. Lori Haskell, offering a discounted rate for member programs.

### **Community Coordination for Women's Safety Trainings**

See below under "EVA BC Programs".

## **B. EVA BC PROGRAMS:**

### **1. Community Coordination for Women's Safety (CCWS)**

CCWS helps BC communities develop new models and improving existing models of cross-sector coordination on violence against women. CCWS delivered the following trainings:

- ICAT Best Practices
- Developing a Collaborative Response to Domestic Violence
- Best Practices in Coordinated Responses to Sexual Violence
- Building and Supporting VAWIR Committees
- Coordinating Sexual Assault Responses
- Domestic Violence Risk Identification, Tools and Techniques
- Forum for Domestic Violence Unit Partnerships
- Third Party Reporting in Cases of Adult Sexual Assault
- ICAT: Updated Best Practices and Information Sharing Parameters
- Information Sharing and Privacy Rights
- Risk Identification and Safety Planning for Indigenous Communities

## **Other CCWS activities included:**

**VAWIR Committee Conference Calls** - CCWS facilitates two conference calls each year for coordination committees throughout the province.

**Provincial Working Group** - The CCWS Working Group, which meets twice a year, is a forum for discussing challenges to the safety of women and children created by policy and program implementation. The Working Group membership represents a broad range of system- and community-based sectors who share their expertise and act as liaisons between their sector and CCWS. The group began meeting in November 2001.

**Community Support** - The CCWS Regional Coordinators and Legal Analyst provide ad hoc consultation, support, referrals, training and resource materials to communities throughout the province on an ongoing basis to help build coordinated, cross sector responses. This support takes the form of one-on-one telephone calls, group teleconference calls, email support, mailing of resource materials and in-person meetings/trainings when feasible.

## **2. Be More Than a Bystander**

This is the sixth year for our Be More Than a Bystander program, a groundbreaking partnership between the BC Lions and EVA BC that sees sports icons from the BC Lions using their status and public profile to create awareness and urge everyone to “Break the Silence on Violence Against Women”.

Three new public service announcements have been airing in-stadium at all BC Lions home games and are available on the EVA TV YouTube channel, along with two messaging videos developed especially for schools.

In the past year we have engaged with communities throughout BC through over 40 in-person school and community presentations; about half of these communities were rural or remote. As of September 2016, the total public reach since the program began was almost 400 million impressions.

A partnership with the BC Ministry of Jobs, Tourism and Skills Training and Responsible for Labour and Encana Corporation resulted in the launch of EVA BC's new training film, *Become More Than Bystanders: Ending Violence Against Women in Resource Industry Workplaces*, in the spring of 2016. The 30-minute video offers the Be More Than a Bystander model as an effective way to prevent violence against women in the workplace. (<http://endingviolence.org/prevention-programs/be-more-than-a-bystander/anti-violence-workplace-training-resources/> ).

EVA BC launched the first annual Be More Than a Bystander Awards at the EVA BC Annual Training Forum in November 2016. This award honours dedicated community members who make outstanding contributions to ending gender-based violence by speaking up, interrupting and confronting harmful language and behaviour within their community, and who demonstrate courage in opposing gender-based violence. The award is an important continuation of the Tony McNaughton Award for bravery in opposing violence, established by the Ending Relationship Abuse Society of BC (ERA BC) in 2004. The first two recipients were high school student Eric Miranda, and anti-violence worker and advocate Melinda Mack.

BMTAB has won several awards, been highlighted in a global session at the United Nations in New York, and been directly responsible for an increasing number of spin-off campaigns across Canada.

### **3. Safe Choices Program**

The Safe Choices Support and Education Program focuses on improving the health and safety of women who are currently or have been in abusive same-sex/gender relationships by empowering women, and by strengthening our communities to respond to this issue.

Our use of the term “women” includes transgender/transsexual women. While the primary focus of the program is lesbian, bisexual, queer, Two-Spirit and trans women, we work to be inclusive of people with various gender identities, as well as gay men in some circumstances.

Safe Choices provides information and tools in the form of community workshops that encourage healthy relationships, as well as delivering educational workshops that focus on LGBT2SQ women’s experiences, for those who work in anti-violence, victim services, social services and health care settings. The program is funded by Vancouver Coastal Health, and training is free in the Vancouver area. Fee for service training are available elsewhere.

### **4. Indigenous Communities Safety Project (ICSP)**

The Indigenous Communities Safety Project provides knowledge sharing to Aboriginal leadership in Indigenous communities related to criminal justice, family justice and child protection. The purpose is to empower Indigenous service providers to assist Aboriginal communities – and especially women and children – to become safer, to be aware of their legal rights, to understand the lethal risk factors and to access services and the justice system if they become victimized.

The new Coordinator Michelle Buchholz has been editing and making updates to the curriculum and presentation materials. This has allowed the integration of the

Truth and Reconciliation Commission of Canada's report on the residential school system and subsequent 94 Calls to Action. It has also allowed for the inclusion of the United Nations Declaration on the Rights of Indigenous Peoples.

## **5. BC Missing Women's Network**

EVA BC continues to partner with the RCMP "E" Division's BC Missing Persons Center and the Surrey Women's Centre to run a province-wide BC Missing Women Network. The primary intentions of the BC Missing Women Network are to:

- Locate women and children who have experienced or are at risk of experiencing violence that could result in serious bodily harm or death.
- Protect the anonymity and whereabouts of women and children who are fleeing violence, particularly in cases where their estranged partner or other extended family reports them as missing.
- Stop alleged abusive partners from exploiting police resources to find and gain access to women fleeing abusive relationships.
- End the impasse that can occur between women-serving agencies protecting the rights of women fleeing violence to access confidential services; and police investigating a missing person report.

Police from across the province provide notices of missing women to EVA BC, who in turn fan out that notice to service providers in the relevant region(s). The service providers are then able to advise the appropriate police force, the BC Police Missing Persons Center and/or EVA BC of the circumstances of the missing person – if they have seen her; whether or not she is safe – and also to act as a bridge in those cases where the police wish to touch base with that woman, if it is appropriate to do so. Members of the network who wish to remain anonymous may request that EVA BC forward information to the relevant police force on their behalf.

In keeping with the spirit of locating missing women, the mandate of the Missing Women Network's mandate was expanded to include the occasional circulation of descriptions of women whose remains have been located, but have yet to be identified. These descriptions include information about hair colour, clothing, distinctive marks, tattoos, etc., and where and when the remains were located. It is hoped that service providers in women-serving agencies may recognize a past client that they or a colleague worked with - possibly one who quit coming to appointments or to access services unexpectedly.

The Network will also begin to fan out bulletins of historical "cold" cases of missing women. It is hoped that this expansion of the Network mandate can help to return these unidentified women to their loved ones, so that they may provide them an appropriate resting place, and gain some much-needed closure.

## **6. Melissa Chatham Memorial Fund**

On September 21, 2008, 24-year-old Melissa Chatham was tragically taken from her family and friends in an act of violence. At the request of the Chatham family, EVA BC has set up a memorial fund in honour of Melissa's life. EVA BC continues to feature the Melissa Chatham Memorial Fund on our website in the "Donate Now" page. Donations are used to support other young women across BC who face violence in their relationships.

We were contacted by Melissa Chatham's stepmother about a dragon boat for survivors including family members, survivors, and advocates, Warriors on Water. Warriors on Water honours Melissa's memory, and also provides the support for survivors. We are assisting them by providing web pages for them on the EVA BC website.

## **C. MISCELLANEOUS PROJECTS AND ACTIVITIES:**

Some of the projects and activities that EVA BC worked on over the year that may be of interest to our programs are:

### **BC Campus Sexual Assault Project**

This new project was funded by a CFO grant from the Province of BC, involving project partners from secondary education campuses and the anti-violence programs in four communities across BC. As well, EVA BC has been participating in consultations with the Ministry of Advanced Education on proposed response by universities and colleges to sexual assault on campus on an ongoing basis.

### **Canadian Domestic Homicide Prevention Initiative for Vulnerable Populations**

EVA BC is one of more than 40 community service organizations, government departments, and universities who have joined together to better understand and address domestic homicide through the creation of the Canadian Domestic Homicide Prevention Initiative for Vulnerable Population (CDHPVP). The 5-year national project is funded by the Social Sciences and Humanities Research Council (SSHRC) and focuses on risk assessment, risk management, and safety planning to prevent domestic homicides and will focus on four vulnerable populations. EVA BC will be working closely with researchers and other partners from across the country, including the FREDA Centre for Research on Violence Against Women and Children (Simon Fraser University).

### **Ending Violence Association of Canada (EVA CAN)**

The CFL announced its Policy on Violence Against Women in August 2015. Under the policy, teams are mandated to receive annual training on violence against women. The CFL negotiated with EVA CAN to develop training for all the CFL teams, and EVA CAN contracted EVA BC to do the work.

### **Community Vitality Index (CVI)**

EVA BC is a member of the Advisory Group for this project focused on measuring and tracking women's wellbeing in resource industry communities.

### **Research Project with BC Women's Hospital**

We are involved in a new research project with BC Women's Hospital – *Changing Perceptions: Reimagining Sexual Assault to Better Support Survivors*. This is funded by the Vancouver Foundation.

### **Immigration Work Team**

Ongoing liaison with Vancouver Police Department, Ministry of Justice and Ministry of Children and Family Development to find solutions to the issue of sponsorship debt accrued by abused women.

### **Assaultive Men's Treatment Program Evaluation**

EVA BC is involved in the development phase of this new project, assisting with the evaluation plan, to evaluate programs receiving MPSSG funding for assaultive men's treatment services through their *Supporting Healthy Relationships* initiative.

### **DAWN Canada**

We are on new national committee with DAWN Canada; they have funding for a multi-year project regarding awareness of women with disabilities/violence.

### **Disability Alliance BC (DABC)**

EVA BC is working with DABC on a project to develop videos and fact sheets for survivors of gender-based violence who are living with disabilities.

### **The Justice Robin Camp Inquiry**

EVA BC participated in the coalition of women's organizations that was been granted intervener status in the Justice Robin Camp inquiry, along with the Avalon Sexual Assault Centre, the IAAW - Institute for the Advancement of Aboriginal Women, METRAC (Metropolitan Action Committee on Violence Against Women and Children), West Coast LEAF, and LEAF (Women's Legal Education and Action Fund).

### **Canadian Domestic Homicide Prevention Initiative for Vulnerable Populations (CDHPVP)**

EVA BC is participating in this national project led by researchers at Western and the University of Guelph in Ontario. The 5-year national project is funded by the Social Sciences and Humanities Research Council (SSHRC) and focuses on risk assessment, risk management, and safety planning to prevent domestic homicides and will focus on four vulnerable populations.

**Canadian Judicial Conference**

EVA BC Executive Director Tracy Porteous co-delivered a presentation, *From Harassment to Homicide*, to approximately 175 provincial court judges at the Canadian Judicial Conference.

**Canadian Chiefs of Police**

Tracy Porteous was a member of a sub-committee of the Canadian Chiefs of Police to help them develop a national framework on police investigations into Intimate Partner Violence (IPV).

## **II. STOPPING THE VIOLENCE COUNSELLORS TELECONFERENCE CALLS SYNOPSIS**

### **Requested Agenda Items:**

(NOTE: These agenda items were requested by the programs prior to the calls. Similar items from both calls have been combined to avoid repetition.)

1. High caseloads and waitlists
2. Updates to procurement
3. Rural issues
4. Resource sharing
5. Family law act (impact on survivors of abuse in terms of parenting responsibilities, safety, co-parenting, legal or financial abuse)
6. Working with older women
7. Training
8. Trauma informed practice (TIP) symposium
9. How mid-range work is defined given what we know about TIP
10. Coordination to avoid doubling up of services
11. Using the listserv to communicate with counselors in the same region
12. How can we support our clients in their poverty?
13. Funding and wages
14. Fee for service
15. Intake process
16. Clinical supervision
17. Blurred lines of victim/accused in domestic violence cases
18. Provincial election questions

## Discussion Around Agenda Items

### 1. High Caseloads and Waitlists

Many STV Counsellors spoke of increasing demand for their services, having to start or expand waitlists for counselling, and “having to do more with less”. The discussion centered around how to triage women during intakes, how to manage waitlists, offering groups for women on waitlists, using practicum students, and calling upon other service providers, such as Mental Health or Community-Based Victim Services to also work with clients.

#### Comments:

*“I work part-time, only two-and-a-half days a week. I do triage, and we have a mental health team, which is very helpful. I now find myself seeing 10 to 12 women a week, so I am thinking of having a waitlist for the first time.”*

*“We have more resources [in my community now], but we still don’t have enough.”*

*“I am full-time, and we usually see 35 to 40 women every month, including women who only access our groups. We try to see women at least every two weeks. What has helped is having some longer practicums with Masters students.”*

*“We had a Master’s student last year, and she had a large caseload. It really helped.”*

*“I have not found groups very helpful in a small community, because trust issues are quite big, and confidentiality is broken a lot.”*

*“Group preparation takes a lot of time.”*

*“I am full-time, and my co-worker is part-time. Last month we had 41 active clients. Our waitlist is currently at 37, and the wait can be longer than six months.”*

*“I don’t generally have a waitlist of more than a few women. If someone is in crisis, I’ll try to get them in within a week.”*

*“So far I have managed not to have a waitlist, but this year it looks like that is going to change, because I’ve been getting up to 20 referrals a month as opposed to 10 to 15 before.”*

*“We are getting a lot more referrals. It used to be an average of seven to ten referrals a month, and last month it was 35 referrals. We have been trying to*

*meet the need with first and second stage groups. So now we have a waitlist for groups. I think there are 112 women waiting right now.”*

*“Before we started doing groups, our waitlist for one-on-one counselling was over a year, or around 140 women. Now they can finish group and be in one-on-one counselling in about a month.”*

*“We have a VS Program and an Outreach Worker, and all my referrals come through the agency. They do an assessment and help with the immediate issues like housing. So when they come to me, they are quite ready for counselling.”*

*“I keep a list of women who really need to be seen right away, but I don’t have any spaces. I call them if I get a cancellation. But they still stay on the waitlist while they are waiting for a spot.”*

*“Part of our intake process is to assess for safety. In our triage, we also include questions about catchment area, and prioritize women from our community. We also check to see if she has access to other supports.”*

## **2. Updates to Procurement**

All programs remain very concerned about plans government has relating to any procurement process and the possible impacts on their programs. These concerns remain:

- Potential for outsider organizations to bid on contracts (this has been the experience for service providers in other sectors).
- Potential for a loss of services being provided by organizations with feminist perspective.
- Potential for community coordination efforts to be impacted negatively.
- Service delivery disruptions.
- Negative impacts on clients.
- The time that would be required to complete the RFP process

EVA BC advised there were no significant updates on procurement since November of 2016. MPSSG are not proceeding with general open procurement activities for contracted victim services and violence against women programs at this time, and have extended current contracts through March 31st, 2018. MPSSG is now awaiting direction from the new government post-election, and predict there will be no news until the fall of 2017.

Callers were referred to the Ministry of Justice’s “Procurement of Victim Services webpage at: <http://www2.gov.bc.ca/gov/content/justice/criminal-justice/victims-of-crime/service-providers/procurement> for more information and to stay updated, and to their MPSSG Program Manager for information around their specific contracts.

## **Comments:**

*“All we received the email notifying us that the contract was being extended, but no more information. We are really hoping to hear something soon that we can plan our budget and know what things are going to look like.”*

*“So I guess no news is good news, but we’re basically in limbo still.”*

*“Going through the instability and the not knowing is so unfair and unnecessary. Especially for barely funded programs that are already trying to figure out how to make the little funding that they have work.”*

*“It’s really hard to plan service delivery with procurement hanging over our heads.”*

## **3. Rural Issues**

There are special challenges in working in rural communities, including distance to services, lack of transportation, lack of other resources, cost of transportation, childcare, infrequent sittings, intersecting relationships, difficulty obtaining affordable and private counselling space, and privacy concerns in a community where everyone is known to each other. Callers also spoke of the challenge of working with clients with co-occurring mental health issues, etc., in small towns with no mental health counsellors, and receiving referrals for non-violence related traumas, because there is no other service provider in the community.

## **Comments:**

*“You have a lot of dual relationships, and even triple. Your boundaries have to be very clear.”*

*“My program doesn’t have the funds for me to get out as far as I need to for the rural communities that I work with in order to facilitate groups for the women that need them. In my service area, I drive a couple of hundred kilometers to reach women.”*

*“My catchment area goes about 30 kilometers to the east, and another 30 kilometers to the west, with numerous communities in between. There’s no funding for me to travel anywhere, so the women have to be able to come here to access counselling.”*

*“I know the Outreach program has a small budget for bus tickets, so occasionally I ‘borrow’ tickets from Outreach. But I would like to see some money in our budget for the women who are poor and need transportation.”*

*“In the past, people have come a six-hour drive to see me. In those cases, people got funding from their band for transportation, and for accommodation when they were here.”*

*“We have a gas fund that was procured by our transition house that can provide gas cards.”*

*“Some of the barriers we have here are that we don’t have public transportation, so many of the client live in such poverty that they don’t have vehicles, or they are so isolated from everyone they don’t have someone they can catch a ride with.”*

*“I’m meeting women in their homes when it’s safe to do so. That has been very favourable and welcome. However, I’m aware that something like that is not sustainable with the current level of funding.”*

*“I’m having to meet women at business locations if we can find a quiet corner somewhere. Or sometimes I will meet them and we will just go for a walk. Those are the only options I have available to me.”*

*“You have that ‘fishbowl syndrome’. People get to know who I am, and what I do.”*

*“If women feel uncomfortable, we can meet them at the back door and let them in.”*

*“I’ve started doing Skype calls with women. I like it better than just telephone calls, as you’re still able to have that face-to-face. It’s been working well so far.”*

*“I used to coordinate rides for myself and my clients with different bands, such as with their Health Unit Team. I have also met clients anywhere and everywhere – at a Health Unit, in a Maternal Clinic, at the hospital, and at the church.”*

*“I have taken on clients that appeared to be outside of my mandate, but as I start asking questions, I often find that under the loss that is the presenting issue, there was also abuse early on. I find that so many women have had experience with some form of abuse or violence.”*

*“They’ll present with lots of non-trauma or non-violence related issues, but the violent history always seems to come out by the end of two or three sessions. There’s often multiple complex trauma going on.”*

#### **4. Resource Sharing**

Participants shared some of the resources they found most helpful, informative and/or inspiring for themselves while doing STV work, or for their clients. A list

was compiled and sent to the callers after the call. EVA BC will also request that Odin Books stock these titles at their table at the 2017 ATF. There was also discussion around whether or not callers lend books to clients (most do, knowing they may or may not be returned), and how to fund lending libraries.

Some communities also have Parenting Coordinators. Parenting Coordinators are experienced family law lawyers, counsellors, social workers, family therapists and psychologists who have special training in mediating and arbitrating parenting disputes, and in helping separated parents recognize the needs of their children. They can help parents carry out and resolve disagreements about how parenting agreements or orders are put into effect, and make binding determinations (that don't contradict or change a court order). Callers were referred to <http://www2.gov.bc.ca/gov/content/life-events/divorce/family-justice/who-can-help/parenting-coordinators> and <http://www.bcparentingcoordinators.com/> for more information. It was also mentioned that the Representative for Children and Youth can be a valuable advocate and resource for children (<https://www.rcybc.ca/>).

There was also a discussion around the importance of support groups as a resource for clients, in particular those on a waiting list for one-one-one counselling.

#### Recommended Resources:

- 1) *101 Trauma-Informed Interventions* by Linda Curran  
Amazon.ca link: <https://www.amazon.ca/101-Trauma-Informed-Interventions-Activities-Assignments/dp/193612842X>
- 2) *The Dialectical Behaviour Therapy Skills Workbook: Practical DBT Exercises for Learning Mindfulness, Interpersonal Effectiveness, Emotion Regulation, and Distress Tolerance* by Matthew McKay, Jeffrey Wood and Jeffrey Brantley  
Amazon.ca link: <https://www.amazon.ca/Dialectical-Behavior-Therapy-Skills-Workbook/dp/1572245131>
- 3) *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* by Bessel van der Kolk, M.D.  
Amazon.ca link: <https://www.amazon.ca/Body-Keeps-Score-Healing-Trauma/dp/0670785938>
- 4) *The Gifts of Imperfection: Let Go of Who You Think You're Supposed to Be and Embrace Who You Are* by Brené Brown  
Amazon.ca link: <https://www.amazon.ca/Gifts-Imperfection-Think-Supposed-Embrace/dp/159285849X>
- 5) *A Bright Red Scream: Self-Mutilation and the Language of Pain* by Marilee Strong

Amazon.ca link: <https://www.amazon.ca/Bright-Red-Scream-Self-Mutilation-Language/dp/0140280537>

6) *8 Keys to Safe Trauma Recovery: Take-charge Strategies for Reclaiming Your Life Paperback* by Babette Rothschild

Amazon.ca link: <https://www.amazon.ca/Keys-Safe-Trauma-Recovery-Take-charge/dp/0393706052>

7) *Boundaries Where You End and I Begin: How to Recognize and Set Healthy Boundaries* by Anne Katherine M.A.

Amazon.ca link: <https://www.amazon.ca/Boundaries-Where-You-End-Begin/dp/1568380305>

8) *Splitting: Protecting Yourself While Divorcing Someone With Borderline or Narcissistic Personality Disorder* by Bill Eddy and Randi Kregar

Amazon.ca link: <https://www.amazon.ca/Splitting-Protecting-Borderline-Narcissistic-Personality/dp/1608820254>

9) *Roads to Safety: Legal Information for Older Women in BC* from West Coast LEAF

Available for free download at: <http://www.westcoastleaf.org/roads/>

Accompanying workshop webinar and multilingual wallet cards available at: <http://www.westcoastleaf.org/our-workshop/older-womens-rights-matter/>

(\*Also attached as a PDF)

10) Books and meditations by Tara Brach: <https://www.tarabrach.com/books-cds/>

11) Free online mindful meditations from UCLA Mindful Awareness Research Centre: <http://marc.ucla.edu/mindful-meditations>

## 5. Family Law Act

There was discussion around how we in the field are still watching and learning about how the “new” (as of 2013) Family Law Act is being interpreted by and playing out in the courts. Clients, especially clients with children, are being impacted in many areas, including shared parenting responsibilities, safety, and legal or financial abuse.

Callers were referred to the Legal Services Society “Family Law in BC” webpage at: <http://www.familylaw.lss.bc.ca/> for more information on legal aid and family law, and to the LSS Family LAWLine at: [http://www.familylaw.lss.bc.ca/help/who\\_telephoneAdviceLine.php](http://www.familylaw.lss.bc.ca/help/who_telephoneAdviceLine.php).

They were also referred to the Rise Women’s Legal Centre, as they have a province-wide mandate: <https://womenslegalcentre.ca/>. It was also pointed out that West Coast LEAF has a Family Law Project (which includes the RISE

Centre), and will intervene in cases that have important consequences for family law.

Callers were also reminded about the Parenting Coordinators mentioned in the discussion on resources.

**Comments:**

*"I had hoped that the new Family Law Act would improve the situation for women, and I'm not really finding that it has in many respects. It has in terms of protection orders, but when it comes to parenting time and everything else, the assumption is that there will be co-parenting. But when you've got one partner who's abusive, how does the victim manage the co-parenting stuff?"*

*"On the one hand you have MCFD breathing down women's necks to protect their kids, but on the other hand you have family court designating co-parenting. How does a woman protect her kids in that circumstance, when she's aware that he's doing things that she believes are harmful?"*

*"If women feel like the children are in harm or danger when they are with the father, they really need to call the Ministry about that. If they don't, it appears that they are consenting to it. It's really important. They don't need to worry about if they can prove it, or that he will know it was them. They can report anonymously and there has to be an investigation."*

*"The women that I have spoken with that have tried to do that have been dismissed by MCFD – 'Oh, that's a family matter. We don't deal with that'."*

*"Log everything."*

*"Our agency runs an eight-week program for separation and divorce for men and women, about how to manage conflict after separation. Of course, we wouldn't have both parents in the same group."*

*If there's been violence and the parents are separating, mediators can do a shuttle mediation where the parents are in separate rooms, or in separate locations, or sometimes on separate days. At least the parents don't have to wait months and months to get into court, or pay a lawyer. The average mediation takes 4 to 6 hours. The Ministry of Justice also has free mediation available through Family Justice Centres."*

*"Collaborative family law is also a route to go with separation that's high conflict. You have two lawyers in the room, buffering any behaviours that might be risky."*

## 6. Working with Older Women

There was discussion around additional barriers faced by older women in abusive relationships. These include ageism, physical and mental health challenges (theirs and their partners'), economic dependence, joint assets, not wanting to leave a home where they have lived for many years, limited and/or fixed incomes, social isolation and/or a lack of supports, a reluctance to access services they see as intended for younger women, and the effects of years of trauma – often with the abuser never being held accountable for his behaviour. Older women may have been minimizing, rationalizing and justifying the abuse for many years. Some STV counsellors are also hearing more reports of drug-facilitated sexual assault (DFSA) from older women.

Callers were referred to the following resources for working with older women: Seniors First BC at: <http://seniorsfirstbc.ca/>, Roads to Safety: Legal Information for Older Women in BC from West Coast LEAF (available for free download along with an accompanying webinar at: <http://www.westcoastleaf.org/roads/>), and the Raising the Profile Project at <http://www.seniorsraisingtheprofile.ca/>.

### Comments:

*"I've noticed more and more women after 35 years of marriage and so on seeking assistance."*

*"It takes real courage to come forward after years of abuse. It's so deep why they stay so long. It's about finances and children and that deep trauma from childhood – fear of abandonment and rejection."*

*"I've had several [older clients], and mostly it's due to dementia in their husbands. He may have been delightful all their life, and he's suddenly pushing them and angry. They don't want to leave him because he's sick. They are in a really awful place."*

*"I'm dealing with a lot of older women where that's just their life history. So many of them have health issues that are exacerbated by all the trauma."*

*"And now women are being abused by the adult children that they raised. Especially if they have addiction issues."*

*"Most of the resources I found [on DFSA] are geared towards high school and young women – not to women who are older."*

*"I have had a handful of women in their sixties who have experienced [DFSA]. One woman said to me, 'I didn't go to the bar; I went to the lake. It was in the afternoon. All of a sudden I was in his motor home, and couldn't remember anything.'"*

*“West Coast Leaf’s publication ‘Roads to Safety: Legal Information for Older Women in BC’ does address the issue of sexual assault and safety planning.”*

*“The average rapist’s weapon of choice is still most often alcohol. That wouldn’t always be identified as a drug facilitated sexual assault.”*

## **7. Training**

STV counsellors have expressed a great deal of interest in EMDR training. There was discussion around how EMDR training is restricted to those with Masters degrees (or graduate students with appropriate supervision) who belong to a professional organization with a Code of Ethics, the high cost (almost \$2000), the requirement for consultation, and whether or not EMDR falls within the STV mid-range counselling mandate (there was consensus that it does). EVA BC was able to arrange an EMDR training that included counsellors with their Masters through the American EMDR Humanitarian Assistance Programs ten years ago, but there was some backlash to it being offered to those who normally would not qualify. Those without Master’s were able to take it on an unofficial basis – they could audit the training, but not receive a certificate nor be able to call themselves EMDR clinicians.

Callers were invited to request workshops for this fall’s Annual Training Forum in areas where they feel they could benefit from training.

Callers were sent a link to information on the BC Job Grant Program’s cost-sharing program for training following the call. (<http://www.canadabcjobgrant.com/?gclid=EAlaIQobChMI-b6pocKR1QIViVx-Ch05-gaWEAAYASAAEgKQG D BwE>).

### **Comments:**

*“I did the EMDR training offered through EVA back around 2007, and it was \$900 back then. It was great training. I use it a lot with people.”*

*“I would be really interested in EMDR training, even if there was a cost to me.”*

*“EMDR is the preferred treatment for women survivors of violence.”*

*“I usually have an easier time ‘selling’ professional development to my agency when EVA is behind it.”*

*“I would really like training on eating disorders and trauma. We deal with a number of women who have eating disorders as well as trauma.”*

*“Something on women with developmental disabilities who have experienced sexual assault would be helpful.”*

*“I’m wondering if there is something through the BC Job Grant Program that might be able to subsidize the cost of doing EMDR training for STV workers? I know that it applies to our sector.”*

*“One thing that I really appreciated about last year’s ATF was the intersectionality and the cultural diversity of the speakers. It was really inspiring.”*

*“I’d love to see something about protection orders and peace bonds. Some of my clients are running into some contradictory information.”*

## **8. Trauma Informed Practice Symposium**

There was discussion about the March Trauma Informed Practice Symposium for Justice, Public Safety and Anti-Violence Community Sectors. The Symposium is part of a five-year project to develop and implement a cross-sector, trauma informed practice training, education, and awareness curriculum for the justice and public safety sector, with financial support from Department of Justice Canada. Callers were impressed with the quality of presenters such as Dr. Lori Haskell and Dr. John Briere, and were pleased that the understanding of the impacts of trauma upon survivors is gaining, especially among mainstream systems.

Callers were sent a link to the videos from the Symposium after the call (<https://mediasitemob1.mediagroup.ubc.ca/Mediasite/Catalog/catalogs/TIP-2017-SYMPOSIUM-SESSIONS>).

### **Comments:**

*“I found it really inspiring, and thought the focus on intersectionality was really great.”*

*“I enjoyed John Briere’s talk. I would love to see him at EVA’s annual training forum.”*

## **9. How Mid-Range Work is Defined Given What We Know About TIP**

Callers were wondering how “mid-range counselling” is being defined. There was discussion around how STV work often needs to be more advanced than what many would consider “mid-range”, given the extensive, complex and repetitive nature of the trauma experienced by many clients. In addition to general counselling knowledge and skills, STV Counsellors require knowledge of the historic and systemic oppression of women, feminist practice and analysis, principles of women-centered service, the dynamics of crisis, theories of women and self-esteem, effects of historical sexual, physical and/or emotional abuse on individuals and parenting, impact of trauma on brain and memory, dissociation, attachment theory, the law as it relates to sexual and domestic violence,

principles of vicarious traumatization, psycho-tropic medications, working with a harm reduction framework, stabilization, principles of advocacy, etc.

There was also discussion about the wide range in the work STV counsellors are doing, and the different approaches being taken to the work.

This led into an associated discussion about the program name “Stopping the Violence” being misleading, not speaking to the work being done, being a possible barrier to clients seeking service, and appearing to put the onus on women to stop the violence.

Callers were emailed the 2010 EVA BC Backgrounder *Defining Stopping the Violence Counselling* following the call.

### **Comments:**

*“Best practice is showing the need to incorporate everything we’re learning about trauma informed practice – going slowly, the importance of safety in relationship, and working in stages. I’m wondering how that could potentially impact contracts and funding and how our work is viewed in the future.”*

*“Is there the possibility that the longer-term work could be acknowledged and supported, given what we’re learning? Or will it still be seen as what we’re doing in STV is mid-range or more short-term?”*

*“I know there’s a huge range in training and experience in [STV counsellors], and in how they do the work.”*

*“By necessity, we’re really working above mid-range, and well into clinical counselling.”*

*“When I started this work many years ago, I never thought I’d be doing it the way I am doing it now. I thought I’d just be working with domestic violence, and women leaving abusive partners. It’s definitely evolved way, way beyond that in terms of the trauma and PTSD work. I’ve made it my business over the years to get training in the trauma stuff, and did a lot of courses.”*

*“The name of the program, ‘Stopping the Violence’, is really a misnomer, and it’s actually a bit of a barrier to women accessing services. Nine out of ten of my clients have come to me as a referral and said, ‘I don’t know why I’m being referred to your program. I’m not being beaten. It’s more emotional and verbal and psychological abuse.’”*

*“I’m constantly having to have that conversation about ‘Yes, this is the name of my program, and this is actually what I do’.”*

*"I think renaming the program should be looked at. It's kind of misleading. It doesn't speak to the trauma work that we are actually doing."*

*"Even with service providers, when I go out to the community and talk about what my program is, I'm often having to explain, 'Yes, the work violence is in our name, but it is not inclusive of everything that we do.'"*

*"I've always thought it was kind of an awkward name. Who wants to tell people, 'I'm going to go see my Stopping the Violence Counsellor?'"*

*"It reinforces that stigma – if you're not being beaten, then just get over it. It's not that bad."*

*"It almost trivializes what we do. It speaks more to an advocacy role than a counselling role."*

*"It makes it sound like women are responsible for the violence, and by working with women we can stop the violence. It's very victim blaming in that sense."*

*"For me, having the word 'violence' in there is also an acknowledgement of where the trauma comes from. I think it's important to still recognize that the violence is mostly perpetrated by men on women, and keep that feminist lens."*

## **10. Coordination to Avoid Doubling Up of Services**

There was discussion around clients from outside of an agency's catchment area accessing STV services, or accessing more than one STV program at the same time. Consensus was that it's understandable that some women might want to seek service outside of their home community for confidentiality reasons, because of an existing relationship with the STV counselor, or because a partner or another family member are already seeing that counsellor, especially in smaller communities. But it can be problematic when women are receiving service from more than one agency, while other women are waiting for service. It was suggested that this be addressed directly during the intake process.

### **Comments:**

*"We have started asking women directly if they are accessing STV services elsewhere before we take them into our program."*

*"There have been quite a few instances where women I am seeing have reported accessing services in two places. Considering the length of time women wait to access service, this makes me uncomfortable."*

*“I remember one particular case where there was a woman who was accessing four STV programs at once. She was seeing four counsellors for the same issue.”*

*“I know my colleagues in the Lower Mainland have also reported this.”*

*“How do we respect confidentiality while making sure that the largest amount of women can access our program?”*

*“Being bound by confidentiality, it’s a bit of an issue as to how to sort this out.”*

*“Would it be possible to establish some kind of anonymous database using a numbered system?”*

*“Does it happen frequently enough to make it worthwhile?”*

## **11. Using the Listserv to Communicate with Counsellors in the Same Region**

Many STV counsellors would like an easy way to network and communicate with fellow STV workers in their region. There was discussion about whether or not the listserv was an appropriate tool for that, given that anything posted goes out to programs across the entire province. It was pointed out that a lot of workers find it a waste of time to get emails or messages that are not relevant to them. It was suggested this might be a task for an EVA BC administration support person.

### **Comments:**

*“I would like a way to set up regional meetings, but I don’t really want to post province-wide. But I don’t have email addresses for everyone in the region. So how do I do that?”*

*“When I first started this program, EVA used to coordinate regional conference calls that would happen once a month or something. But that was before everyone had email.”*

*“I too see a need for something more regional.”*

## **12. How Can We Support Our Clients in Their Poverty?**

Throughout the calls, STV counsellors from across the province described poverty, lack of affordable housing, lack of transportation and a lack of childcare as barriers to women escaping abuse and accessing needed services. Workers are struggling to support women with intersecting issues, including poverty, homelessness, immigration issues, mental health challenges and addictions.

Especially in rural and remote communities, there can be few resources and services to refer clients to.

The lack of affordable housing crisis comes up repeatedly as a major barrier to clients attempting to escape abusive relationships province-wide, and every participant on the call reported that it is a serious problem in their community. Clients are remaining in abusive relationships or returning to their abusers because there is simply no place for them to go. This is especially true for women with pets. Clients are also forced to stay longer in transition houses and second stage housing because they cannot find affordable housing, making fewer beds available for others trying to escape abusers.

Callers were referred to the EVA Notes *Animal Abuse and Domestic Violence* for information on safety planning for women with pets, and to the Homeless Prevention Program:

<https://www.bchousing.org/housing-assistance/homelessness-services/homeless-prevention-program>.

#### **Comments:**

*“We have a real housing issue here, and poverty. With no housing, there are more women coming into the office with anxiety and abuse. Transition houses are full, and they are keeping the clients longer. Our second-stage housing is also keeping them longer, or the women would be on the street.”*

*“My organization is getting \$4 to 5 million dollars to build 52 units. It will still be one or two years away, but it is good news.”*

*“My agency is putting up low cost housing, but it’s going to be full in ten minutes.”*

*“Affordable housing is a huge issue in my community. It’s a very poor area, and there’s limited low income housing. One of the things I really struggle with is that we do have one housing unit, but the people have to be involved with MCFD or Mental Health. It’s really discouraging the women to work and get better, because as soon as they [are no longer involved], they have to move. And there’s nowhere for them to move to. It horrifies me.”*

*“Because we have no real transportation in [my community], I do go out and see women in their homes. Some of the housing is so sub-standard – unbelievably substandard.”*

*“In [my community], we have the added challenge of someone thinking they have secure housing, then in the middle of May being told, ‘You have to leave, because I’m renting it through Airbnb for the summer. We’d love to have you back in September.’ In the meantime, what is she supposed to do?”*

*“Some of the sponsored immigrants are not even eligible for these [housing] assistance programs, because of the breakdown of sponsorship or their immigration status.”*

*“I have a client who is a mother of two children who has been trying to leave an abusive relationship for six months, but her income is less than \$2000. She finally found a place for \$1,550. You can imagine what kind of poverty she and her children are going to live in from now on.”*

*“It’s heartbreaking to know that women will end up living with violence because they can’t afford to leave. Women who stay in violent relationships can end up dead.”*

*“I think we just have to keep advocating for more resources, and keep each other in the loop when new resources become available.”*

*“There’s quite a few women here in [my community] who are taking international students into their home. They get paid about \$1000 a month. There’s lots of junior high and high school students who are international students.”*

### **13. Funding and Wages**

STV programs and workers continue to struggle with a lack of funding, low wages, little or no benefits, staff turnover, long waitlists, and the pressing need to do more with less in the face of ever-increasing demands for service, and increasing costs for service delivery.

As part of the discussion, callers were asked if they were in favour of the STV mandate being widened to include women aged 14 to 19.

#### **Comments:**

*“We talk about this every year, and nothing ever changes.”*

*“When was the last wage increase for STV? I know it was a long time ago, but I don’t know when. I don’t think there’s been any major increases since 2008.”*

*“I’ve been doing this for 17 years, and I still don’t have a pension plan, and my wages are still not comparable with what Mental Health gets, even though my work is pretty comparable.”*

*“I look at the situation and I go, ‘Okay, we have a government that has a two-billion-dollar surplus and they are going into an election, and they don’t see any political capital to be made by improving the funding to these programs’. That says to me that we need to be rethinking our strategies.”*

*"I don't think this issue is going to change unless it becomes public. No one is aware how poorly these programs are funded. People are shocked when they learn that I don't have a pension plan."*

*"I wonder if there's a role for our unions to play in advocating for this?"*

*"A few years back, the Children Who Witness Abuse counsellors were able to get their job split into two different wage grids – so if you were taking courses in art therapy or play therapy for kids, you went into a higher grid. I wonder if that's been looked at for STV Counsellors? So if you're taking trauma-informed courses, you're put into a higher wage grid."*

*"Why is there such disparity in STV wages across BC? Is there any minimum and maximum for our kind of work?"*

*"I would want additional training to work with clients under the age of 19."*

*"It's a whole other ball game working with someone that young."*

*"Even the clients I work with that are 19, 20, 22 or 23, it's a whole different ball game working with them than working with older adults."*

#### **14. Fee for Service**

Callers were curious about non-profits doing fee for service work as a way of increasing revenue. A number of non-profits offer fee for service counselling through the Crime Victim Assistance Program or Work BC. Others are interested in pursuing it. There was concern that providing fee for service could result in longer waiting lists or less service for women who can't afford to pay for counselling, or give the false impression that free services are not needed.

#### **Comments:**

*"Our fee for service counselling is working really well. We have been doing it for four years now."*

*"I worked for an agency where I did fee for service for anyone who could afford to pay, and it worked really well."*

*"CVAP is not an option for many sexual assault survivors, because of the numbers that do not get approved. That creates a two-tier system for those who get to go that route and get taken off the waitlist, and those that choose not to report, or aren't approved."*

*"I think we need to be careful that we don't set up a situation where women who can't afford to pay have to wait even longer."*

*“If we were getting in some fee for service clients you could potentially expand your hours. You would have the funds to do it.”*

*“We don’t get paid for the intake, or if they don’t show, when we do fee for service.”*

*“Mine is such a small community that everybody knows everybody. We need people to help the men – we are only dealing with half the problem – but we would be dealing with the abusive partners of the women that are coming in. We would need to employ someone who would just work [fee for service] with the men.”*

*“We struggled with that, and we still do. It means a lot of communication between staff so that doesn’t happen. With some cases, it’s a balancing act.”*

## **15. Intake Process**

Callers wondered how other agencies handled intakes. Different agencies use differing intake processes, dependent on agency structure and resources. There was consensus that all initial intakes should involve some sort of risk identification process.

### **Comments:**

*“We find that we are spending a lot of our time doing intakes rather than counselling, especially when we have 20 or more new referrals in a month.”*

*“Our intakes come through our 24-hour crisis line. It’s not done by [STV] program staff. That’s one of the ways that we are supported by the organization as a whole.”*

*“I’ve heard that some agencies use volunteers to do intake, and I wasn’t sure how that would work.”*

*“When people call in they are speaking initially with the admin person, and she takes down all the pertinent information and does a brief screening for safety. Then that person gets referred on to the counsellor or the waitlist or whatever the situation is, who then does a fuller intake.”*

*“At our agency, because the clientele we serve are the ones with limited or no English, it’s usually the staff person [speaking her language] who gets directly connected with the woman and does the intake process at the same time.”*

*“Often if they go directly onto the waitlist when they first call and they are in crisis, sometimes the crisis is passed by the time the counselling begins.”*

*“Or they could be at risk and you don’t know, because they are sitting on a waitlist.”*

*“I see people as quickly as I can for an intake. If I can’t get them in right away for one-on-one, I have an ongoing process group – it’s not a drop-in group – and some women will filter in that way, so at least I have contact every week to see where they’re at. And I always let people know, ‘If I have met you for an intake, you can phone me’.”*

## **16. Clinical Supervision**

Callers were wondering how other agencies and STV programs are structuring their clinical supervision. A common practice is for STV counsellors to get clinical supervision in person individually, once a month.

### **Comments:**

*“Are other agencies doing it as a group process, or as an individual process?”*

*“We get to pick who we really relate to. I have now been with the same clinical supervisor for 14 years, and I’ve been through three agencies. I travel to see her.”*

*“We’re in a small community, and there aren’t many counsellors here who have a background in trauma.”*

*“There’s quite a few clinical supervisors willing to work through Skype. EVA BC has a list.”*

## **17. Blurred Lines of Victim/Accused in Domestic Violence Cases**

There was discussion around women victims of domestic violence being accused of being the aggressor by their abusive spouses, and occasionally even charged. The discussion centered around whether or not primary aggressor policy is being consistently followed, and EVA BC’s recent survey question on women wrongfully arrested.

Police are instructed to assess who is the primary aggressor when the parties allege mutual aggression. Among other things, the policy states that “The primary aggressor is the party who is the most dominant rather than the first, aggressor”, and outlines some circumstances to be taken into consideration, such as who has superior strength, who suffered the most physical and/or emotional injury, who has defensive wounds, and what is the history and pattern of abuse in the relationship. The practice of dual arrests is discouraged. Callers were emailed a copy of the VAWIR policy (which includes the primary aggressor policy on pages 8 and 9) after the call (<http://www2.gov.bc.ca/assets/gov/law-crime-and->

[justice/criminal-justice/victims-of-crime/vs-info-for-professionals/info-resources/vawir.pdf](http://justice/criminal-justice/victims-of-crime/vs-info-for-professionals/info-resources/vawir.pdf)) after the call.

EVA BC's Community Coordination for Women's Safety program is currently looking into the issue of women wrongfully arrested in domestic violence situations, and callers were encouraged to contact CCWS should they have concerns with primary aggressor policy not being followed in their communities. Callers were referred to the CCWS Backgrounder *Women Being Arrested* on the EVA BC website at:

<http://endingviolence.org/publications/women-being-arrested-backgrounder/>), and the Battered Women's Support Services Resource, *When Battered Women Are Arrested: A Resource for Frontline Workers*: <http://www.bwss.org/wp-content/uploads/2010/03/womens-arrest-toolworker-web.pdf>

### **Comments:**

*"In a small community we get a lot of turnover in RCMP members, and we find that not all are as well educated as others regarding women's issues."*

*"I've had two women who ended up losing their children because they finally came forward [and disclosed domestic violence]."*

*"I have a case right now where she is both the victim and the accused. The Ministry took the child away. It has been in the court for a while, but finally they found out that the 'victim', who is the husband, made up the whole story. It's very painful for the women to go through that process. They believe that she is the accused in so many systems – the legal system, the Ministry, even health workers. It took six or more months to clear up the situation and get the child back from him."*

*"If they were wrongfully arrested, hopefully at some point Crown will drop the charges. But there's that period of months and months when no one is looking at the file, and it is hanging over her head and she doesn't know what is going to happen."*

*"And the women have experienced trauma and now they've got anxiety and depression and other mental health issues. I had two clients where the fathers alleged severe mental health issues and domestic violence, and it was very difficult for them to prove fitness. One had to go through months and months of counselling to prove she didn't have mental health issues."*

## **19. Provincial Election Questions**

There was a brief discussion about the questions for candidates for the upcoming provincial election that EVA BC drafted and distributed to member programs.