May 13, 2022

SHELTER PULSE
Literature Review

MRWS
MOUNTAIN ROSE WOMEN'S SHELTER ASSOCIATION

RURAL DEVELOPMENT NETWORK
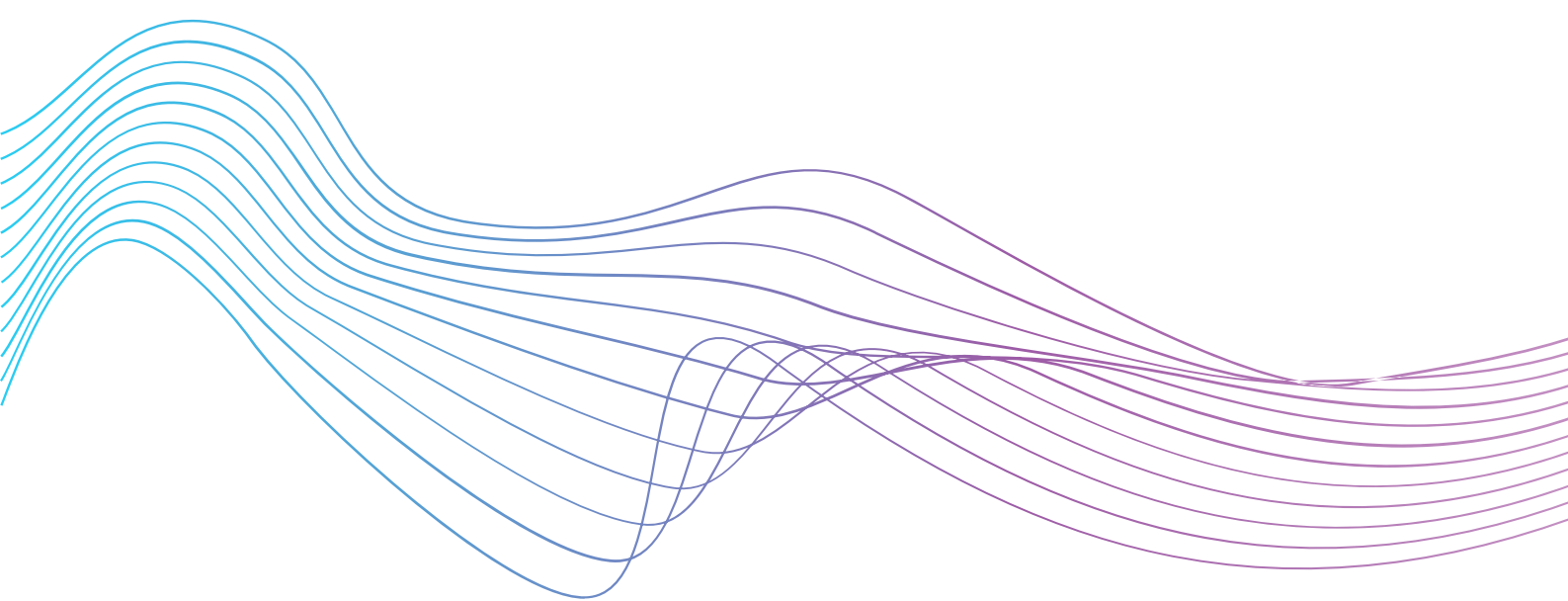
ACKNOWLEDGEMENTS

Overview of WAGE Canada

Women and Gender Equality Canada works to advance equality for sex, sexual orientation, and gender identity or expression by including people of all genders, including women, in Canada's economic, social, and political life.

In Spring 2021, WAGE Canada released a Call for Proposals to support a feminist response and recovery from the current impacts of COVID-19, particularly for underrepresented women, through systemic change projects across the Women's Program's three priority areas. The purpose of the Women's Program is to address or remove systemic barriers impeding the progress and advancement of women, in all their diversity, in the following areas:

- Encouraging women and girls in leadership and decision-making positions
- Improving women's and girls' economic security and prosperity
- Ending gender-based violence

Women and Gender Equality Canada   Femmes et Égalité des genres Canada

Overview of MRWSA

Mountain Rose Women's Shelter Association (MRWSA) was incorporated in 1990 and has since provided services to women and children in immediate need of safety and security due to domestic/family violence.

MRWSA's Mission:

to build on our abilities to meet individual, family, and the changing needs of those impacted by gender-based violence by providing trauma-informed services, increase community engagement, and championing the voices of all survivors by creating safe spaces for help, hope and healing.

In September 2019, The Mountain Rose Center opened. This new location provides a 21-bed emergency shelter, 5 Second Stage/Transitional Apartments, an administrative office, and various Community Support Services.

Overview of Rural Development Network

The Rural Development Network (RDN) works to equip communities with tools, information, and expertise needed to jumpstart projects with the goal of amplifying the collective voice of rural communities and improving the quality of life for rural Canadians.

At RDN, our primary initiatives are dedicated to supporting communities in addressing their needs for things like affordable housing through our Sustainable Housing Initiative, preventing and ending homelessness through are unique homelessness estimation process, attracting and supporting newcomers through our Rural Immigration program, developing agri-food initiatives, and revitalizing communities through our Rural Revitalization program. Our Health & Wellness team works alongside communities to develop responses in the areas of substance misuse, developing dementia friendly communities, mental health, and developing safer and healthier communities all through the lens of Reconciliation. In addition, RDN is the Community Entity through the Federal Government for Reaching Home funding for rural, remote and Indigenous communities in Alberta.

In addition to the Shelter Pulse project, RDN and MRWSA partnered on methodologies to estimate homelessness. This research resulted in the creation of RDN's award-winning **Step-by-Step Guide to Estimating Rural Homelessness**.

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TERMINOLOGY

IRS-Indian Residential School

GBV-Gender-Based Violence

IPV-Intimate Partner Violence

HRA-Human Rights-Based Approach

VAW-Violence Against Women

TRC-Truth and Reconciliation Commission of Canada

2SLGBTQQIA-Two-Spirit, Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex and Asexual

DV-Domestic Violence

NAP-National Action Plan on Violence Against Women and Gender-Based Violence

LGBTQ-Lesbian, Gay, Bisexual, Transgender and Queer/Questioning

WSC-Women's Shelters Canada

EXECUTIVE SUMMARY

VAW responses have been largely fragmented, often inaccessible and many current policies and strategies across Canada lack any type of coordination. Due to the absence of a NAP to end VAW, various groups develop policies that do not share a consistent language or framework for implementing trauma-informed care systems. As a result, shelter organizations' policies and practices may differ across the system. Research confirms the importance of organizational capacities to ensure an effective trauma-informed service system, including policy support. Challenges to implementing a trauma-informed approach to care include: a lack of clear definitions, translating trauma-informed care to specific practice settings, consistency across service settings and systems, and lack of evaluation of models of trauma-informed care. Implementing a trauma-informed approach requires policy change at the provider level.

Research has shown that health care providers often focus on granular-level, trauma-specific treatment approaches but neglect to implement high-level systems that can effect change across the organization. Increased effort is needed to implement organizational changes at a policy level to ensure sustainable, systemic change continues across the sector. Developing a national resource, such as Shelter Pulse, provides a pan-Canadian database to support policy development and service delivery for any VAW shelter, no matter their location. Having a centralized resource is instrumental in shifting women-serving systems towards a collective trauma-informed approach to service delivery.

This review aims to provide a researched overview of existing literature on the push for centralized policies for VAW shelters. This review aims to gather and compile existing literature and expertise that exists rather than undertaking an extensive review to duplicate findings. It provides background content on the issues of GBV, VAW and IPV. This review establishes guiding principles that will be carried forward into the rest of our project. It also allowed the Shelter Pulse team to learn about and engage with the issues of GBV, VAW, IPV and homelessness in the context and lens of Indigenous women, girls and gender-diverse people in which these learnings will be adopted into our project going forward. In addition, it provides context on these issues for other demographics including rural, remote and Northern landscapes, LGBTQ, gender diverse, people with a disability, immigrant and refugee populations. Moreover, this review situates the Shelter Pulse project in relation to internationally what is suggested in terms of a NAP and what has been looked at here in Canada.

Indigenous lens

This project seeks to adopt an Indigenous lens as our shelter partners serve Indigenous women, girls and gender diverse people. Canada has explicitly targeted Indigenous women through colonization as a settler nation, such as loss of status due to marriage, the 60s scoop which forcibly kidnapped newborns, forced/coerced sterilization, and the IRS system. Applying Native Feminism to our work is extremely important as Indigenous women's issues are silenced, and Native Feminism addresses sexism in Indigenous spaces (Goeman and Denetdale, 2009). Although a Women's Indigenous Advisory Group criticized using the term reconciliation, we still chose to include it with the focus being on structural reform. Restoration and restitution were

emerging themes from the Women's Indigenous Advisory Group in relation to land, resources and restoring women to their matriarchal roles and power in Indigenous societies. We have also chosen to highlight Calls to Action from the TRC, articles from the United Nations Declaration of the Rights of Indigenous Peoples and Calls to Justice from the Final Report Reclaiming Power and Place from the National Inquiry into Missing and Murdered Indigenous Women and Girls.

Background

GBV is a prevalent long-standing issue (S. Garnett Russell et al., 2018) and is determined and influenced by social and systemic constructions in society (Kilmartin and Allison, 2007; Merry, 2011). IPV is a pervasive form of GBV, even though it is a silent issue as it is estimated 78% of IPV goes unreported in Canada (Zorn et al., 2017). It is also important to note that Indigenous women face higher rates of IPV due to the intersections of colonialism, racism and sexism. Furthermore, VAW is a significant public health concern and violates the rights of women and children (Violence Against Women, n.d.). It is argued that "Violence is the leading cause of women's homelessness in Canada" (Ontario Native Women's Association, 2018).

In addition, women and gender diverse people experience higher rates of violence in rural, remote and northern landscapes (Nonomura and Baker, 2021). It is challenging to truly understand the situation as rural, remote and northern definitions vary (Jeffrey et al., 2019). There are also significant barriers to seeking help and support due to many reasons, such as isolation (Nonomura and Baker, 2021), transportation (Zorn et al., 2017; Jeffrey et al., 2019; Nonomura and Baker, 2021) and communication barriers (Nonomura and Baker, 2021; Jeffrey et al., 2019).

Guiding Principles

This literature review includes three core guiding principles: intersectionality, trauma-informed principles, and a rights-based approach. VAW shelters provide services to a wide range of clients and grounding the project in practices that recognize and honour those differences is key to equitable project outcomes.

Intersectionality takes into account how multiple identities shape an individual's experience (Crenshaw, 1991). Policy is felt and experienced by different identities in different ways (Havinsky and Cormier, 2011). The following identities were heavily considered in this review: gender-diverse groups, persons with disabilities, immigrant and refugee populations, and Indigenous women and girls. Using an intersectional lens in policy analysis means reviewing operational and organizational policies and recognizing the potential harm it could cause marginalized groups.

A trauma-informed lens is integral to any work in the GBV sector as trauma-informed policies minimize harm to clients. Service providers and organizations who do not understand the complex and lasting impacts of violence and trauma may unintentionally re-traumatize.

The goal of trauma and violence-informed approaches is to:
- Understand trauma and violence and their effects on peoples' lives and behaviour
- Create emotionally and physically safe environments
- Foster opportunities for choice, collaboration and connection
- Provide a strengths-based and capacity-building approach to client support (Canadian Public Health Agency of Canada).

After consulting the literature, our project has chosen the following trauma-informed principles for our activities:

1. Acknowledgment that trauma is pervasive
2. Safety (including emotional)
3. Voice, choice and control
4. Compassion
5. Strengths-based
6. Peer support
7. Empowerment
8. Trust and transparency
9. Empathy
10. Non-judgmental

(Canadian Public Health Agency of Canada; McKenna and Holtfreter, 2020; Bath, 2008; Elliot, Fallot and Markoff, 2005; Wilson, 2015; Kulkarni, Bell and Rhodes, 2012 and National Council of Juvenile and Family Court Judges).

The final guiding principle for this project is a HRA in which it is a conceptual framework for the process of human development based on international human rights legislation (Kenna and Feràndez Evangelista, 2013). The HRA approach helps create policies, laws, regulations, and budgets that establish priorities for particular human rights and contributes to determining who is responsible for their enforcement and to ensure that the necessary capacities and resources are allocated (ACNUDH, 2006). Homelessness is increasingly recognized as more than simply a financial issue, it also encompasses social and legal domains (Kenna and Feràndez Evangelista, 2013). Another core element of a HRA is applying a trauma-informed approach as people experiencing homelessness face constant stress

due to the absence of having a safe place to sleep or secure food sources. In addition, there is a higher incidence of other forms of traumatic stress such as child abuse, neglect, and domestic violence than in the non-homeless population (Resler, 2017).

Policies

In 2012, UN Women published a Handbook for National Action Plans on VAW. This tool aims to expand the reach of existing best practices in the VAW space. Some guiding principles aligns with our work such as acknowledging VAW is a violation of human rights, applying a rights-based approach, having clear definitions of VAW and recognizing VAW and GBV are a result of unequal power relations in which multiple intersections and forms of violence exist. The handbook (UN Women, 2012) emphasizes harmonization of structures, practices, policies in a variety of different areas such as building capacity of organizations, funding sources and accessible accommodation for survivors. In addition, almost a decade later in 2021 Women's Shelters Canada delivered their NAP to the Federal Government (Dale, Maki and Nitia). Four pillars:enabling environment and social infrastructure, prevention, promotion of responsive legal and justice systems and support for survivors and their families centre one of the main messages which is to go from social theory to social policy. Transportation, digital infrastructure such as access to internet and cell phones, core funding, standards for shelter staff, collaboration and coordination across government bodies and jurisdictions and equalizing the level of care between all regions including rural, remote, Northern and Indigenous are key themes addressed.

INTRODUCTION

There are no standardized or coordinated policies for VAW shelters in Canada. This affects women's shelters based in small Canadian communities differently as they struggle with meager budgets, inadequate staffing which results in administrative work often taking a back seat to client care. However, this poses significant issues as not having evidence-based and trauma-informed policies can create harm and retraumatize women and children who are fleeing violence. Our project aims to address these issues and create a centralized database for evidence-based and trauma-informed policies for rural VAW shelters. As part of our project set-up we undertook this literature review to grasp the issues and trends in the rural GBV, VAW and shelter sectors.

Methodology

Our literature review focused on qualitative research from secondary sources. Key words such as "Rural", "GBV", "IPV", "Shelters" and "Policy" were used in combination with one another to generate the intended results. Google scholar, general Google search engine and searches on leading GBV institutions were the main sources for populating the literature. We took many findings from the Learning Network at Western University, The NAP and the Native Women's Association of Canada. We incorporated Indigenous scholars and research on various identities to provide a balanced view of the rural landscape of GBV. Key journals include the Journal of Family Violence, Violence Against Women and Frontiers in Psychology. Other key journals to provide a diverse lens include Sexuality and Disability, the Journal of

Gay and Lesbian Social Services and the Journal of Indigenous Social Development. Key authors include Sarah Hunt, Kimberlé Crenshaw, Sally Engle Merry, Linda Baker and Eve Tuck.

Disclaimer

The Shelter Pulse project greatly values the work of frontline staff, long hours and resilience of people working in the GBV, VAW and shelter sector. In these times more than ever the ask of your work is beyond your ability to give but you find a way to keep serving. This project is designed to be an added resource for shelters built in collaboration with shelter partners, impacted parties and experts in the field. The Shelter Pulse platform aims to reduce administrative time for shelters and increase the standardization of services for women and children fleeing violence.

Nevertheless, as we have taken deliberate steps to be as inclusive and intersectional as possible the project cannot cover all demographics and geo-political landscapes. This project has a national focus in which jurisdictions, provincial regulations, shelter body regulations and other bodies will have extreme influence over the policies of VAW shelters. Further, VAW shelters on reserves will have a completely different landscape including capacity limitations, political implications and funding constraints. Those issues are prevalent across all VAW shelters but are ever more prevalent for on reserve VAW shelters and face other limitations mainstream shelters do not experience. In addition, not every group of identities or intersection of identities is represented in our project. This is not intentionally done or to create hierarchies between different groups of identities. Our project identified groups based on RDN's activities, our

shelter partners, shelter seekers demographics, research and input from experts in the field. We deeply recognize the entrenchment and effects of GBV in society across all identities but with our limited project scope and timeline we have focused on the ones included in this literature review.

Limitations

As discussed in the previous section, this project cannot encompass all possible intersecting identities. The project's first iteration aims to work with and engage with shelter partners to create a database for trauma-informed and evidence-based policies. We are relying on engagement with our partner shelters to inform our activities, research and creation of policies, demographics they serve and the determination of project successes. Therefore, another limitation of this project is the absence of the voices of those with lived experience. Due to the scope of this first phase, capacity and ethical implications the project looks into current VAW shelter structures and the voices of individuals who work within the sector. We understand this is a substantial limitation and are considering exploring funding opportunities that could bridge and build off the initial iteration to include more lived experience. We cannot overemphasize the value of having lived experience inserted into the design and delivery of a project. In addition, this is our first experience working with multiple regulatory bodies across Canada in the GBV/VAW sector. We are doing our best to gather the necessary information and policies, conduct secondary research and make connections. This project is a learning process for the Shelter Pulse team, and we recognize that we may miss essential information or critical relationships. Lastly, because this review focuses on policy guidelines and judicial

interpretations of legislation, non-VAW shelter actors' (e.g. police, Crown, child welfare workers, or immigration officials) actions in response to those legislations are beyond this project's scope.

Indigenous lens

RDN would like to explicitly acknowledge the direct connection and intersection between homelessness, gender-based violence, racism, sexism, and colonialism. This is a critical lens to adopt for our project as we are engaging with shelters who are Inidgenous run and also shelters who serve Indigenous women, girls and gender diverse people. In our efforts to lay the foundation for this project, we consulted with a Women's Indigenous Advisory Group to discuss reconciliation as a guiding principle. These invaluable conversations raised concerns about using the term reconciliation as this process involves recognizing the harm that was done and Indigenous Peoples did no harm. This led to the suggestion that more of the conversation should take place around restitution and restoration. Our project has taken the lens of separating these two emerging themes, reconciliation and restitution. The project uses reconciliation for mainstream shelters that serve Indigenous women, girls and gender diverse people and restoration/restitution for Indigenous-led shelters. The Shelter Pulse project team respectfully acknowledges that we don't identify as Indigenous, but, as settlers on this land, we defer to the wisdom and guidance from Indigenous groups and our Indigenous liaison here at RDN.

First, it is essential to situate our conversation around what constitutes settler colonialism. Settler colonialism is where the colonizers stay in the nation they occupied and exert internal and external colonialism.

It's a complete appropriation and occupation of Indigenous land and taking away a sense of self-determination (Tuck and Yang, 2012). It is argued that settler colonialism was a historical structure, but that is simply not the case, as its systems and effects are ongoing today (Arvin, Tuck and Morril, 2013; Grande, 2003). It is also critical to state that settler colonialism attempted to turn Indigenous Peoples into settler citizens and targeted gender roles and sexuality (Arvin, Tuck and Morril). Indigenous women, girls and gender diverse people were disproportionately targeted during colonization dating back to the Jesuit era when they recognized the immense power women had in their communities (Baskin, 2019). Numerous structures, practices, and legislation were introduced to specifically target Indigenous women, such as loss of status due to marriage, the 60s scoop in which newborns were forcibly kidnapped, and forced/coerced sterilization. In addition, the IRS structure was extremely gendered, and again the girls were explicitly targeted. "If we get the girls, we get the race," cited in a Presbyterian Historical Society document (Grey and James, 2016, p. 311). The effects of targeting Indigenous women, girls, and gender-diverse people at disproportionate rates during colonization is deeply felt by communities today.

 Second, a conversation about Indigenous women cannot be had without outlying Native Feminism. It is widely recognized that Indigenous women's issues are silenced (Suzack, 2015; Ramirez, 2007). Further, colonialism was an extremely gendered process which bred gendered and sexualized violence and disempowerment (Hall, 2009). White mainstream feminism creates racial hierarchies thus, using Native Feminism as a grounding principle is critical. It addresses sexism in Indigenous spaces, especially when "intersections of power and domination... have shaped Native nations and gender relations"

(Goeman and Denetdale, 2009, p. 10). Native Feminism challenges the overall colonial constructs that Indigenous lives and in particular Indigenous women, girls and gender diverse people, do not matter (Barker, 2015). Further, it confronts racial injustices and "challenges male-dominated sovereignty" (Smith, 2006, p. 96) as they are the "foundation of the current settler state" (Smith, 2006, p. 94). It promotes empowerment of women but it is critical that nationhood is not the priority as it will then drown out gender issues (Ross, 2009). In addition, Smith (2005) declares that establishing and restoring women's roles and voices in Indigenous communities is part of the process and will help eradicate sexism and violence towards Indigenous women and girls as this was brought in by colonialism.

Reconciliation

 Considering the valuable feedback from the Indigenous Women's Advisory group on using the term 'reconciliation,' we still thought of it as an important concept to include as we are engaging with mainstream shelters serving Indigenous Peoples and there is harm that is done in that process. Reconciliation focuses on the relationships within a system (Lederach, 1997). It is a three-step process which includes "truth-telling, acknowledging harm, and providing justice" (Finegan, 2018). Although the Women's Indigenous Advisory Group emphasized that, although the TRC published its final report in 2015, we are still in the process of truth-telling in Canada. Structural reform is critical for settler states to abolish all forms of discrimination. Specifically when it comes to settler nation states the focus should be more on structural reform specifically political, economic and policies which create and foster inclusion and integration and abolishing all forms of discrimination (Bar-Tal and

Bennink, 2004). Lu adds to the conversation by emphasizing again, the focus should be on structural reconciliation which addresses "social institutions, norms, practices and structures" (Lu, 2007, p. 38). Adding an Indigenous lens to reconciliation Finegan states the goal of reconciliation in a settler state should be "restorative, Indigenous-centered and community-designed forms of justice" (2018, p. 4). In addition to reconciliation, focusing on restoration and healing is a key theme identified by Indigenous scholars when discussing reconciliation. Many survivors emphasized cultural practices and cultural renewal as crucial components of the healing process (TRC Truth and Reconciliation Commission of Canada, 2015; Parent, 2011; Waterfall, 2018).

Restoration / Restitution

There are varying perspectives of what restoration and restitution should look like in a settler nation. We scanned the literature and pulled out themes but want to acknowledge this is a personal journey for Indigenous Peoples and those working with Indigenous Peoples and in no way are we presenting these findings as the only perspectives on restitution and restoration. Land, water and resources were never surrendered, they were stolen therefore, restitution is key (John, 2015). It is not only restitution of land and resources which were stolen but also includes restitution of the harms that were done and that Indigenous Peoples have had to endure (Alfred and Corntassel, 2009). Restitution needs to be followed through by action as Alfred and Corntassel state "There is no apparent alternative capable of helping First Nations build better relationships within communities, restore regimes of peace, respect and responsibility and to lead Indigenous people to courageously counter the legacies of historical

trauma and still-present threats to our existences" (2009, p. 48). In relation to restoration, the literature also highlights restoring Indigenous women, girls and gender diverse people to their traditional roles and places in their communities. Prior to colonization women had specific roles, gifts, positions of authority and esteemed positions in their communities (Baskin, 2019; Hill, 2009; Kirkness, 1986; Hanrahan, 2021). It is widely acknowledged that restoring and investing in women's matriarchal traditional roles is seen as a great investment by many Indigenous political bodies (Hanrahan, 2021). In addition, many women had roles of wisdom-seekers and healing the community (Baskin, 2019) therefore, restoring women to their state prior to contact will restore the natural healing structure in Indigenous communities. How can the "healers" heal their own communities if they are disenfranchised, experience high rates of violence and are in a constant state of survival?

Calls and Recommendations

As a project team, we went through the TRC's Calls to Action, the United Nations Declaration on the Rights of Indigenous Peoples, and the National Inquiry & Final Report Reclaiming Power and Place. We pulled out relevant articles and recommendations to guide the Shelter Pulse project. We also identified key themes (see Appendix A for a complete listing). Health was a main theme including measuring health outcomes such as mental health and suicide, establish and sustain Aboriginal healing centres and tracking the rate of victimization due to family violence and highlight the disproportionate rate of victimization for Indigenous women. Human rights was another main theme with particular attention to Indigenous Elders, women and children emphasizing they should be free from discrimination and

children emphasizing they should be free from discrimination and violence and stress the full implementation of recommendations from international treaties and conventions related to VAW. Finally, from the Inquiry's final report violence prevention, community programs for survivors, establishing Indigenous shelters and ensuring access to those shelters with transportation were highlighted.
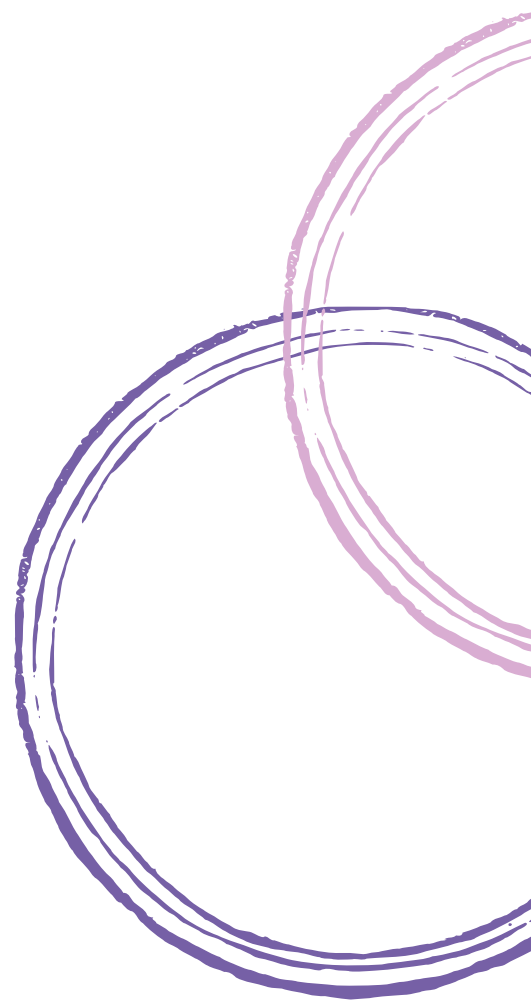
BACKGROUND

GBV:

GBV has been flagged as an issue relating to gender inequality long before it was internationally recognized as a concern (S. Garnett Russell et al., 2018). It is described as "...any attack directed against a (usually female) person due, at least in part, to a disadvantaged position within male-dominated social systems" (Kilmartin and Allison, 2007, p. 5). It is critical to expand our view of GBV as it includes more than sexual assault:

"(a) intimate partner violence (IPV),
(b) sexual harassment,
(c) stalking,
(d) trafficking,
(e) forced prostitution,
(f) exploitation of labor,
(g) debt bondage of women and girls,
(h) sex-selective abortion,
(i) physical and sexual violence against prostitutes,
(j) female infanticide,
(k) the deliberate neglect of girls relative to boys, and
(l) rape in war"
- Kilmartin and Allison, 2007, p. 5.

Further, GBV is determined and influenced by social and systemic constructs in society from personal relationships which condone violence to structural issues (Kilmartin and Allison, 2007; Merry, 2011). It is critical to shift the traditional viewpoint of GBV as simply

encompassing victim and perpetrator but extends deeply beyond the confines of individual actions. Major institutions reinforce patriarchal values which encourage power hoarding and gender-based entitlements (Russo and Pirlott, 2006). Specific conditions breed gender violence, including "...racism and inequality, conquest, occupation, colonialism, warfare and civil conflict, economic disruptions and poverty" (Merry, 2011, p. 19). Another distinction that is integral to understand and explore is recognizing that gendered violence is not exclusive to female victims. Due to the major structures and systems in our society victimhood extends to males and members of the 2SLGBTQQIA community (Merry, 2011). The focus of our project is women and encompasses gender diverse and transgender people. However, it is essential to note that GBV affects various identities in different ways.

IPV:

IPV is one pervasive form of GBV. IPV includes any behaviour by an intimate partner or ex-partner that causes harm. It encompasses physical assault, stalking and emotional, sexual, psychological or financial abuse and controlling behaviours (Native Women's Association of Canada, n.d.; Violence Against Women, n.d.) and specifically centres around using violence to maintain gender hierarchies (Hunnicutt, 2009). IPV in Canada is extremely prevalent as in 2015, 18% of all homicides resulted from IPV (Hoffart and Jones, 2017). However, IPV is still a silent issue as it is estimated that 78% goes unreported in Canada (Zorn et al., 2017). This demonstrates IPV is a silent issue in Canada and the rate of victimization is even higher than what is reported, forcing the VAW shelter sector to pick up all the additional duties and responsibilities the government and other

authorities do not acknowledge.

We cannot discuss IPV without considering the connection between higher rates of IPV and Indigenous women. This connection is not meant to pathologize or place any shame on Indigenous communities. It is simply to connect intersectionality, colonialism and its impact on Indigenous women, girls and gender diverse people. Higher rates of violence are specifically linked to the intersections of being female and Indigenous "When a Native woman suffers abuse, this abuse is not just an attack on her identity as a woman, but on her identity as a Native" (Smith, 2003, p. 71). Social context and systems of oppression are associated with IPV and due to the way in which colonization, including IRS, impacted gender roles and power dynamics in Indigenous communities it leaves Indigenous women more vulnerable to IPV (Pedersen et al., 2008; Daoud et al., 2013). In addition, Indigenous women are more likely to experience higher rates of post-separation IPV (Tutty et al., 2017; Pedersen, 2013). Furthermore, Indigenous women who live on reserve experience incrementally higher rates of violence as physical being eight times higher, sexual violence being seven times higher, and murder being six times higher (Brownridge, 2008). When analyzing or discussing IPV, it is critical to include an intersectional analysis even within the same identities, i.e. Indigenous on vs off-reserve, to comprehend how gendered violence affects different groups of the same identities.

VAW:

When discussing GBV and IPV, it is also critical to note the severity of VAW and its effects not only on an individual but a community. VAW is a significant public health concern, violates women's rights, can have serious health concerns for both women and children, and can lead to

"...short and long-term physical, mental, sexual and reproductive health problems for women" (Violence Against Women n.d.). The United Nations defines VAW as "any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" (Violence Against Women, n.d.). VAW is felt deeply not just in individuals but in families, communities and systems which is why it is critical this must be brought to the forefront of a Nation's priority issues.

The literature on VAW falls in line with what we discussed in previous sections. Therefore, we would like to take this space to discuss technology-related VAW due to it being widespread. It is estimated that 95% of online abusive behaviours are from a current or former partner (Baker et al., 2013). Technology related VAW eliminates any spatial or geographic boundaries and makes the risk of violence continual. There are five main distinctions of technology related VAW that make the impacts substantial: anonymity, action-at-a-distance, automation, accessibility and propagation and perpetuity (Baker et al., 2013). Further, technology related VAW takes on many forms, including online sexual harassment, impersonation, recruitment, surveillance/tracking, non-consensual sharing of intimate images and hacking for personal information (Baker et al., 2013; Bailey and Mathen, 2019). This is a significant issue as the size, impact and length of technology based VAW is damaging as "The internet is iterative, with boundless capacity for reproduction, dissemination and publicity" (Bailey and Mathen, 2019, p. 677). It can have lasting consequences for the victim in their social life and personal relationships and can even affect current or future career opportunities of no fault of their

own (Bailey and Mathen, 2019). Again, VAW has no geographic limitations, and the effects and rates of victimization are vast but silent.

Rural, remote, and Northern landscape:

Women and gender diverse people experience higher rates of violence in rural, remote and Northern landscapes. The rates are alarming as police-reported IPV is "3.5X higher than for rural men, 75% higher than urban women, 7X higher than for urban men… The rate of violent offenses resulting in death is more than 3X higher for young women and girls in the North than the South" (Nonomura and Baker, 2021, p. 2). Further, it is challenging to get an accurate picture of the situation as definitions of rural, remote and Northern vary (Jeffrey et al., 2019). One argument for the higher rates of violence in rural, remote and northern communities is the values placed on firearms. Traditionally, communities have increased access and threat of the use of firearms (Jeffrey et al., 2019). The rates of violence are higher in rural areas, leaving the rural VAW shelters to service a larger population of victims with increased limitations.

There are also significant barriers for women and gender-diverse people seeking help and accessing shelter services. Confidentiality and anonymity are difficult to maintain (Wendt and Hornosty, 2010; Jeffrey et al., 2019; Zorn et al., 2017). There are limited options for services, and the communities tend to be close-knit. Rural, remote and Northern communities have increased distances between residents, creating a sense of isolation, contributing to hidden violence (Nonomura and Baker, 2021). Furthermore, when victims speak out, disclosures of violence are complex or not believed because of the

personal connections in rural communities, i.e. 'he's a dentist and professional, he would never do that' (Wendt and Hornosty, 2010).

 In addition, abusive partners may exhaust all service options for victims "In communities that have few lawyers, abusive partners have been known to meet with all local lawyers to "conflict out" the available representation for survivors" (Nonomura and Baker, 2021, p. 5). Women who make the difficult choice to seek help face barriers different from urban women, which must be acknowledged when discussing a plan to address GBV.There are also several other barriers to seeking help and support outside of the perpetrator's actions and behaviours. Transportation is a considerable barrier (Zorn et al., 2017; Jeffrey et al., 2019; Nonomura and Baker, 2021) as a "A national survey of shelters and transition houses in Canada found that only 45% of shelter/[transition houses] in small and rural communities had access to public transit in the community compared with 96% of those in urban and suburban areas" (Nonomura and Baker, 2021, p. 5). Communication barriers also present a challenge as phone reception is unreliable, phone calls can be tracked and show up on bills and access to high-speed internet is extremely limited (Nonomura and Baker, 2021; Jeffrey et al., 2019). Another consideration is that women and gender-diverse people are hesitant to leave their family farm as they do not want to leave their generational wealth and inheritance for their children behind (Jeffrey et al., 2019; Wendt and Hornosty, 2010). Further, there are economic barriers as rural, remote and Northern communities traditionally have lower rates of education and employment which results in higher rates of poverty (Jeffrey et al., 2019; Wendt and Hornosty, 2010). It takes a lot of strength, capacity and courage for a woman to access help in rural communities, but it should not be this challenging to flee abuse.

LITERATURE REVIEW

GUIDING PRINCIPLES FOR POLICIES:

Intersectionality

 Intersectionality is a theory coined in the 90s by Kimberlé Crenshaw who looked at how multiple identities will shape experiences with the example of how VAW is shaped not only by gender but also by class and race (1991). Each identity of a person comes with its own set of power, oppression and structural inequalities (Sokoloff and Dupont, 2005) and it is critical intersectionality demonstrates how power is shown and how systems/structures work instead of simply who people are (Cho, Chrenshaw and McCall, 2013). Although gender inequality is a strong foundation for intersectional analysis, "we must address how different communities' cultural experiences of violence, colonialism, economic exploitation, heterosexism..." (Skoloff and Dupont, 2005, p. 45) impact their daily lives. However, as Sally Engle Merry states, "gender is always defined and redefined in interactions as it is performed for different audiences" (2011, p. 38) therefore, the oppression one faces due to gender is vital to an intersectional lens as it can profoundly shape the interactions of power and oppression in various situations for different identities.

 Intersectional policy analysis addresses the way specific acts and policies interact with inequalities experienced by social groups including those belonging to "race, class, gender, ability, geography and age [and examining] unique and complex experiences within and between groups in society" (Havinsky and Cormier, 2011, p. 217). Policy is not neutral and is felt differently by different groups of people

"... those of us who live at the intersections of multiple marginalized identities experience heightened violence" (Alicia Gill, 2018, p. 559). The historic context of identities (Havinsky and Cormier, 2011) is crucial to include in policy analysis and creation as it reveals the intricate and layered history of power and oppression, such as the long history of colonialism and its interaction with Indigenous Peoples of various identities. Further, an analysis of "...intersecting factors that shape the lived realities of affected women [to] determine their needs and help-seeking patterns" (Hankivsky and Cormier, 2011, p. 218) will presents a complete assessment for policy makers and service providers to work together in meeting the needs of women fleeing violence.

When doing any work in the GBV or VAW sector, intersectionality should be applied. Hunt (2018) adds to the list of vulnerabilities mentioned above with education, lack of safe and accessible housing, lack of employment and poverty. Moreover, for Indigenous women, girls and two-spirit people, intersectionality is not only argued to be part of their traditional holistic worldview (Natalie Clark, 2016), but colonialism disrupted gender relations and introduced a hierarchy of power between genders (Morgensen, 2012). Colonialism greatly influenced the various identities of Indigenous communities in which intersectionality plays a vital role as it can identify differences within Indigenous communities instead of simply focusing on Indigenous vs non-Indigenous. Even Peoples from the same nation who are living on and off-reserve will have their own power dynamics and intersections compared to one another (Olsen, 2018). Therefore, due to deep systemic and structural oppression faced by various identities, we cannot separate "The issues of colonial, race, and gender oppression

cannot be separated. Women of color do not just face quantitatively more issues when they suffer violence (i.e. less media attention, language barriers, lack of support in the judicial systems, etc.) but their experience is qualitatively different from that of white women" (incite.pdf, n.d., p. 1). It is essential to analyze GBV or VAW work with as many identities and demographic lenses as possible to have an actual intersectional lens as GBV affects all.

There are considerations when applying an intersectional lens, as one has to be careful of the "additive" approach when selecting which identities to analyze. It is looking past the individual addition of identities but rather how the different identities interact with one another. In addition, due to society's ingrained nature of binary identity, issues can be silenced because of overlapping identities and belonging to multiple groups "Because of their intersectional identity as both women and of color within discourses that are shaped to respond to one or the other, women of color are marginalized within both" (Crenshaw, 1991, p. 1243-1244). Intersectionality is about how systems of oppression interact with one another to shape someone's lived experience therefore, creating space for people to voice all of their identities is crucial. People cannot turn off certain aspects of their identities in different spaces.

TRAUMA INFORMED

Trauma is caused when one's stress experienced by an unexpected event (car accident, war, sexual violence, unstable childhood home) is out of one's ability to cope. It is not about the severity of the event but how one's body processes and chooses to respond to that event (Centre for Addiction and Mental Health, n.d.; Bolten et al., 2013).

Experiencing a traumatic event can have long-lasting effects and "can harm a person's sense of safety, sense of self, and ability to regulate emotions and navigate relationships. Long after the traumatic event occurs, people with trauma can often feel shame, helplessness, powerlessness and intense fear" (Centre for Addiction and Mental Health, n.d.). Trauma can result in changes to the brain, compromised immune systems, increased physical and mental stress, attachment difficulties and hyper/hypo-arousal. Trauma affects someone emotionally, behaviourally, cognitively, spiritually, neurobiologically and relationally (Bolten et al., 2013).

When using a trauma-informed approach, the main goal is shifting from asking "What is wrong with you?" to "What happened to you?" (Bolten et al., 2013, p. 16). There is an abundance of research on trauma-informed approaches, policies and practices. Our project has a specific context, target audience, and overall goal therefore, we scanned the literature, and the following is what our project has chosen to incorporate as trauma-informed principles:

- Acknowledgment that trauma is pervasive
- Safety (including emotional)
- Voice, choice and control
- Compassion
- Strengths-based
- Peer support
- Empowerment
- Trust and transparency
- Empathy
- Non-judgemental

(Canadian Public Health Agency of Canada; McKenna and Holtfreter, 2020; Bath, 2008; Elliot, Fallot and Markoff, 2005; Wilson, 2015; Kulkarni, Bell and Rhodes, 2012 and National Council of Juvenile and Family Court Judges).

When working on trauma-informed policy, it is critical policies are created in a way which recognizes the connections between violence, trauma, adverse health outcomes and behaviours. Trauma-informed approaches should be based on the following:

- Understand trauma and violence and their impacts on peoples' lives and behaviour
- Create emotionally and physically safe environments
- Foster opportunities for choice, collaboration and connection
- Provide a strengths-based approach and capacity-building approach to support client coping and resilience.

The key to trauma-informed policy is not treating trauma but minimizing harm and not re-traumatizing or triggering shelter users (Canadian Public Health Agency of Canada). Further, one main goal of trauma-informed policies should be to reduce the power imbalance between shelter users and staff (Canadian Public Health Agency of Canada; Elliot et al., 2005 and Koyama, 2006). In addition, trauma-informed policies should be written and practiced to eliminate and reduce feelings of powerlessness, disconnection and loss of control (Canada P. H. A; McKenna and Holtfreter, 2020 and Elliot et al., 2005). One can assume that when someone is accessing shelter services, they have experienced trauma therefore, it is essential to ensure the restoration of power and control is imminent in every step of the shelter's processes.

There are many other considerations to trauma-informed practices, care, and policies that need to be highlighted. The prevalence of trauma in IPV survivors needs to be widely acknowledged and understood as "DV is associated with elevated rates of post-traumatic stress disorder, depression, substance abuse and other mental health challenges" (Wilson, Fauci and Goodman, 2015, p. 588). Different experiences of social oppression shape DV which is why intersectionality is one key guiding principles of the project. Clear communication should be essential, including transparency of all the shelter policies and procedures which can drastically influence the re-traumatization of the survivor (Wilson, Fauci and Goodman, 2015; McKenna and Holtfreter, 2020). The opportunity to share shelter users' stories is imperative as some find it healing. However, it is crucial to be mindful that hearing stories can also be triggering. Therefore, it needs to be done in such a way that sharing is encouraged but not re-traumatizing (Wilson, Fauci and Goodman, 2015; National Council of Juvenile and Family Court Judges). Along the lines of re-traumatization, living in a shelter can be chaotic. For that reason, shelters should operate to eliminate and minimize re-traumatization for shelter users (National Council of Juvenile and Family Court Judges; Canada P. H. A; Elliot et al. 2005).

Meeting both the basic needs of survivors and their children is an act of being trauma-informed. Many flee with just the clothes on their backs and no consideration for meeting their basic needs therefore, when a shelter has a toothbrush, deodorant, hairbrush and toys for children, it demonstrates they operate in a trauma-informed manner (Kulkarni, Bell and Rhodes, 2012). When survivors are fleeing abuse and facing the effects of trauma in their everyday lives, it can be extremely difficult to seek necessary support and

services and even advocate for themselves. Therefore, it is strongly encouraged that shelter staff support survivors when seeking external services (Wilson, Fauci and Goodman, 2015). Policies and practices such as curfews and daily chores can hinder and limit shelter users. First, curfews limit shelter users who rely on sex work as their primary source of income and now have to choose between staying at a safe place or their income. Second, shelter users report being asked to leave the shelter for not participating or completing daily chores when they were focusing on the care of their children. Further, having minimum daily tasks limits the shelter user's opportunity to gain employment (Koyama, 2006). Another aspect of trauma-informed care is asking which pronouns shelter users would like to use in group settings so as not to "out" someone, which can significantly affect their relationships with others in the shelter (Koyama, 2006). Shelters that have "do not service or re-admit" lists should not distribute them to other organizations in the area. For several reasons, shelter users may come off as "problem clients," and limiting their care reduces their options for fleeing their abuser safely (Koyama, 2006). Finally, one of the best practices for being trauma-informed is having survivors and shelter users influence programming, policies and procedures (Wilson, Fauci and Goodman, 2015). Lived experience can never be traded for the best research hence shelters should do their best to include and incorporate lived experiences in their mandate, practices and daily operations.

HRA

The HRA is a conceptual framework for the process of human development based on international human rights legislation that

aims to enhance and protect human rights. This approach seeks to identify and correct inequalities that play a central role in discriminatory practices and unfair power distribution (Kenna & Fernàndez Evangelista, 2013). The HRA helps create policies, laws, regulations, and budgets that establish priorities for particular human rights and contributes to determining who is responsible for their enforcement and to ensure that the necessary capacities and resources are allocated (Kenna and Fernàndez Evangelista, 2013). With Canada being a signatory to multiple international agreements which encompass housing as a human right (Canadian Observatory on Homelessness, 2021), it is critical to adopt this approach into practice.

Homelessness is being increasingly recognized as more than just a financial issue. The HRA sees that the phenomenon of homelessness encompasses structural, institutional, personal, and relational factors. According to this approach, the concept of a "home" is not limited to a housing space but is related to physical, social, and legal domains. The physical realm is associated with having a living area that is adequate to satisfy the needs of an individual and their family's needs, such as maintaining privacy. The social domain is related to having a space for cultivating social relations. Finally, the legal domain refers to exclusive possession, occupation security, and legal right. (Kenna and Fernàndez Evangelista, 2013). Mulligan (2010) presents homelessness as a consequence of the continuous violation of human rights, contributing to further violations.

The homeless population is continuously at risk of rights violations, even from the institutions that provide support. In homeless shelters,

people often encounter a lack of privacy, restrictive regulations and degrading treatment. The systematic and continuous violation of human rights of individuals experiencing homelessness will only end when governments comply with their duty to devote the maximum available resources to realizing the right to housing. A HRA approach to homelessness prevention requires changing the way policy decisions and investments are made and ensuring that a policy and funding framework is in place to hold all orders of government like health, child protection, justice systems, to name a few, responsible for addressing their role in preventing homelessness (Canadian Observatory on Homelessness, 2021). There are overarching principles that guide the HRA:

- Universality and inalienability: human rights are universal, and all people worldwide are entitled to them.
- Indivisibility: there is no hierarchy of importance, and denial of one right impedes the enjoyment of other rights.
- Interdependence and interrelatedness: each right contributes to the satisfaction of their developmental, physical, psychological and spiritual needs.
- Equality and non-discrimination: no one should suffer discrimination based on race, colour, ethnicity, gender, age, language, sexual orientation, religion, political or other opinions, national, social or geographical origin, disability, property, birth or another status as established by human rights standards.
- Participation and inclusion: people have the right to participate and access information relating to the decision-making processes that affect their lives and well-being.

- Accountability and Rule of Law: States and other duty-bearers are liable for the observance of human rights and are obligated to comply with the legal norms and standards outlined in international human rights instruments (Kenna and Fernàndez Evangelista, 2013).

Another fundamental principle in applying a HRA is incorporating trauma-informed care. People experiencing homelessness face constant stress due to not having a safe place to sleep or secure food sources. In addition, there is a higher incidence of other forms of traumatic stress such as child abuse, neglect, and IPV than in the non-homeless population (Resler, 2017). Additionally, losing the protection of home and community leaves homeless individuals and families at high risk of violence and victimization. It is vital to understand trauma and how it affects an individual's physical and psychological health and financial and housing status to become trauma-informed (Resler, 2017). To implement trauma-informed care, homeless service settings must adopt an organizational commitment to understanding traumatic stress and develop strategies to respond to the complex needs of trauma survivors (Resler, 2017).

Identities

To align with our guiding principle of intersectionality, the inclusion, diversity, equity and accessibility lens of our work will be represented by the concept of identities. The NAP (2021) recommends that an intersectional lens include black, racialized, LGBTQ, gender diverse, person's with a disability, people in poverty, immigrant and refugee populations and Indigenous Peoples. Although we value the recommendations and the work that went into the NAP, for our project, we are focusing on the following identities: LGBTQ, gender diverse, people with a disability, immigrant and refugee populations, and Indigenous Peoples. In cohesion with applying and encouraging an intersectional lens to our work, the identities reflected in the NAP but not explicitly identified in our research will be captured as intersectionality is across all identities inclusive.

SAME - SEX IPV

Rates of same-sex IPV are comparable to rates of heterosexual violence and can have negative impacts on the victim's life (Murray and Mobley, 2009). Same-sex IPV shows up in the same ways as heterosexual IPV with some nuances. Power and control are still the main features and causes of IPV, but there is quite a high prevalence of exploiting their partner's weaknesses in same-sex relationships (Murray, Buford and Seaman-De-John, 2007; Skoloff and Dupont, 2005; Rollè et al., 2018). One of these weaknesses is the threat of being "outed," which can have adverse social, familial and professional consequences (Skoloff and Dupont, 2005; Murray, Mobley and Seaman-DeJohn, p. 2007; Alhusen, Lucea and Glass, 2010). Further, there is discrimination when someone from a same-

sex female relationship accesses services due to the "utopian lesbian myth" (Hassouneh and Glass, 2008). The heteronormative assumptions about violence, such as violence is only reserved for men, prevents women from seeking services as there is a lack of recognition of violence in same-sex female relationships and homophobia (Hassouneh and Glass, 2008; Alhusen, Lucea and Glass, 2010; Hassouneh and Glass, 2008; Murray, Mobley and Seaman-De-John, 2007; Murray and Mobley, 2009; Rollè et al., 2018).

GENDER DIVERSE

There are considerations for gender-diverse people when experiencing IPV or seeking services for IPV. One's gender identity can be used as a manipulation tactic (Courvant and Cooks-Daniels, 1998; Morray et al., 2007; Tesch and Bekerian, 2015). Other specific methods of IPV experienced by gender-diverse people could be physically attacking areas of the body that signifies someone's gender, such as their chest, hair or genitals, destroying items that help with their transition, such as wigs and makeup, throwing away or withholding hormones or forcing someone to have sex in ways that do not align with their gender (Tesch and Bekerian, 2015; Baker et al., 2015). Further, accessing services for gender-diverse people can be challenging as they are often segregated and a person might not identify as male or female, be in the process of transitioning or could have characteristics of both binary genders (Courvant and Cook-Daniels, 1998). Avoiding mainstream services due to discrimination and misunderstanding of non-conforming gender identities is prevalent (Tesch and Bekerian, 2015). In addition, most DV shelters operate in the context of ceasing communication with the abusive partner and leaving the

relationship. However, for transgender folks, that can prevent them from transitioning if their partner is financially supporting their transition, as gaining employment can be challenging due to broader societal discrimination (Tesh and Bekerian, 2015).

PERSONS WITH A DISABILITY

Victims with a disability can experience higher levels of vulnerability to IPV because they are dependent on their partner for a variety of needs, including everyday transportation and communication (Breiding and Armour, 2015). Many survivors of IPV who have a disability experience violence in ways that are not in the criminal code, and therefore the perpetrator cannot be prosecuted. Some include:

- Withholding or sabotaging needed equipment such as medication, wheelchairs, canes, and even harming animal assistants.
- "Making threats that leaving the relationship will result in institutionalization for the woman, including the possible loss of their home and child" (Lalond and Baker, 2019).
- Withholding assistance such as denying access to the bathroom or failing to interpret, especially in healthcare provider situations where the person with a disability is not getting all relevant information to make the best decisions for their care.
- Oppression and barriers when trying to access medical services.
- Devaluation of skills and abilities ultimately affects women's ability to assert their empowerment and independence and gain housing and employment.
- People with a disability could face abuse by their caregivers,

especially in the older population.

- Demanding physical affection before getting necessary assistance, such as transfer to a bath or distributing medication (Smith, 2008; Lalonde and Baker, 2019).

Other considerations that factor into women seeking services such as needing their partner to help care for their children (Smith, 2008) and having to stay in a space i.e. shelter for a long-period of time that is not accessible and does not meet their needs (Lalonde and Baker, 2019). In addition, IPV can cause disabilities such as traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD). TBIs are considered a cognitive disability, and the literature found that 60-92% of IPV survivors have obtained a TBI from IPV. The rates for survivors experiencing PTSD from IPV range from 45% to 84% (Lalonde and Baker, 2019). Not only are women with a disability experiencing IPV in ways that are unique and not punishable by law, but IPV can cause them to have a disability.

IMMIGRANT AND REFUGEE POPULATIONS

Immigrants and refugees occupy various identities that intersect (Tabibi et al., 2018). Gender is a main identity in immigrant and refugee IPV, and it is connected with visibility in public spaces and lack of being in spaces where decisions are made (Okeke-Ihejirika et al., 2020). Further, it is critical to discern there is no homogenous definition of IPV as it is experienced and defined differently across cultures. A pan-cultural description of IPV is irrelevant, and inequalities need to continue being centered on structural injustices instead of culture (Okeke-Ihejirika et al., 2020; Tabibi et al., 2018). In addition to those mentioned above, following different gender roles than in their home country could result in retaliation or punishment

(Canadian Council on Social Development, n.d.), reinforcing the importance of a gendered analysis. Further, IPV in immigrant and refugee populations shows up in different ways, such as:

- Refusing the person to learn English or French prohibits them from gaining employment and increases isolation.
- Non-status women are hesitant to seek services and call the police because they are worried about losing their children and the consequences of being non-status.
- They are generally unaware of their rights as a refugee and are told they must remain in the abusive relationship to receive refugee status (Tabibi et al., 2018).

There are also risk factors for immigrant and refugee women who experience IPV to become homeless, such as their immigration status, lack of language skills, social isolation and unemployment/underemployment (Canadian Council on Social Development, n.d.). Furthermore, the literature reveals high levels of discrimination from landlords when searching for housing (Tabibi and Baker, 2017; Tabibi et al., 2018). Most immigrant and refugee women seek out informal support such as friends, family, or religious rather than formal services (Okeke-Ihejirika et al., 2020).

INDIGENOUS

It is challenging to summarize the context of Indigenous women and gender-diverse experiences with IPV and housing. We want to acknowledge that this section lacks detailed substance and is just an overview. We strongly encourage seeking out Indigenous-based sources to add to the information this section provides. It is critical to acknowledge issues that exist in Indigenous communities, such

as IPV and homelessness, are direct results of colonialism and the effects are still pervasive to this day (Ontario Native Women's Association, 2018; Klingspohn, 2018; Nixon and Tutty, 2010; Jackson, Coleman and Grass, 2015). Indigenous women face higher rates of violence in all forms by all perpetrators (Ontario Native Women's Association, 2018; Klingspohn, 2018). In addition, there are four unique areas in which Indigenous women and gender diverse people experience implications of IPV:

- Family farms: threatening livestock, pets or crops, altering the long-standing familial or spiritual connection to the land and potentially risking children's inheritance if one flees abuse and gives up their land.
- There is evidence that an increase in resource extraction activity results in higher rates of violence.
- Environmental crises often lead to an increased risk of IPV (Nonomura and Baker, 2021).

Not only are Indigenous women and gender diverse people experiencing more violence but the systems and structures set up to "help" people are extremely racist and discriminatory specifically police, child services and shelters (Jackson, Coleman and Grass, 2015). Therefore, due to the higher rates of violence, the long-standing effects of colonialism and neo-colonialism and the deep history of trauma in Indigenous communities it is critical shelters are culturally competent as connecting to one's culture is seen as a source of strength and healing (Klingspohn, 2018; Jackson, Coleman and Grass, 2015). Undoing the hundreds of years of colonial violence towards Indigenous women, girls and gender diverse people takes

immense time, resources, capacity and will. However, our project is actively taking steps to do what it can to ensure harms are reduced if not erased for Indigenous women who seek shelter services.

Policies

UN WOMEN HANDBOOK FOR NATIONAL ACTION PLANS ON VIOLENCE AGAINST WOMEN:

For decades, many international bodies have advocated for a version of a NAP for VAW, including the Committee on the Elimination of Discrimination Against Women, Committee on Economic, Social and Cultural Rights, Human Rights Committee, the Committee on the Rights of the Child, Committee Against Torture and the Committee on the Elimination of all Forms of Racial Discrimination. In 2012, UN Women released a Handbook for National Action Plans on VAW. Our team has reviewed the handbook and pulled out some key recommendations related to the Shelter Pulse project regarding centralized approaches and attitudes about policy, VAW and GBV.

There are some guiding principles in the handbook that align with the work of our project. One central theme highlighted "acknowled[ing] that violence against women is a violation of human rights" (p. 11), in which a rights-based approach is a guiding theme for our project as outlined in the X section of this literature review. Linking to previous human rights work and conventions that address VAW signifies it is not a new concept but continues the advocacy work and gives it a stronger voice. Another theme is having a clear definition of VAW, which provides a framework for

everyone to engage and consolidate efforts. It ensures a multi-sectoral response and builds knowledge sharing. Our project aims to have clear definitions to ensure everyone is on the same page and can engage in the subject matter in a way that fosters relationship building and promotes knowledge sharing. This is critical as the VAW and GBV landscape is different across provinces, and this will dictate the direction of the conversations and provide advocacy efforts for a more consolidated national approach to VAW and GBV. Another main theme has to do with intersectionality, which is a foundation of our project as the handbook explicitly states VAW is a manifestation of unequal power relations. There are multiple intersections of forms of violence and a focus should be on improving shelter knowledge of issues facing shelter seekers of multiple identities. One suggestion is a critical review of policies to inform and improve gaps. The Shelter Pulse project sees itself as a catalyst for demonstrating there is a need for intersectional policy review at a national level for VAW shelters.

The handbook highlights the integration of different structures, practices and processes to harmonize "structures for coordination, information sharing and networking and the ongoing communication of and advocacy for the plan's messages are just as important as the plan itself" (UN Women, 2012, p. 17). It strongly emphasizes the participation of civil society and stakeholders as a core component and is a repeated value throughout the handbook. This is in reference to areas such as strengthening law and policy, harmonizing policies, procedures and best practices, building capacity of organizations, improving evidence, establishing designated funding sources, system coordination and integration, accessible, immediate and secure accommodation for survivors

and the development and implementation of shared standards. There is also mention of engagement at the community level across different geographic locations as the handbook calls for "National Action Plans [to] provide for universal coverage of the response system across geographical areas, including rural or remote regions and accessibility to all women" (UN Women, 2012, p. 44). The Shelter Pulse project aligns with the message of including impacted communities at a grassroots level from underrepresented geographical locations as we are actively engaging leaders from rural VAW shelters who have different needs than urban VAW shelters across the country to inform policy and build their policy capacity.

WOMEN'S SHELTERS CANADA NATIONAL ACTION PLAN

In April of 2021, WSC delivered their NAP (Dale, Maki and Nitia, 2021) to the Federal Government. Over three months, this document was founded on strategic engagement with experts working in the VAW and GBV sector. The NAP strongly emphasized moving from social theory to social policy and framed that with four key areas of policy: enabling environment and social infrastructure, prevention, promotion of responsive legal and justice systems and support for survivors and their families. The following sections are a breakdown of which recommendations from the NAP intersect with Shelter Pulse.

Three main themes emerged under the pillar Enabling Environment and Social Infrastructure: housing, transportation and public transit, and digital infrastructure. Directed by the housing theme, the NAP states, "immediately implement the right to housing for all women, girls and gender diverse individuals taking into consideration the

needs of different groups" (Dale, Maki and Nitia, 2021, p. 26). Shelter Pulse adopts the principles of this statement by grounding our work in intersectionality and a rights-based perspective. Further, the NAP mentions an increase in funding for expansion and reduction in barriers to access shelter, explicitly noting that every community has access to 24/7 emergency shelter, increasing core funding for second-stage shelters and removing time limits on stays in shelters. To address the stark need for transportation, the NAP suggests developing a pan-Canadian transportation system that is accessible, affordable and safe. The final theme under the first pillar addresses the need to have online information and services and match that statement with advocating for universal access to the internet, cell services and digital devices such as cell phones and laptops (Dale, Maki and Nitia, 2021). The Shelter Pulse project recognizes that these are significant barriers to addressing and ending VAW and GBV.

Funding is mentioned again in the Prevention pillar. Specifically, relating to increasing funding commitments with a focus on core funding to women's organizations and to fund Indigenous Peoples for community-oriented and culturally-based action including knowledge sharing to decolonize conceptions around VAW and GBV. In speaking with our shelter partners, including those who work with Indigenous communities, sustainable and adequate funding is a significant issue, particularly for culturally competent programming and services. A national data collection framework for VAW and GBV that includes data on: "family violence, intimate partner violence, domestic violence, adolescent dating violence, femicide... sexual violence, sexual exploitation...[and] technology-facilitated violence" (Dale, Maki and Nitia, 2021, p. 46). Further, using a GBA+ lens for

data collection can aid in developing policies. Finally, WSC calls upon all levels of government to establish policy development processes for VAW and GBV, including the participation of marginalized women and gender-diverse people (Dale, Maki and Nitia, 2021). Our project recognizes the importance of seeking out feminist research to inform policy development, including addressing the needs of marginalized women and gender-diverse people.

The three themes (family law, legal representation and immigration) of the Promotion of Responsive Legal and Justice Systems Rationale mention regulation, coordination and all levels of government working together. The entire Shelter Pulse Project is an advocacy platform for collaboration, standardization, and coordination across jurisdictions. Further, on the point of collaboration, there is a call to ensure a continuum of services mentioning transition housing and second-stage housing, emphasizing that people in rural and remote communities receive the same levels of care and service. Our project aims to do precisely that - ensure there are comparable levels of care across jurisdictions and provinces. Where one lives should not determine the level and quality of care they receive. In addition, WSC advocates for further increased collaboration with a cross-ministerial strategy to address technology-facilitated VAW and GBV and increased leadership between WAGE and Public Safety to increase consultation with feminist community advocates (Dale, Maki and Nitia, 2021).

The final pillar, Support for Survivors and Their Families, suggests applying a trauma-informed analysis to VAW and GBV services.

This analysis should expand to systemic, structural and institutional inequities. A guiding principle for our project is to be trauma-informed in all facets, including policy analysis, engaging with shelter partners and knowledge dissemination. Further, this pillar emphasizes operational funding to increase the accessibility of core services for survivors, including shelters and identify gaps in services for under-resourced communities in which rural, remote, Northern and Indigenous are specifically identified. Again, collaboration and information sharing across sectors and jurisdictions is a foundational theme.

The NAP suggests that core VAW and GBV services "should work collaboratively to promote information sharing across systems to ensure proper support and safety of survivors" (Dale, Maki and Nitia, 2021, p. 102). Further, creating a coordinated inter-ministerial and interprovincial council serves as a structured process for collaboration with feminist community-based advocates and can stop the unnecessary revictimization of survivors. WSC identifies that grassroots engagement is essential to tap into expertise and people with lived experience. The supports needed extends beyond survivors and their families to shelter staff. Standardizing and regulating staff training, salary and benefits can help prevent issues such as burnout, trauma-exposure response and high staff turnover (Dale, Maki and Nitia, 2021). Our project is engaging with grassroots shelters to present a collective voice to identify issues, reduce harm and increase collaboration.

GAPS

Although these documents are providing leadership in the space of addressing VAW and GBV, there are potential gaps that exist for rural communities. First as a foundational and cross-cutting gap, the landscape, clientele and needs are vastly different for rural, remote and Northern communities compared to urban shelters. To be truly intersectional rural, remote and Northern context needs to be examined and analyzed each as their own entity. Second, it is noted that rural shelters receive less funding, suffer from "brain drain" and have less surrounding resources and services. The capacity of these shelters to participate in engagement and consultation processes is marginal. There needs to be steps and ongoing engagement with the same target audience to truly extrapolate meaningful findings from these impacted groups. Finally, improving coordination, collaboration and access to services (wraparound, digital infrastructure and transportation) are going to require more resources and commitment from diverse levels of government, ministerial support and community agencies. Supports and services for shelter seekers are few and far between in rural communities compared to urban therefore, the distance and availability of services needs to be strongly considered.

CONCLUSION

The intersections between GBV and homelessness are pervasive, complex and deeply affect all areas of one's life. Fundamental guiding principles such as intersectionality, trauma-informed, and rights-based emerged in the literature and the NAP. These principles and feedback from our shelter partners are guiding our selection of policies in the areas of trauma-informed, inclusion, diversity, harm reduction, cultural competency and reconciliation/decolonization. Our project team has been meeting with experts and leading institutions in the field to inform our gaps and provide insight and reflections on their work in the GBV sector. We are also connecting with VAW shelter umbrella organizations and funders who set the standards for the shelters. Our goal is to try and extend our reach across Canada and connect with as many impacted communities and interested parties as possible.

Next Steps

The next steps of our project are continually evolving to meet this sector's needs and dynamic nature. We are continuing to work with our knowledgeable experts to map out the scope, research, and direction of the project. Alongside that, we are continually engaging with our shelter partners to learn about their needs, how to make participation more accessible and what they would consider project successes. We have worked with consultants to develop a robust evaluation framework for Shelter Pulse and will be using that to inform our monitoring and evaluation practices. Shelter Pulse is a living project in that it's meeting changing needs while working in a changing landscape as GBV and homelessness sectors are receiving more recognition than in past years. Shelter Pulse is being driven by incredible and passionate people from all areas across the GBV sector who are dedicating their time, energy and experiences to making this a successful project.

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APPENDIX A

Below are articles pulled from the Truth and Reconciliation Commission of Canada, the United Nations Declaration of the rights of Indigenous Peoples and the National Inquiry report of Violence Against Indigenous Women and GIrls. Although there are numerous actions and recommendations that apply to our project especially from the Inquiry report, we have limited our selection for this project.

Truth and Reconciliation Commission of Canada:

19. We call upon the federal government, in consultation with Aboriginal peoples, to establish measurable goals to identify and close the gaps in health outcomes between Aboriginal and non-Aboriginal communities, and to publish annual progress reports and assess long term trends. Such efforts would focus on indicators such as: infant mortality, maternal health, suicide, mental health, addictions, life expectancy, birth rates, infant and child health issues, chronic diseases, illness and injury incidence, and the availability of appropriate health services.

21. We call upon the federal government to provide sustainable funding for existing and new Aboriginal healing centres to address the physical, mental, emotional, and spiritual harms caused by residential schools, and to ensure that the funding of healing centres in Nunavut and the Northwest Territories is a priority.

39. We call upon the federal government to develop a national plan to collect and publish data on the criminal victimization of Aboriginal people, including data related to homicide and family violence victimization

41. We call upon the federal government, in consultation with Aboriginal organizations, to appoint a public inquiry into the causes of, and remedies for, the disproportionate victimization of Aboriginal women and girls. The inquiry's mandate would include: i. Investigation into missing and murdered Aboriginal women and girls. ii. Links to the intergenerational legacy of residential schools.

55. We call upon all levels of government to provide annual reports or any current data requested by the National Council for Reconciliation so that it can report on the progress towards reconciliation. The reports or data would include, but not be limited to:

vi. Progress on reducing the rate of criminal victimization of Aboriginal people, including data related to homicide and family violence victimization and other crimes.

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United Nations Declaration of the Rights of Indigenous Peoples:

Article 2 Indigenous peoples and individuals are free and equal to all other peoples and individuals and have the right to be free from any kind of discrimination, in the exercise of their rights, in particular that based on their indigenous origin or identity.

Article 21 2. States shall take effective measures and, where appropriate, special measures to ensure continuing improvement of their economic and social conditions. Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children and persons with disabilities.

Article 22 1. Particular attention shall be paid to the rights and special needs of indigenous elders, women, youth, children and persons with disabilities in the implementation of this Declaration. 2. States shall take measures, in conjunction with indigenous peoples, to ensure that indigenous women and children enjoy the full protection and guarantees against all forms of violence and discrimination.

National Inquiry: Reclaiming Power and Place:

1.1 We call upon federal, provincial, territorial, municipal, and Indigenous governments (hereinafter "all governments"), in partnership with Indigenous Peoples, to develop and implement a National Action Plan to address violence against Indigenous women, girls, and 2SLGBTQQIA people, as recommended in our Interim Report and in support of existing recommendations by other bodies of inquiry and other reports.6 As part of the National Action Plan, we call upon all governments to ensure that equitable access to basic rights such as employment, housing, education, safety, and health care is recognized as a fundamental means of protecting Indigenous and human rights, resourced and supported as rights-based programs founded on substantive equality. All programs must be no-barrier, and must apply regardless of Status or location.

1.2 We call upon all governments, with the full participation of Indigenous women, girls, and 2SLGBTQQIA people, to immediately implement and fully comply with all relevant rights instruments, including but not limited to:
iii. All the recommendations of the 2015 UN CEDAW Inquiry Report and cooperation with the UN Committee on the Elimination of Discrimination against Women on all follow-up procedures.

iv. All recommendations made by international human rights bodies, including treaty-monitoring bodies, on causes and recommendations to address violence against all, but specifically Indigenous women, girls, and 2SLGBTQQIA individuals.

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1.6 We call upon all governments to eliminate jurisdictional gaps and neglect that result in the denial of services, or improperly regulated and delivered services, that address the social, economic, political, and cultural marginalization of, and violence against, Indigenous women, girls, and 2SLGBTQQIA people.

1.8 We call upon all governments to create specific and long-term funding, available to Indigenous communities and organizations, to create, deliver, and disseminate prevention programs, education, and awareness campaigns designed for Indigenous communities and families related to violence prevention and combatting lateral violence. Core and sustainable funding, as opposed to program funding, must be provided to national and regional Indigenous women's and 2SLGBTQQIA people's organizations.

3.3 We call upon all governments to fully support First Nations, Inuit, and Métis communities to call on Elders, Grandmothers, and other Knowledge Keepers to establish community-based trauma-informed programs for survivors of trauma and violence.

3.4 We call upon all governments to ensure that all Indigenous communities receive immediate and necessary resources, including funding and support, for the establishment of sustainable, permanent, no-barrier, preventative, accessible, holistic, wraparound services, including mobile trauma and addictions recovery teams. We further direct that trauma and addictions treatment programs be paired with other essential services such as mental health services and sexual exploitation and trafficking services as they relate to each individual case of First Nations, Inuit, and Métis women, girls, and 2SLGBTQQIA people.

4.7 We call upon all governments to support the establishment and long-term sustainable funding of Indigenous-led low-barrier shelters, safe spaces, transition homes, second-stage housing, and services for Indigenous women, girls, and 2SLGBTQQIA people who are homeless, near homeless, dealing with food insecurity, or in poverty, and who are fleeing violence or have been subjected to sexualized violence and exploitation. All governments must ensure that shelters, transitional housing, second-stage housing, and services are appropriate to cultural needs, and available wherever Indigenous women, girls, and 2SLGBTQQIA people reside.

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4.8 We call upon all governments to ensure that adequate plans and funding are put into place for safe and affordable transit and transportation services and infrastructure for Indigenous women, girls, and 2SLGBTQQIA people living in remote or rural communities. Transportation should be sufficient and readily available to Indigenous communities, and in towns and cities located in all of the provinces and territories in Canada. These plans and funding should take into consideration:

· ways to increase safe public transit;
· ways to address the lack of commercial transit available; and
· special accommodations for fly-in, northern, and remote communities.

15.6 We call on all Canadians to Protect, support, and promote the safety of women, girls, and 2SLGBTQQIA people by acknowledging and respecting the value of every person and every community, as well as the right of Indigenous women, girls, and 2SLGBTQQIA people to generate their own, self-determined solutions.