Shelter *Pulse*

"What We Heard" Report

RURAL DEVELOPMENT NETWORK

MRWS
MOUNTAIN ROSE WOMEN'S SHELTER ASSOCIATION

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Project Background

Violence against women (VAW) shelters in Canada's rural, remote and Northern communities[1] operate in a unique geographic, cultural and political context that shapes both organizational capacity as well as the experiences and needs of the women and families they serve. A legacy of inadequate funding for women-serving organizations and rural communities has contributed to barriers that limit women's shelters' ability to deliver services that reflect the values, principles, and standards that are widely accepted throughout Canada's sheltering movement.

Organizational policies are influential tools that can, when properly developed and implemented, lead to meaningful change in practice. Policies that are developed for rural settings are more likely to achieve their intended results when they are centered around the needs, assets, priorities, expertise, etc. of that specific place. Sharing place-based policies, along with implementation knowledge gained through actual practice, with other non-urban shelters also supports the advancement of consistent standards of service delivery.

The Shelter Pulse Project is a collaboration between the Rural Development Network (RDN) and Mountain Rose Women's Shelter Association (MRWSA) funded by Women and Gender Equity Canada (WAGE) through the Feminist Response and Recovery Fund.

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[1] Rural: community or geographic location with low population density and/or a population less than 10,000. Remote: community or geographic location that is not accessible by road year-round. Northern: community or geographic location that is designated by the provincial government as being the northern part of the provinces, all the Canadian territories are considered Northern.

The core project aim is to create a user-friendly web-based tool that houses policies specific to VAW shelters that are:

- Aligned with best, promising, and innovative practices.
- Adapted specifically for non-urban contexts.

This project recognizes that many rural women's shelters are facing insurmountable barriers beyond their control to implementing best or promising practices. Many also have community-level assets and opportunities that can enhance their services to women. While the RDN brings a distinct rural lens and the MRWSA provides expertise on providing VAW services in a rural setting, the project's national scope and incredible diversity of intended end-users requires significant consultation and active participation during all phases of the project.

To that end, Shelter Pulse has embarked on a series of engagement activities with Affected Parties to build relationships, solidify project buy-in, assess policy needs and capacity, and establish expectations and accountabilities. This report is a summary of "What We Heard" through those activities.

Women and Gender Equality Canada   Femmes et Égalité des genres Canada

Canada

Engagement Overview

VAW Shelter Partners

As the intended end use of the Shelter Pulse tool, VAW shelters are the most Affected party and therefore a priority for early and in-depth involvement. Recruitment of VAW shelters as project partners began in 2020 during the application development process with RDN's CEO calling shelters to see if they had unmet policy needs. Due to capacity and staff turnover, some shelters were not able to participate in the project therefore, a second round of recruitment took place May into June 2022. While both the RDN and MRWSA have distinctly rural perspectives, the national scope and diversity of target communities requires a wide range of perspectives be included. Engagement with partners from across the country and community types (i.e. rural, remote, Northern, small and medium population) is essential.

Partnership Accountabilities

Partnership Agreements have been drafted and sent to confirmed Partners. The purpose of these agreements is to share essential project information and to set organizational responsibilities, expectations, and accountabilities for the working relationships between the convening agencies (RDN and MRWSA) and Shelter Partners.
Shelter Partners are receiving financial compensation for their participation in this project. Tracking templates have been drafted and are collected quarterly from Partners to compile the necessary information to responsibly manage and report these transactions.

Active Shelter Partners

The following table outlines the engagements with active Shelter Partners, noting their region and community representation, as of June 2022. This project recognizes that Partners' capacity and desire to participate may change over the course of this multi-year project, as such recruitment efforts will remain ongoing.

Province/ Territory	Total # of Shelter Partners	# that Completed Survey	# Attended Engagement session	Community Types[1]	# of Indigenous Shelters[2]
Alberta	3	2	3	1 Rural 1 Small Centre 1 Med. Centre	0
British Columbia	1	0	0	1 Rural	0
Manitoba	3	1	2	2 Rural 3 Northern	0
Newfoundland	1	0	0	1 Rural	0
Northwest Territories	1	1	1	1 Northern	1
Nova Scotia	2	0	1	2 Rural	0
Ontario	13	8	11	2 Rural 6 Northern 4 Small Centres 3 Med. Centres	4
Saskatchewan	1	1	0	1 Rural 1 Remote 1 Northern	1
TOTAL	25	13	18	10 Rural 1 Remote 11 Northern 5 Small Centres 4 Med. Centres	6

[1] Communities are primarily identified as rural, remote, or Northern (RRN), a community may fit into more than one category (e.g., rural and Northern). When a community does not fit into RRN categories, it is defined as either a small (population less than 29,999) or medium (population between 30,000 and 99,999) population centre.

[2] As identified by the Shelter Partner.

Survey

An initial survey was sent to shelters in February/March 2022 and continues to accept responses from new Partners as they are engaged. To date, 13 responses have been received from shelters in 5 provinces/territories. The survey gathers information about:

- Basic operations (e.g., shelter type, size, funding, and service users).
- Current state of policy development.
- Policy challenges and concerns.
- Policy priorities for this project.

Engagement Sessions

There have been 6 engagement sessions since March 2022 (March 16, April 4, May 24 and 25, June 9 and 16), attended by eighteen shelters from 5 provinces/territories. Beyond building relationships and buy-in the focus of engagement sessions have been to:

- Request current policy documents and resources.
- Identify policy areas of concern that the project could address.
- Clarify engagement preferences and levels of commitment.

Key Learnings

Both the survey responses and information gathered at engagement sessions have informed the findings below. They were categorized into Context, Content, Delivery, and Engagement Considerations.

Context

Participants shed light on the situation with current policy development and implementation, including their most significant challenges and considerations for the project.

POLICY FIT

Issues of policy fit were top concerns of survey respondents. The majority indicated that their current policies did not fit the context of their service users and community (n=8) and/or did not line up with their current program offerings (n=7). Another issue of fit was that policies do not meet funder requirements and/or accreditation standards for the organization or staff (n=5). Furthermore, the top priorities for improving policies among survey respondents were 'better reflecting the needs of clients' (n=11) and 'reflecting best practices' (n=11).

POLICY AND PROCEDURE DISAMBIGUATION

A common challenge participants shared was that of distinguishing and separating policy (high-level governance principles) from procedures (operational, task specific instructions). Many stated that they had excessive procedural/operational detail in current policy documents. This has caused unnecessary and protracted involvement of Boards in operational work which is best done by management and staff.

> *"Issues we are having is a lot of time procedure is mixed up into policy. The [Executive Director]wants to be able to change things without having to have board approval. Procedures are separate from the policy manual."*

POLICY DEVELOPMENT AND IMPLEMENTATION

Participants provided information on their current practices and most significant challenges.

- *Keeping up with policy review and development* – Survey respondents indicated that while most had review schedules and had reviewed policies within the last 5 years, the majority (n=8) still indicated that it was difficult to meet their own schedules.

- *Staffing* – Many shelter participants cited single staffing as one of the biggest barriers to implementation of harm reduction and TVIA policies.

    "Staffing is a huge issue. Only having one staff on at a time, the harm reduction piece is tricky. Not being judgemental or limiting access but not triggering the other clientele."

    "We are a one-person shelter and don't have capacity to provide service to undiagnosed or unmedicated mental health issues or someone who's heavily involved in addiction."

- *Funding and capacity* – Every engagement session also brought up that core operational funding provides zero to very limited funding for policy review and development. Lack of expertise among boards and staffing constraints (e.g., understaffing, turn-over, leaves) are also sighted as major challenges. Project grant funding can sometimes be obtained, and consultants hired, but often a lack of VAW knowledge means management and staff will still need to devote significant time.

    "We hired a consultant because the staff do not have capacity to update policies. We started in 2015 and never made it to the Board. We had management turn over, leave of absence and then COVID delayed it until now."

- *Reactive policy development* – Policy is created or prioritized in reaction to an incident, often at the expense of proactive or regularly scheduled policy reviews. Reactive development can also sometimes lead to overly restrictive policies and poor implementation.

    "Quite often we develop policies as a reactive action. Too often shelters are under-resourced for the most part, so a lot of those policies are developed in a reaction to something."

- *Physical building constraints* – Participants pointed out that shelter's buildings are often not built to suit their specific needs. This creates difficulties in accommodating high- and low-barrier service users in the same space.

- *Unions* – A few participants discussed that collective agreements sometimes placed limitations that can make implementation of trauma-informed and harm reduction policies more complex and time-consuming. One participant also mentioned that their rural board was inexperienced in working and negotiating with unions.

RURAL, REMOTE AND NORTHERN CONTEXT

Participants noted many challenges that are specifically related to being in non-urban areas.

- *Large and diverse service areas* – Shelters often serve large geographic areas that include many communities, sometimes across jurisdictions and with various levels of accessibility.

  "Sioux Lookout services 24 First Nations communities some of which are remote and have to fly-in. Some have access to ice roads. The true Northern Ontario. Our district is the size of France - very spread out and very rural."

  "Simcoe Ontario is about the same size as PEI and very rural with 15,000 people and is the largest centre in 2 counties. Very close to several urban areas but are rural in the nature of their communities."

  "Thunder Bay serves many small communities around them, services communities 3 hours away and serves Indigenous women."

- *Transportation* – Distances and isolation often mean transportation is not available for service users accessing shelters and very expensive for shelters providing transfers or pick-ups.

  "I have had to phone Chiefs or private plane companies to get women out which is very expensive."

- *Limited supports* – Shelters can sometimes be the only social service available to their communities which can lead to operating outside their service mandate of prioritizing domestic violence. Specialized support for mental health and addictions are often totally absent or inaccessible. Economic crises, such as housing shortage, are also magnified in their communities.

  "We have no outpatient treatment, rehabs, detox, safe consumption sites. Nothing."

COVID 19

The coronavirus pandemic disrupted formal policy work and refocused it on COVID policies and procedures. However, this also resulted in some shelters incorporating some harm reduction practices.

"We started reviewing policies prior to COVID and then COVID took over our life."

"How do we get people to stay in their rooms when they need substances? I never thought I would be buying clients weed gummies."

For participants, the pandemic is still top of mind. It continues to impact staff and service users and participants foresee that it will do so for some time to come.

"Still in the thick of COVID so still have protocols being implemented in house. Everyone is feeling over it."

"Staff is tight again and staff are tired, most of COVID was at 60% capacity and were able to come up a bit due to increased funding. (Our) centre has more kids, longer stays, less independent women and more families. We're also stockpiling as much PPE as we can to prepare for a possible next wave."

"During COVID we had very low numbers and no children but now we are starting to see an increase again. Women felt they and their children were safer on reserve than in a shelter due to Reserve COVID restrictions. We have newer staff and are saying, 'just wait' as we are anticipating a surge."

Content

Survey responses about policy frameworks further emphasize participants' desire for better alignment with current shelter sector best practices, as discussed in the previous section.

Policy frameworks survey respondents would like to integrate
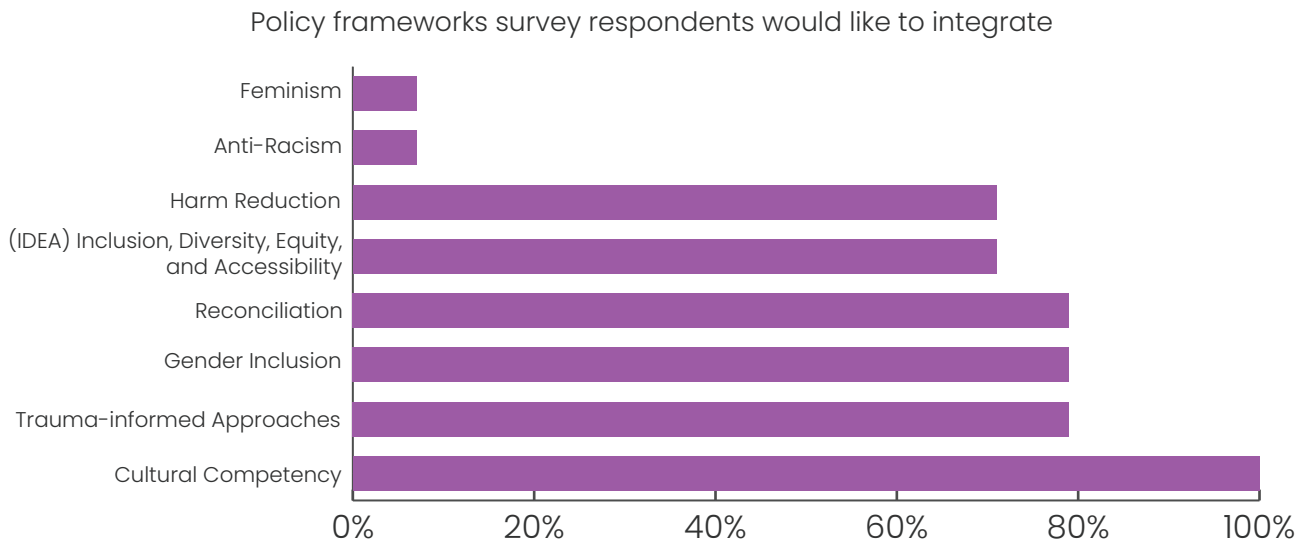
Responses about high-level priority policy areas also seem to indicate a desire for practical policies directly related to program delivery.

Priority policy areas of survey respondents
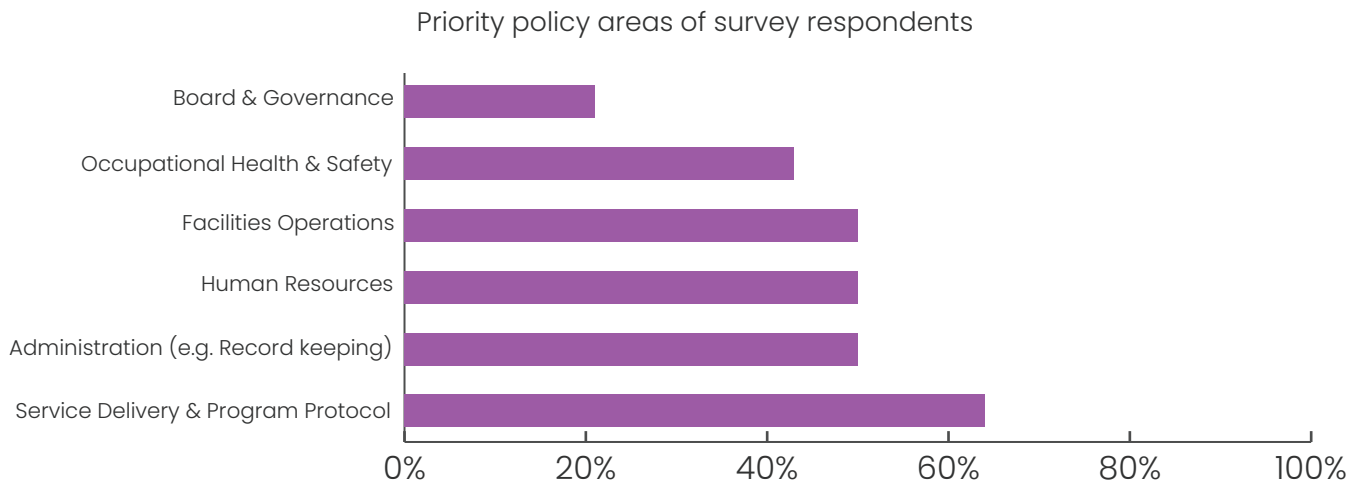
Specific topics were also discussed during engagement sessions. All of these should be thought of considering the contextual elements discussed in the previous section as well as the priority frameworks of the project listed above. The topics listed should not be thought of as limiting, but rather a place to start. Some of these topics were spoken of as both policies and procedures.

- *Communal Living* – Managing group living environments. Incorporating harm reduction, low-barrier access safely and in a trauma-informed manner.

- *Criminal Activity* – Clear policies on when and how law enforcement will be involved when service users are engaged in illegal activity related to harm reduction (e.g., sex work, drug use).

> *"We had a client selling drugs out of our parking lot. It was a safe place for her but endangered other clients and staff. It was a situation we could not predict. We are now very clear about what type of illegal activity will or won't be reported to police and what information will or will not be released to law enforcement."*

- *Emergency Preparedness* – Fire safety, extreme weather and natural disasters are serious threats for participants, even more so with advancement of climate change. Using COVID learnings to prepare for the next pandemic.

- *Governance* – Policies that clearly define board vs. staff responsibilities and areas of authority.

- *Harm Reduction* - Harm reduction and related staffing models with the nuances of restricted funding and rural operations.

- *Human Resources* – Trauma informed approaches to management and organizational development. Incorporating union mandates and policies for collective agreement negotiations.

- *Inter-Organizational Relations* – Policies and practices regarding relationships with other agencies (i.e., local media, law enforcement, emergency services, Child and Family Services, etc.).

- *Mandated Minimums* – Policies that meet/exceed legislative requirements for each province or territory.

- *Medication* – Policies and procedures for handling prescribed medication distribution.

> *"Our staff no longer distribute prescription meds to clients. Clients are responsible but we have seen overuse and overdose. We have been working with our pharmacy to provide a more limited supply in blister packs."*

- *Minors* – Policies and procedures for providing services to minors or housing unaccompanied minors.

> *"Funding for our sexual violence programs only covers ages 16+ but we are seeing more and more calls for service from under 16s."*

- *Pets* – Policies and strategies for accommodating pets.

- *Sexual Assault* – Policies for providing SA services in addition to domestic or family violence.

- *Supported Exits* – Trauma informed, ethically sound eviction policies and procedures are needed to benefit both service user's and staff safety.

> *"When is it no longer safe to keep someone in shelter? Shelter staff need to be able to do everything they could to keep a person in shelter and demonstrate such in case of adverse outcomes or complaints."*

- *Technological Safety* – Policies and procedures regarding operational technology (e.g., Reviews of technological vulnerabilities including life spans of software and hardware, compliance auditing and staff email safety.)

- *Trafficking* – Policies and procedures for providing service to survivors of human trafficking.

- *Violence and Harassment* – Policies and procedures to address violence and/or harassment from service users or their dependents towards other service users and staff.

OTHER CONTENT AREAS

Both the survey and discussion during engagements provided numerous examples of desired content that did not fall under the definition of 'policy'. However, they were closely related and deemed to be priorities for successful implementation and integration of the policies provided by Shelter Pulse users.

- *Procedure* – The focus on policy and protocol disambiguation in the previous section, the emphasis on protocols in the survey responses, and discussion of procedures during engagements, indicates a need for development of operational/implementation level documents and resources in Shelter Pulse in addition to policy.

- *Change management support* – For many shelters the incorporation of harm reduction and trauma- and violence informed approaches is a significant culture and practice shift. This type of change will require concerted and sustained effort over months and years. Resources for

planning, implementing, and managing the change are essential for successful shifts in practice.

- *Readiness Assessment* – Shelter Pulse should include information for shelters to understand what skills and resources are required for implementing a specific policy and/or procedure. As well as tools for gauging their level of readiness and providing steps to move toward readiness.

- *Review schedules* – Suggested review schedules should be included for Shelter Pulse policies.

- *By-Law Templates* – Documentation to support effective board governance could be included.

RESOURCES

Participants shared resources that they currently use and find helpful.

- *HR Downloads* – An online resource that provides downloadable manuals and templates, surveys/forms, job descriptions and training material, as well as serving as a record-keeping and tracking platform. Advisors are available with various specialties (e.g., unions) and they can audit organizational policies as part of compliance and risk management practices. However, HR Downloads is limited by being business focused, not non-profit, as well as not being adequate for the type of high-risk work in a shelter environment. They lack trauma-informed and harm reduction material as well as a feminist or anti-oppressive lens. They lack adequate tools for addressing the dynamics common in shelters.

- *Umbrella organizations* – A few shelters mentioned the central role of their provincial umbrella organization in terms of supporting networking as well as policy support.

    - Ontario Association of Interval and Transition Houses

        "COVID policies were led by OAITH. We wouldn't have survived without OAITH, they were front and centre."

    - Transition House Association of Nova Scotia

CONTENT CONSIDERATIONS FOR SHELTER PULSE

Participants discussed other issues besides content that should be kept in mind throughout the development process.

- *Innovation* – Participants expressed a desire to learn and incorporate innovative and emerging practices from each other and the sector at large into Shelter Pulse.

- *Prioritize survivors of violence* – Incorporation of policies meant to address mental health and addiction issues should still prioritize those experiencing domestic or family violence.

  "We are a dumping ground for addictions and mental health, it has overtaken the issue of being a survivor."

- *Flexibility* – The content included or developed by Shelter Pulse should leave room for individual organizations to adjust and interpret to suit their contexts.

  "Need to be really flexible in saying what you can't do but not saying what you can or should do (in policies), because being too tight can stop you from moving forward."

- *Addressing differences* – Including nuances of differing starting places, legislation, contextual realities, and jurisdictional issues should be carefully considered to achieve the desired outcome of more consistent service delivery across the country.

  "We're serving the same population differently, doing the same work differently, coming up with directives and things on the fly differently. In the development of policies, how will the differences be addressed? How do we acknowledge those differences and how do we come to terms with our differences?"

Delivery

Engagements revealed that participants were drawn to accessibility of the online tool proposed by the project and noted a few features for successful roll-out. The Shelter Pulse tool itself should be very user-friendly and intuitive, it should include a quick search feature, it should highlight essential policy components (i.e., legislated minimums) but allow significant customization to other aspects.

"Really want something that is electronic, easy to use, can just click or type in the policy you're looking for and it will bring you right there. Modern and user friendly, wants what it requires but also edit, add and remove any policies."

Engagement Considerations

Participants also shared insights and preferences for continued engagement with the project.

- *Knowledge exchange* – The networking, discussions and learning directly from other shelters and subject matter experts is a significant motivating factor for participating in Shelter Pulse.

- *Capacity* – While Shelter Pulse is viewed as a needed and exciting project by participants, most have limited capacity for in-depth involvement in content creation. Reviewing material and providing feedback, and testing the online tool were both mentioned as doable tasks.

- *Communication* – Many shelters experience 'information overload,' receiving a very high volume of information from many partners and projects that it is hard to manage and prioritize. Communication should be thoughtful, direct, and concise.

- *Information gathering* – Being flexible and offering multiple options for engagement and information gathering is preferred. Utilizing both simple immediate engagement methods like surveys as well as more intensive options like workshops or meetings for delivering or gathering the same type of information will yield the best results.

- *Broad inclusion* – Shelter Pulse should work to include as many shelter participants as possible.

> *"The more shelter folks that are involved in the development, the less likely edits and reviews will need to be done. Bring a lot of experience and expertise to the table."*

Next Steps

As the project moves ahead we look forward to using these insights to inform the web development process as well as the policy database content. We will continue to create meaningful engagements in each phase that support the project goals and add value to shelter partners participation. See the Engagement Strategy for a high level overview of plans for the policy research and development phase.

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