

# MAWS SURVIVOR ADVISORY GROUP RECOMMENDATIONS



Participants recap harmful and positive experiences, clarify service needs, identify gaps in services, and offer recommendations to reduce identified gaps.

## 1. Realities of life in shelter

Participants discuss motherhood, rural services, and being an Indigenous woman.



## 2. Harmful Encounters

Going more in-depth, participants offer stories and examples of harmful encounters.



## Staff Needs

## 3.

Participants discuss compassion fatigue, burnout, and the importance of taking care of staff well-being.



## 4. Filling in the Gaps

Participants offer recommendations to improve service delivery for in shelter services and outreach.

## Reminders

## 5.

Participants shine a light on the realities of life after leaving an abusive relationship and on transitioning out of shelter.



## 6.

## The System is Broken

Participants discuss how violence against women systems in Manitoba are broken.



## 7.

## Hope

Barriers exist but the hope is that recommendations will be taken seriously and have a positive impact on service delivery.



# Survivor Advisory Group Members



## Number of Members

During our initial session the Survivor Advisory Group comprised of ten members. After our first session, the group comprised of eight members. Two members identified personal challenges as their reason for departing the group (i.e. death of a loved one, ill child).



## Location of Members

Members were located in the following areas:

Winnipeg - 7 members (month one),  
5 members (ongoing)

Brandon - 2 members

Selkirk - 1 member



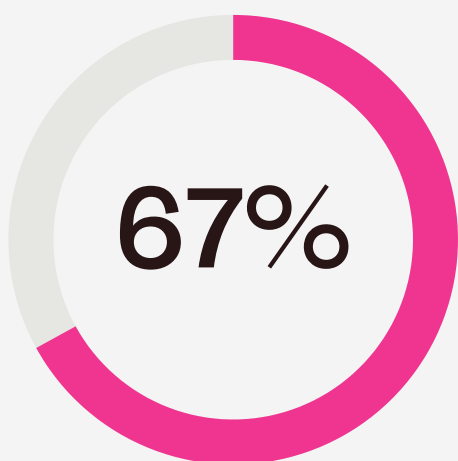
## Diversity of Members

All members identified as female, the majority of members reported having children, and members identified as Caucasian, Indigenous, Trinidadian, or Hispanic.



# MOTHERHOOD

## THE REALITIES OF LONE PARENTING



### Judgement and Shame

67% of participants reported feeling judged or shamed by shelter staff due to their parenting styles and their children's behavior. All participants recognized a need for staff to better understand the difficulties of parenting in shelter, and being a single parent. During a discussion on motherhood, a lack of time, energy, and money emerged as reasons mother's could not practice self-care. As one participant noted, "Taking a bath is not self-care. Everyone needs to do it. It's just personal hygiene... When do we [mothers] get a break?"

### Advocating for Mothers and Children

"I was admitted into shelter because my ex-husband tried to kill me. I was granted 50% custody of my daughter. I was told by the shelter that it would be too difficult to have my daughter here because they would have to continually move me from a single to a family room and couldn't guarantee rooms would be available... I was told I would have to leave my daughter 100% of the time with my abusive husband or else leave shelter. I had to go back. After I did, he tried to kill me. He almost choked me to death.

- Participant story



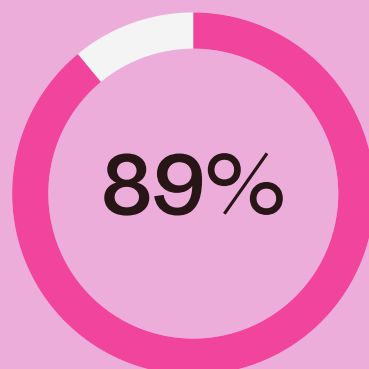
### Education & Prevention



100% of participants acknowledged the importance of keeping women and families safe through education and prevention. "Prevention requires educating our children, daughters and sons. We need to hold abusers accountable and we need men and women to back us up."

- Participant

### Peer Support Between Mothers



89% of participants recognized the importance of working through motherhood with the support of other mothers. As one participant explained, "sitting late at night with other women was my rock."



Prevention involves working with children who have witnessed or experienced abuse. One participant asked, "how do we help our teenagers transition into adults when they were born in a storm? How do we turn these boys into men?" Mothers need support such as trauma-informed education, mentoring, and role modeling for their children in order to break the cycle of abuse.

"You know only what you know."  
- Elder Mae Louise Campbell



MANITOBA ASSOCIATION OF WOMEN'S SHELTERS

In collaboration with the MAWS Survivor Advisory Group. Special thanks to: Amber, Allyson, Ellen, Celina, Tara, Stacey, Dana and Apryl



# RURAL LIVING

## THE REALITIES OF RURAL SERVICES



### Lack of Services and a Greater Need

100% of participants who live outside of Winnipeg reported a lack of services. Many identified the need for increased funding for shelters in rural areas because of a lack of available services. They also identified the need to increase available services and to improve on services that currently exist. Participants reported increased isolation. Women and families are at a higher risk of harm when isolated, and when there are a lack of services, and a lack of safe and accessible services.



### Increased Risk of Harm

"We look at a lot of our Indigenous women and girls who are living in extreme poverty and living in third world conditions in First Nation communities in the north and they don't have access to housing, economic opportunities, quality education, food security, access to quality health care... When you are living like that, of course, there's going to be higher levels of violence because you're so limited in what resources are available to you."  
- Hilda Anderson-Pyrz (680 CJOB)



### Isolation

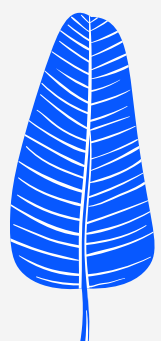
100% of participants acknowledged how intimate partner violence and family violence is exacerbated by isolation and rural living.  
"I still feel rural women are left out."  
- Participant

### Access to Outreach

100% of participants recognized the importance of outreach services in rural areas and the need for transportation, evening and weekend programming, and childcare in order to make outreach accessible.

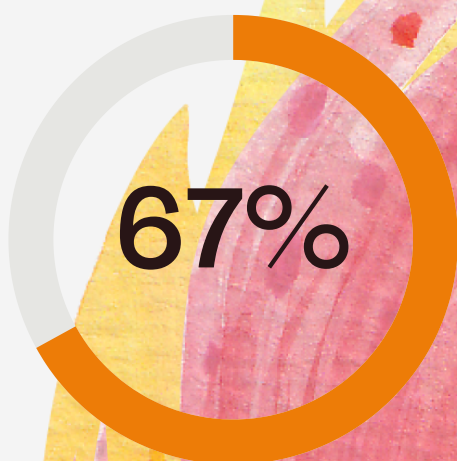


"Sometimes the most creative solutions come when we explain the needs of rural communities. The way [people] rise to meet the challenge is amazing. Whether allowing utilization of an office space or space in the school, or a room in a church, people find a way to work together and achieve their goals. An excellent example is the use of the Handi-Van for rural ladies experiencing IPV who have no means of transportation to escape to safety. Compassionate people in the right places found a way to make it happen."  
- Apryl (participant)



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# INDIGENOUS WOMEN THE REALITIES OF ACCESSING SHELTER



## Racism and Bias

67% of participants reported either experiencing racism and bias first hand by staff, or witnessing racism and bias by staff towards Indigenous residents. Many felt Indigenous women were seen as less deserving or undeserving, "junkies" or "addicts," bad mothers, and that their behavior was falsely perceived as being more aggressive than others. Many also felt that a woman is more likely to be denied shelter space if she is Indigenous. Furthermore, the likelihood of being denied increases when coming from a reserve.

## Nowhere to turn

Participants and EDs from federally run shelters identified the racism, discrimination, and abuse Indigenous women continue to face in terms of intimate partner violence and family violence. The discrimination and violence experienced by Indigenous women is further exacerbated by service providers such as shelter staff, police, RCMP, chiefs on reserve, band members, and Indigenous male-led advocacy groups. On reserve, women also stay quiet for fear of retaliation. The impact of residential schools and intergenerational trauma has led Indigenous women to believe they deserve the abuse and that the behavior is normal and acceptable.

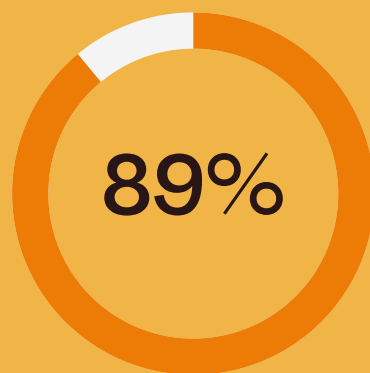


## Racism and Bias



100% of Federally run shelters identified Indigenous women as experiencing racism and bias by provincially run shelters. Reports of racism and bias have identified EDs, staff, and clients as perpetrators.

## Culturally Relevant Healing Practices



89% of participants recognized the importance of offering culturally relevant services and healing practices to Indigenous women and families. Participants felt shelters have a duty and responsibility to make space for Indigenous women and families to practice their culture as they see fit.



Who's the ideal victim that will conjure public outcry? What was it about *that one*? Their blue eyes? All those missing and murdered Indigenous women and girls... why were none of them worthy of public outcry?"  
- Tara (participant)

Historically, Indigenous communities were matriarchal. All decisions were made by grandmothers. Then the white man arrived and made Indigenous men believe they were superior to women. This led to Indigenous women's voices becoming devalued and silenced. This has been the case for far too long. But things are changing and Indigenous women are taking their voices and lives back.  
- Elder Mae Louise Campbell

"School teaches your mind. Indigenous teachings help your heart and spirit learn."  
- Elder Mae Louise Campbell



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# HARMFUL ENCOUNTERS : A SNAPSHOT



89% of participants reported feeling judged by staff. Participants reported, "women have enough expectations and responsibilities and are already in crisis when they come to shelter. Staff need to judge less and avoid gaslighting, shaming and guiltting women. Staff judgements are usually indirect and passive aggressive at times."

Participants reported feeling dehumanized by staff. For example, staff have unreasonable expectations of mothers. "Staff need to be patient with children and mothers. We're not necessarily proud of how we're behaving/ parenting either because this is not a normal situation, our children are not in a normal situation, so they are behaving differently and so are we... These children have been traumatized and so have we."

- Allyson (Participant)



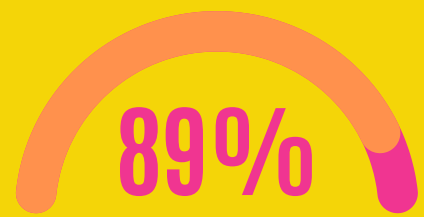
**SOMETIMES SHELTERS ARE VIOLENT AND YOU GET THREATENED. SHELTERS NEED TO BE SAFE SPACES.**

- PARTICIPANT



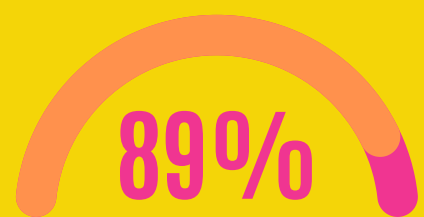
## UNCONSCIOUS BIAS

89% of participants felt staff need to check their bias and practice humility and empathy. For example, participants felt people suffering from addictions are treated very poorly and often denied space.



## ADVOCACY

89% of participants felt shelters are responsible for doing more: protest and commit to activism and be a part of change. For example, violence against women language often takes focus off perpetrator and we avoid talking about incest, trafficking, and pedophiles-advocate to educate on issues such as these.



## LOVE ON WOMEN

100% of participants felt staff need to give women the opportunity to talk and believe women because when you report, no one listens or believes you. "Women have been put down for centuries, it is time for a reawakening" (Elder Mae Louise Campbell).



Participants had several negatives experiences calling the crisis line. Family members have also been treated poorly when calling shelter. Remember, crisis impacts entire families. Show patience and empathy with family members.



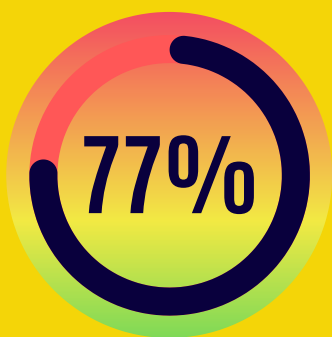
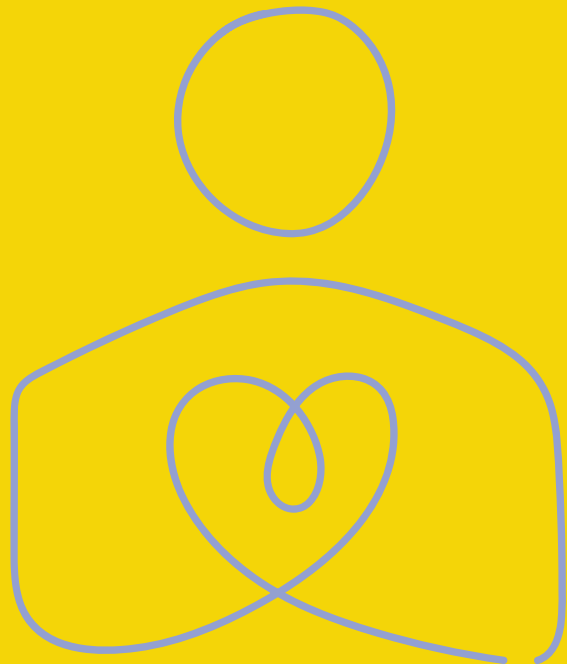
Women living in rural areas are more isolated and have greater difficulty accessing services (shelter, outreach).

Best memory: "The cheerful cook in the kitchen. She always smiled and made me a lunch to take to work. She was kind." Worst memory: "Intake. I understand the potential risk of bed bugs and lice however bagging and washing our clothes was not done gently and should have been. With 2 kids and 3 bags, staff didn't even offer to help carry a bag and made me feel as though I was dirty."

- Allyson (participant)



# STAFF FATIGUE & BURNOUT



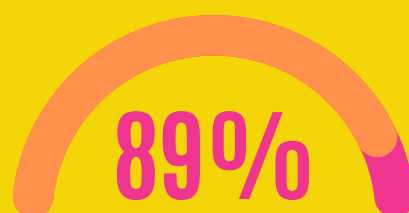
77% of participants reported recognizing compassion fatigue and/or burnout in staff. Self-care suggestions for staff included: offering eucalyptus plants for healing, ensuring staff are properly trained, offering staff opportunities to sit with Elders or participate in a sweat lodge or smudging ceremony.

Several participants identified management as responsible for ensuring staff feel confident and capable and for checking-in with staff and allowing staff opportunities to debrief. One participant suggested management, "get to know your staff. No one will produce anything positive if they do not feel valued. It starts with management. Management needs to be able to recognize when staff are not doing well."

“  
**STAFF CAN'T POUR FROM AN EMPTY GLASS. STAFF SELF-CARE IS IMPORTANT.**  
- PARTICIPANT  
”

## COMPLAINTS

89% of participants felt very little transparency in complaint process and felt powerless at times. "How do we prevent complaints and people who have complaints from falling through the cracks?"  
- Participant



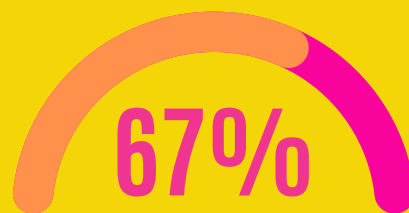
## FATIGUE & BURNOUT

100% of participants recognized "staff are running on empty. We can tell staff are worn down. But staff are the first people we talk to. When I need help but feel like I'm burdening staff or don't feel welcomed it plays a huge part in my [survivor's] recovery."  
- Participant



## DESENSITIZED

67% of participants felt staff seemed desensitized.



Often times, if a woman returns to shelter more than once staff attitudes suggest woman is undeserving and leads to a "why did you go back" mentality and line of questioning. Remember, "we can teach you about our experiences, not the other way around."  
- Participant

Staff attitudes impact an individual and families feelings of self-worth, confidence, mental health, and well-being. "It is important how welcomed you feel because you may not feel welcomed anywhere else."  
- Participant



# WHAT I NEED TO THRIVE WHILE IN SHELTER

AND HOW SHELTER'S CAN OFFER SUPPORT

## WORKSHOPS AND GROUPS

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Opportunities to nurture  
self-discovery & new skills

- Understanding legal rights
- Budgeting and financial planning
- Employment & entrepreneurship
- Understanding healthy relationships
- Esteem building & self-love
- Understanding intergenerational  
trauma
- Parenting support
- Healthy outlets for anger & stress
- Self-advocacy and self-care
- Body therapy to release trauma held  
inside the body
- Relevant cultural practices, exercises  
and information

## COMPASSION, RESPECT & HUMILITY

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Being treated without bias  
and with an understanding  
of the realities of privilege  
and power between staff  
and clients

- Be gentle with requests and demands
- Make initial encounter supportive
- Support the use of common areas for  
women who have trouble being alone  
at night or in need of peer support
- Be transparent on practices and how  
to make formal complaints
- Practice empathy

## RELATIONSHIP BUILDING

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Nurturing supportive relationships between women

- General support between residents to reduce loneliness and isolation
- Safe spaces to have difficult conversations and share difficult experiences
- Activities: yoga, beading, picnics, medicine picking, crafts, walks, time w/ Elders
- Celebrate birthdays/ holidays together and create opportunities to mingle

## COMMUNITY SUPPORT & ADVOCACY

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Partnering/ networking/  
collaborating with service  
providers, and providing  
access to community  
services and events

- Advocating for housing, legal aid,  
tenant rights, financial assistance
- Bus tickets to access community
- Maps and resource guides

### COUNSELING

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TRAUMA-INFORMED &  
PERSON-CENTERED  
SERVICES

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APPROPRIATE SUPPORTS  
IN PLACE FOR STAFF  
PROFESSIONAL  
DEVELOPMENT, WELL-  
BEING, AND SELF-CARE





Getting Creative with

# FUNDRAISING CAMPAIGNS



Most Canadians spend up to 50% of their income on housing and utilities. When you add basic expenses for needs such as food, personal hygiene items and transportation, surviving let alone thriving can become incredibly difficult for many.



**"WE ONLY HAVE WHAT WE GIVE."**

- Isabel Allende

"...until our women are healed, nothing will happen in our communities, no changes will be made. What inspires me of course is the belief that indeed our women have to take their rightful places in the community to be empowered again and to believe in the important role and spirit that they have in our community's wellness."

- Elder Mae Louise Campbell



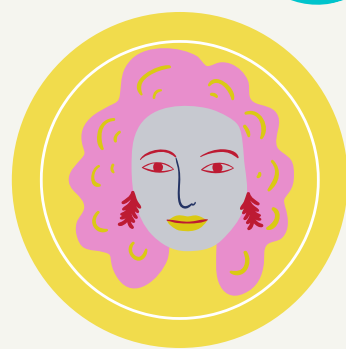
## DONATE A BUS PASS

Help a woman get to work by donating a bus pass, taxi ride, or even interview clothes.



## DONATE A LAPTOP

Help with entrepreneurship or with a woman or child's education by donating a computer, work space or phone.



## DONATE A HAIR CUT

Help build confidence and help with personal hygiene by donating a hair cut, laundromat pay card, or by offering low-cost dental services.



In order to survive and thrive, women and families need access to safe and affordable childcare, transportation, internet and phone, vision and dental care, education, and trauma therapy. In order to thrive, an individual must have their most basic and essential needs met. Once this happens, opportunities for healing can emerge.

**ADEQUATE FOOD AND NUTRITION IS ESSENTIAL TO OUR PHYSICAL AND MENTAL HEALTH. ENSURING ACCESS TO HEALTHY FOOD AND NUTRITION FOR INDIVIDUALS AND FAMILIES IS VITAL TO CREATING HEALTHY AND THRIVING COMMUNITIES.**





# OUTREACH

100%

All members of the advisory committee identified loneliness, isolation, and a lack of healthy female friendships as hinderances to their mental health and healing process.

Workshops and groups can help foster healthy relationships: "A year after leaving shelter and still lonely. Loneliness is huge and I need to heal but expected to just 'get over it.' But I've been impacted by trauma, abuse, addictions for much longer than time in shelter..."  
- Celina (participant)

Topic recommendations include self-advocacy, self-love, learning how to trust and develop boundaries, understanding intrusive thoughts, triggers and how to recognize the cycle of violence, understanding narcissism and types of abuse such as gaslighting and manipulation, understanding how emotional and mental abuse can be just as damaging as physical abuse.

89%

## Culturally Relevant Services

89% of participants recognized an importance and responsibility in providing culturally relevant services.

100%

## Partnerships and Networking

100% of participants recognized the importance of their stay in shelter as being a catalyst for building community relationships after leaving shelter.

89%

## Children's Programming and Counseling

89% of participants recognized the importance of providing children with age-appropriate education on violence and consent, mentoring, and counseling.

Danger doesn't end after the abusive relationship does, nor does it end after leaving shelter. Many women live in constant fear. One participant acknowledged "After I left my abuser, I wouldn't go anywhere alone. I still avoid going to the gas station on the reserve where he lives." Outreach and long-term services are needed to heal. "Nobody can heal on short-term programs, it's impossible. You're leaving these short-term programs with nothing."  
- Participant

"It's easier to build strong children than it is to fix broken men."  
- Tara (participant)

"The social and economic costs of intimate partner and sexual violence are enormous... Women may suffer isolation, inability to work, loss of wages, lack of participation in regular activities and limited ability to care for themselves and their children."  
- World Health Organization



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# Life After Abuse



Starting over after an abusive relationship ends comes with a lot of challenges. Women and families often experience increased isolation, poverty, and feelings of despair, while trying to heal from the aftermath of intimate partner violence (IPV) and/or family violence (FV). Sometimes this involves staying with friends, family, or in a shelter. Transitioning out of shelter and reintegrating into the community can be a very difficult task. What is most needed once leaving an abusive situation?



## Relationship Building

Loneliness and isolation are common experiences after leaving an abusive relationship. Outreach and groups can help build relationships, improve confidence, build peer support, build parenting support, improve mental health, and increase opportunities for community involvement.



## Therapeutic and Financial Supports

The impact of IPV and FV can be long lasting. Support to work through the effects of trauma are vital to healing. Trauma-therapy can support an individual's path to healing. Basic needs are essential and must be in place to be able to focus on healing. Basic needs might include safe and affordable housing, food, legal aid, transportation, childcare, health care coverage and simple things like access to a laundromat, telephone and a computer.



## Compassion and Respect

Often times, women and children who have experienced IPV and/or FV struggle with the stigma of being in shelter. This can impact an individual's confidence, sense of self, and mental health. Being treated with compassion and respect is essential to (re)building a person's sense of self-worth, and to nurturing healing.

# The System is Broken

"We're in the hands of broken men, broken people,  
broken systems."

- Participant



"Women have too much on their plates and inevitably can't do it all and have to give something up. With school, job, parenting, how do I have time for myself or for self-care? I chose to live off welfare and have people judge me so that I could go to school and be a good mom."

- Celina (participant)



I had concerns with how people were being treated but didn't know who to talk to. I was too afraid that if I caused an issue I would be kicked out of shelter."

- Ellen (participant)



"Why do we talk about the survivors but rarely talk about the perpetrators? Why don't we say their names and hold them accountable for creating victims? Abusers need help too. They're the ones that are abusing and they need to be the ones to change."

- Tara (participant)



"Women are the ones working to break these cycles of abuse. We're doing it all on our own as women. We're teaching our children."

- Allyson (participant)



"In so many systems we have to embellish to fit the criteria. How much struggling is enough to get help? Services such as ACT require people to be homeless for 6 months before they can support them."

- Amber (participant)



"When you leave your first thought is: what do I do now? Women are in constant fight or flight mode because shelters are temporary. [And then] you feel revictimized when you don't know what to look for or where to look for help."

- Dana (participant)



"There is so much [to do] and I felt so unsupported by the system. The crisis line was my saving grace. I didn't know who was on the other end of the phone, I just knew someone was going to pick up."

- Stacey (participant)



"The plight of many women in rural communities is you keep your mouth shut because you've got nothing... The system is every bit as abusive as the person you're leaving."

- Apryl (participant)



# Radical Hope, Radical Love, Radical Change

Participants, community stakeholders, and Executive Directors of federally run shelters reported that provincially run shelters in Manitoba have a poor reputation. This is in part due to the treatment of women and families by staff and the notion that many women and families with complex needs fit mandate and yet are still denied safe shelter.

These obstacles are just that, obstacles. For participants, community stakeholders, and Executive Directors of federally run shelters, there is still hope and the possibility for change.

Participants voiced their appreciation for shelters' interest in gaining insight into gaps in services. Participants also voiced their hope that the recommendations developed by the Survivor Advisory Group will not be dismissed, denied, or neglected. Rather, the hope is that the work put into developing these recommendations will be heard and will have a constructive impact on service delivery.