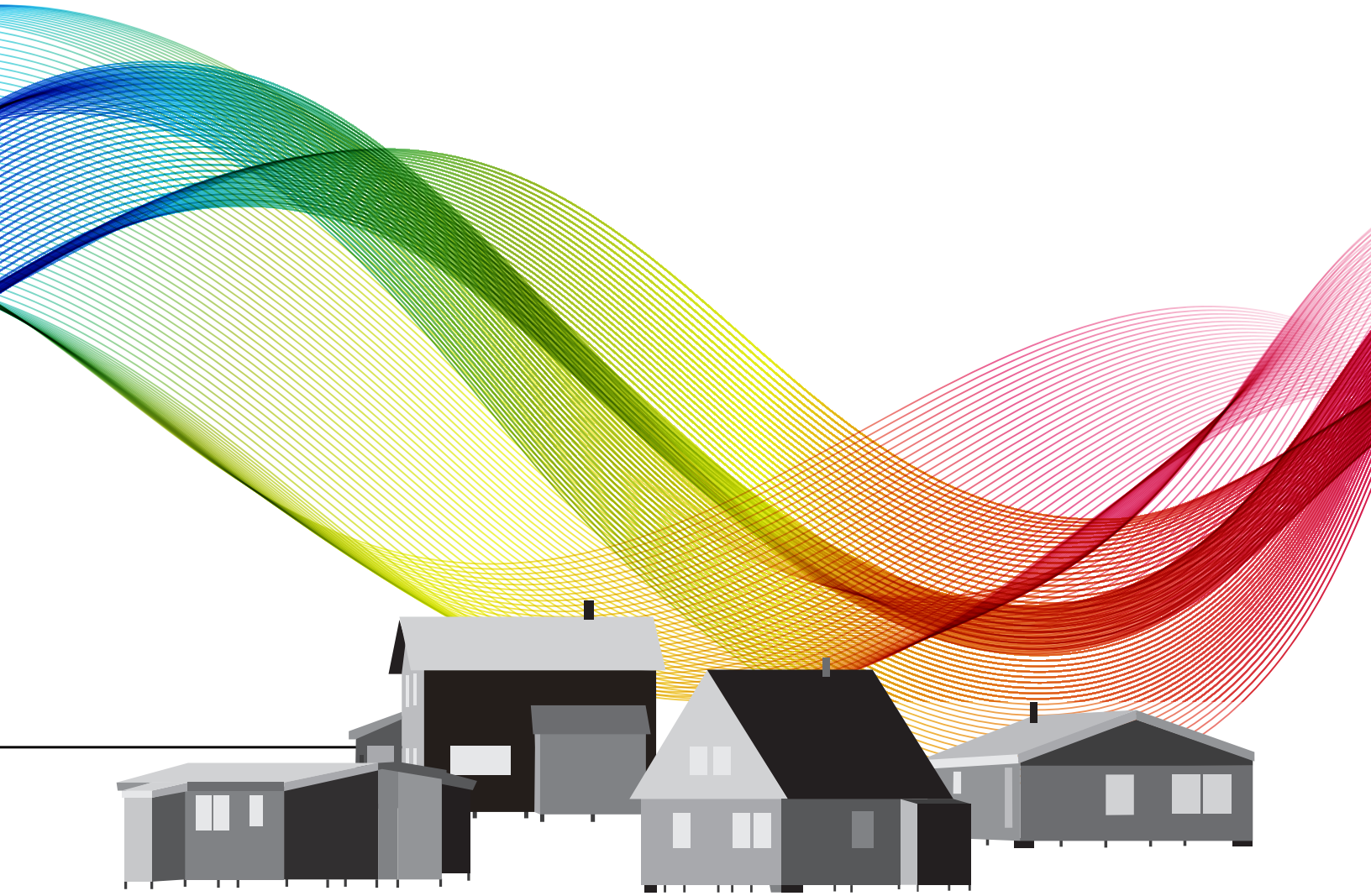
Pauktuutit Inuit Women of Canada

Study of Gender-based Violence and Shelter Service Needs across Inuit Nunangat

Final Report
March 2019



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Preface

It was important to the research team that this study be community driven and uphold the values of Pauktuutit Inuit Women of Canada and the Inuit women that the organization serves. Throughout the project, efforts were made to uphold the Inuit-specific values of *Inuit Qaujimajatuqangit* (IQ) in each of the seven communities and three urban centres where the research was conducted, including: Yellowknife and Inuvik in the Inuvialuit region of the Northwest Territories; Nain in Nunatsiavut and Happy Valley-Goose Bay in Newfoundland and Labrador; Kuujjuaq and Montreal in Quebec; Cape Dorset, Iqaluit and Clyde River in Nunavut; and, Ottawa in Ontario. The writing of this report is based in responsive research which braids together Inuit knowledge, community-based practices, and western scientific research methods to ensure that the research approach is safe for participants, respectful, trauma-informed and rooted in Inuit cultural values. These values are integral to the mission and goals of Pauktuutit, which aims to undertake activities to:

- promote the rights of Inuit women and children;
- provide the Inuit women of Canada with a united voice;
- work towards better social, economic and political conditions for Inuit women;
- work for the betterment of individual, family and community health conditions through advocacy and program action;
- encourage Inuit women to take their rightful place in society;
- promote equity for the views of Inuit women in all levels of Canadian governmental and non-governmental structures;
- motivate Inuit women to realize their potential as individuals and as a group;
- promote self-confidence and self-reliance amongst Inuit women;
- provide resources to ensure that Inuit children are raised with Inuit values, heritage, culture and language;
- encourage the involvement of Inuit women in all levels of Canadian society; and
- facilitate collaboration between Inuit women and other Indigenous peoples.

Disclaimer: This report was prepared in partnership between Quintessential Research Group (QRG) and Pauktuutit Inuit Women of Canada with funding from Indigenous and Northern Affairs Canada, however, the methodology and research findings are those of QRG.

Acknowledgement

The knowledge generated in this report is based on a two-tiered 24-month study of gendered violence and shelter needs across Inuit Nunangat[1] in direct consultation with community members and numerous Inuit-specific organizations. The research was headed by Pauktuutit Inuit Women of Canada and conducted by Quintessential Research Group. We are deeply grateful to all the Inuit elders and Inuit community members for sharing their ancestral, traditional and spiritual wisdom with the research team. Additionally, this report could not have been successfully completed without the extraordinary efforts, professionalism and energy of many people at Pauktuutit, including: Pauktuutit Board of Directors; Tracy O'Hearn, Executive Director; Samantha Michaels, Senior Research and Policy Advisor; Maya Doyon-Hanson, Manager of Violence and Abuse Prevention; and, Felicia Tugak, Project Coordinator of Violence and Abuse Prevention.

The research team is also grateful to all the individuals who courageously shared their stories of violence, all the frontline workers at shelters and the program and service providers. These individuals took the time to share information about their communities and lifestyles, barriers to healthy living, personal stories of experience with abuse at residential schools and with intimate partner violence and the violence from the impacts of ongoing colonial practices. Participants expressed anger, pain, sadness, fear, isolation, and depression that they have suffered but also the strength, wisdom and resilience that they have acquired. This report does not share these individual stories. The research team were trusted with these stories and have been given the responsibility to respect and uphold them. The research is centered on *Inuit Qaujimajatuqangit* (Inuit knowledge) and experiences, and we want the recommendations in this report to be taken up in a meaningful way.

1 The homeland of Inuit that is made up of four regions – Inuvialuit, Nunavut, Nunavik and Nunatsiavut.

About Us

Pauktuutit Inuit Women of Canada is the national non-profit organization representing all Inuit women in Canada. The organization's mandate is to foster a greater awareness of the needs of Inuit women, and to encourage their participation in community, regional and national concerns in relation to social, cultural and economic development. Pauktuutit's work is grounded in culturally relevant and gendered responses. This means that its work is Inuit-specific and reflects the needs and usability of the programs and services for Inuit women and girls. Pauktuutit undertakes numerous projects to research and examine the opportunities and barriers Inuit women face to participating in economic development and produces a variety of culturally-specific resources to address these issues and provides targeted supports.

Quintessential Research Group (QRG) is a well-respected and leading social research and community-informed consulting practice comprised of Indigenous and non-Indigenous researchers and activists. They specialize in conducting research and analysis for all levels of government, non-profit and Indigenous communities and organizations. QRG has earned a solid reputation for producing high quality gender-based research reports that are reflective of the socio-economic, health and environmental concerns of Indigenous peoples at the community level intended to support community initiatives and impact social policy.

Terms and Concepts About Violence

Below are descriptions of concepts and terms specific to the content and context of this study.

Violence against women (VAW)
The World Health Organization defines violence as the deliberate use of threatened or actual force to inflict harm on oneself, another individual or group of individuals. The effects of violence have a high probability of leading to psychological or physical trauma, maldevelopment or the loss of life (Rutherford et al., 2007).

Gender-based violence (GBV)
A type of violence that occurs in the context of women's and girls' subordinate roles in society and seeks to preserve unequal power distributions in favour of men (Rutherford et al., 2007). The United Nations defines violence against women as "any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or in private life," (United Nations, 1993).

Abuse
A pattern of trying to control or isolate an individual by making them feel afraid; getting power over an individual by making them feel confused, guilty, ashamed or uncertain about what will happen next; preventing an individual from leaving when they don't want to stay or silencing them (Department of Justice, 2012).

Emotional (or psychological) abuse
Controlling, frightening, isolating or eroding an individual's self-respect. Some emotional abuse may be a crime (making threats to kill or harm an individual; breaking personal things or hurting pets or threatening to do so; following an individual around and watching them all of the time and causing them to fear for their safety or for that of someone close to them, also called criminal harassment) (Department of Justice, 2012).

Physical abuse
Hurting the body on purpose against a person's will by: pulling hair; shaking; hitting; shooting; kicking; suffocating; biting; slapping; stabbing; scratching; pinching (Department of Justice, 2012).

Sexual abuse
Any sexual touching or sexual activity that is not wanted – being kissed, fondled or forced to have sexual intercourse, including when married, and not respecting when an individual says "stop." Sexual abuse also includes sexual activity with: a child (someone who is less than 18 years old, unless it is consensual and the two are close in age), a family member such as a grandchild, brother or sister; or where anyone under 18 years old is involved in pornography or prostitution (including where sex is traded for drugs, alcohol, etc.) (Department of Justice, 2012).

Self-directed violence
Violence imposed upon oneself that involves suicidality and forms of self-abuse. Suicidality refers to thoughts or behaviours that result in one's death. Self-abuse is the act of causing injury to oneself in the absence of suicidal intent (Rutherford et al., 2007).

Interpersonal violence
Forms of violence or terrorization between family members, intimate partners or individuals that may or may not know one another (Rutherford et al., 2007).

Collective violence
The use of violence by groups of individuals with the intent of advancing political, economic or

social ends. Collective violence includes acts of terrorism, war and organized crime between gang members (Rutherford et al., 2007).

Sexual violence
Violence involving non-consensual sexual conduct that may occur at the interpersonal or collective level. A behaviour is sexual violence if it is inflicted upon someone who is unable to consent or decline for reasons such as age, disability, power differentials or threats of harms (Rutherford et al., 2007).

Intimate partner violence (IPV)
Violence inflicted by a past or present partner that results in physical, sexual or psychological distress (Rutherford et al., 2007). It can occur among heterosexual or same-sex couples and does not require sexual intimacy (Healey et al, 2007).

Domestic violence
Domestic violence can occur between family members and/or partners and is often used interchangeably with 'intimate partner violence' (Healey et al, 2007).

Family violence
Harm that is inflicted on a family member. Examples of family violence include child endangerment, sibling violence, abuse of elders and domestic or intimate partner violence (Rutherford et al., 2007).

Workplace violence
Violence in which the safety or health of staff are threatened or harmed in the context of work (Rutherford et al., 2007).

Structural violence
Violence that is perpetuated through inequitable social, political and economic systems and occurs subtly through deep-rooted social structures of a given society (Rutherford et al., 2007).

Lateral violence
Violence that is disseminated at the peer-to-peer level. There is also aboriginal lateral violence (ABL) which results from colonialism and oppressive systems of governing, such as residential schools, loss of culture and appropriation of land from indigenous communities (Joseph, 2014).

Spiritual violence
The exertion of power over an individual through exploitation of their spiritual or religious beliefs. Using an individual's spiritual practices to gain control over the person is an example of spiritual violence (Government of Newfoundland and Labrador, 2018).

Financial abuse
Preserving power in one's relationship by controlling an individual's financial resources without their consent or by mistreating their finances (Government of Newfoundland and Labrador, 2018).

First-stage emergency shelter/Transition house
Provides shorter-term shelter to women and their children in crisis. Length of stay can be days, weeks, or months, depending on the shelter (Women's Shelters Canada, 2018). These terms are frequently used interchangeably.

Second-stage housing/Transitional housing
Provides longer-term accommodation to women and their children who may no longer be fleeing immediate abuse but still require continued support and safety. Longer-term accommodation may be months or years, depending on the shelter (Women's Shelters Canada, 2018). Currently, no second-stage housing/transitional housing is available in Inuit Nunangat.

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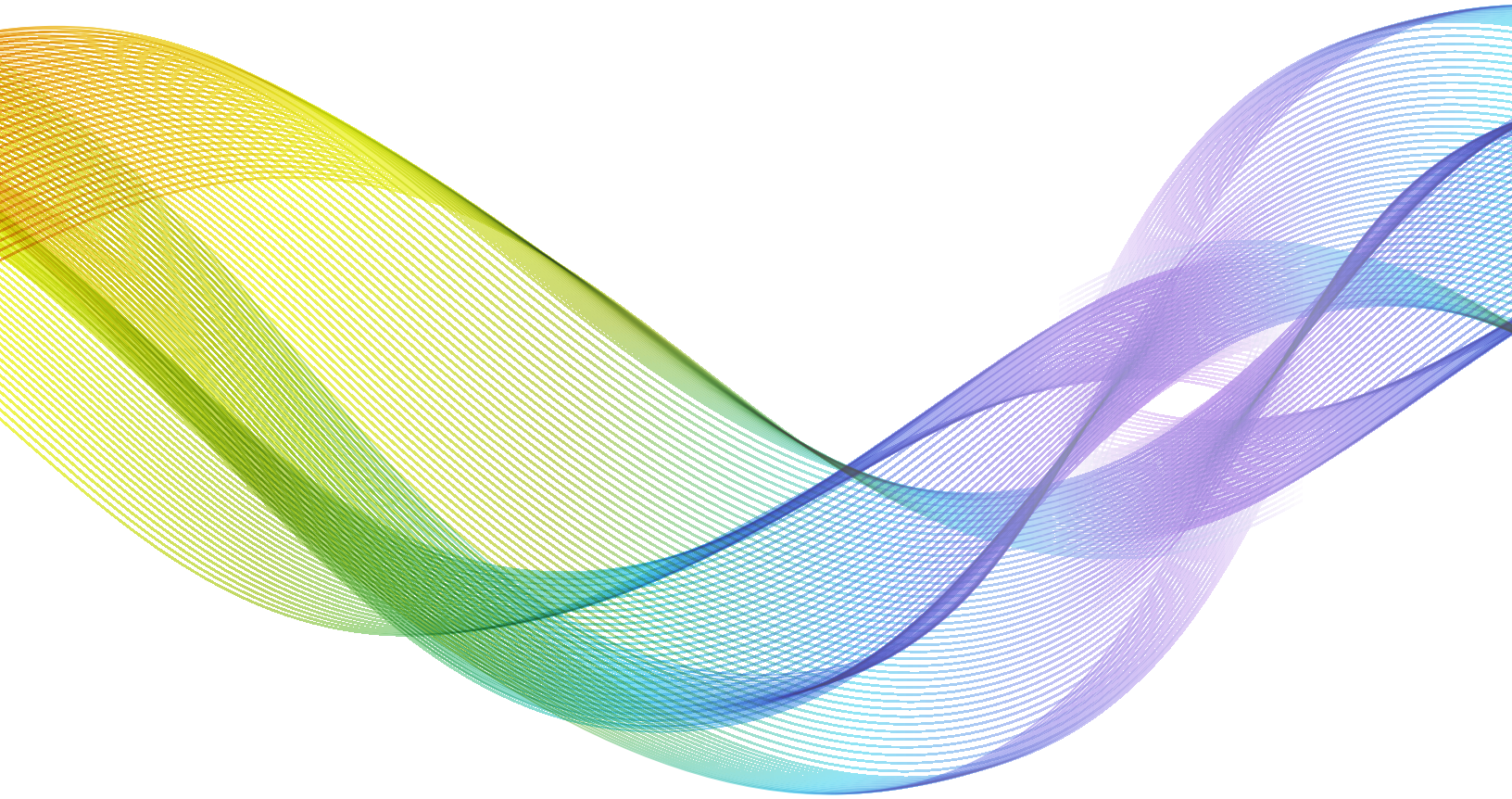

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PAUKTUUTIT
INUIT WOMEN OF CANADA

Study of Gender-based Violence and Shelter Service Needs across Inuit Nunangat

Executive Summary

Project Background

Pauktuutit Inuit Women of Canada is dedicated to building a future free from violence for every Inuk woman and girl in the country. Today, violence remains a pervasive social reality that actively shapes the lives and well-being of women and children across Inuit Nunangat. Compared to the national average, Inuit women experience rates of violence 14 times higher and violence continues to be the leading cause of preventable morbidity and mortality. Available data shows that the Canadian territories consistently record the highest rates of police-reported violence against women (Statistics Canada, 2013). In Nunavut, the rate of violent crime experienced by women is nearly 13 times higher than the national average, with women representing almost two-thirds of police-reported crime victims (Statistics Canada, 2018a). While these statistics are alarming, they do not even begin to capture the immense and immeasurable impacts of family and community violence on the lives of individual Inuit women and their families.

Despite increasing attention by federal, provincial and territorial governments to the devastating impacts of violence, Inuit women lack immediate access to safety options and essential long-term support services. More than 70% of the 51 communities across Inuit Nunangat do not have a safe shelter for women and children experiencing family violence. Currently, Inuit communities report an urgent need for crisis and long-term counselling, safe shelters, second-stage housing and training of Inuit front-line workers to address the issue of violence and its related challenges. In particular, mental health services to address unresolved and intergenerational trauma stemming from the experience of colonization have been identified as critical to preventing future violence. In many cases, the inadequate access to safety, supports and services has directly led to the loss of lives.

Purpose and Objectives

The Study of Gender-based Violence and Shelter Service Needs across Inuit Nunangat was conducted to increase understanding of the factors affecting Inuit women's experiences of violence. The study explores the determinants of gender-based violence in Inuit communities and identifies service gaps to improve the effectiveness of actions that aim to address the needs of Inuit women experiencing violence. The research project was guided by four primary objectives.

1. Identify the determinants of violence against Inuit women, including the relationship between violence and other determinants of well-being
2. Understand the impacts of violence in direct relation to shelter needs
3. Examine the cost of violence on the health care system
4. Map the services and programs that currently exist to assist women or those at risk of becoming victims of violence across Inuit Nunangat

Methodology

To address the research objectives, a qualitative research methodology was employed to bring forward the experiences and perceptions of survivors of violence, shelter workers, service providers and community members across Inuit Nunangat. To understand how experiences and determinants of violence may differ across Inuit regions and communities, the research engaged 10 communities in Inuit Nunangat and urban centres. The sites for data collection were: Inuvik and Yellowknife in the Northwest Territories; Cape Dorset, Clyde River and Iqaluit in Nunavut; Kuujjuaq in Nunavik; Nain in Nunatsiavut; Happy Valley-Goose Bay in Newfoundland and Labrador; Ottawa in Ontario; and, Montréal in Quebec. Semi-structured interviews and discussion circles were used to collect the data in a way that privileged the voices and lived experiences of participants. In total, the research engaged 164 participants made up of:

- 70 community members;
- 44 service providers;
- 13 shelter workers; and,
- 37 key informants.

Participants represented diverse backgrounds, including professionals from the health, criminal justice and social sectors. All qualitative data was thematically analyzed using NVivo software.

Main Findings

To improve understanding of the unique reality of experiencing violence in Inuit communities, the research aimed to identify the determinants of violence against Inuit women and girls. The study examined both the individual conditions in a woman's life related to experiencing violence and the broader social, economic, political and cultural determinants described by participants as contributing to violence against women and girls in their communities and regions. The data suggest that the primary determinants of violence across Inuit Nunangat include:

- disruption of Inuit culture and identity;
- normalization of violence;
- impacts of colonial government policy;
- challenges with the criminal justice system;
- increased alcohol and substance abuse;
- inadequate and overcrowded housing;
- economic inequality and income instability; and,
- food insecurity.

These factors are directly linked to historical and ongoing Inuit experiences of colonization in which policies, programs and legislation were introduced with the aim to control and assimilate Inuit communities by destroying cultural knowledge, social structure and leadership, practices and identities.

Second, to increase awareness of the impacts of violence and improve the effectiveness of emergency supports, the research aimed to explore current gaps in shelter services across Inuit Nunangat. The study investigated the perceptions of shelter workers, as well as community service providers and survivors of violence, to identify the challenges of addressing the needs of Inuit women and their children at risk of experiencing violence. The data demonstrate that the three main barriers for providing adequate and effectives shelter supports and services are:

- the lack of resources and funding available to maintain the operational costs of shelters;
- high staff turnover rates at shelters and other support services; and,
- the deficit of supports available to support women and their children when it is time to leave the respite of the shelter.

Third, to examine the cost of violence on the health care system, as well as the systemic cost more broadly, the research examined the economic impacts of violence against Inuit women and girls on provincial and territorial health, legal, policing and social services. The study findings suggest that the direct and indirect costs associated with gender-based violence across Inuit Nunangat include: medevac services; hospitalization and direct medical costs; long-term mental and physical health costs; economic costs of lost wages and productivity; and, policing and justice services. While adequate data is not available to calculate the current total economic cost of violence against women and girls in Inuit Nunangat, the data that is available suggest that this figure is likely to be in the hundreds of millions of dollars per year.

Finally, to inform the development and maintenance of services that respond to the needs of Inuit women and families experiencing violence, the research mapped existing community programs and actions that assist those at risk of becoming victims of violence across Inuit Nunangat. The study identified programs and services in each Inuit region that are accessed by Inuit women, and explored participants' perceptions of the specific elements that make these supports effective for the community members using them. The data suggest that the five program areas critical to supporting Inuit, families and communities in responding to and healing from the impacts of violence are:

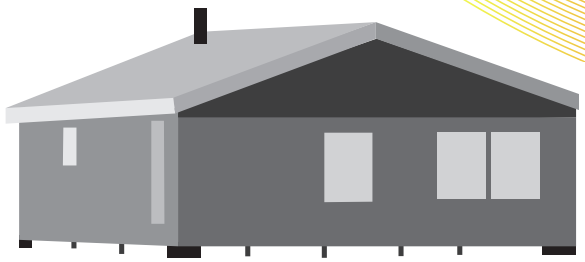
- awareness of violence as a community issue;
- land-based resurgence and on-the-land programming;
- youth centres;
- transition housing; and,
- access to country food.

Recommendations

In response to the research findings of this study on the determinants of violence in Inuit Nunangat and the current gaps in supports for Inuit women experiencing violence, 14 recommendations have been determined.

1. Develop violence intervention, prevention and healing strategies that are Inuit-specific, led by Inuit women, and respond to the unique cultural, political, economic, social and historical context of Inuit Nunangat.
2. Prioritize funding for the development of appropriate, safe and affordable housing across Inuit Nunangat at all levels of government.
3. Enhance the provision of Inuit-specific and Inuktitut services for survivors of violence and offenders to interact with and navigate the federal and provincial criminal justice systems.
4. Promote community-based collaboration between survivors of violence, police, service providers and community members to identify effective measures to ensure the safety and well-being of Inuit women and their children.
5. Provide adequate, sustainable and flexible funding in Inuit communities for emergency shelters serving Inuit women and children experiencing violence.
   a. The Government of Canada must reverse its policy that excludes Inuit communities from accessing operational funding for shelters through the Family Violence Prevention Plan (FVPP). Shelter funding must be made available to Inuit communities at a minimum equitable amount to that provided for shelters on First Nations reserves.
   b. Funding should support the operation and maintenance of existing shelters and the development of new shelters in consultation with communities.
   c. Eligible costs for shelter funding should include: general operations and maintenance; staff training, retention and professional development; and, programs and supports responsive to the needs of Inuit women.
6. Examine the feasibility and community readiness for transition and second-stage housing services in Inuit Nunangat in consultation with Inuit organizations, shelter directors, service providers, and survivors of violence.
7. Conduct a needs assessment to determine the gaps in culturally safe services for Inuit women experiencing violence in urban centres, including the need for Inuit-specific emergency shelters and transitional housing services.
8. Collect data on the use of medevac and emergency health services that is disaggregated by gender and cause to support increased understanding of the prevalence and cost of violence against women and girls in Inuit communities.
9. Undertake research to estimate the economic cost of violence against Inuit women and girls in Inuit Nunangat at the individual and systemic levels.
10. Prioritize upstream investments in prevention, intervention, postvention initiatives to both enhance the quality of Inuit women's lives and reduce the hard financial costs of the highest rates of violence in the country.

11. Develop and promote Inuit-specific public education and multimedia campaigns to increase awareness of gender-based violence among men, women and youth, including forms of violence, causes of violence, and available support resources.
12. Enhance funding for family-centered and community-based healing programs for victims of violence and perpetrators.
    a. Healing programs should integrate *Inuit Qaujimajatuqangit* and on-the-land activities and be available in the regionally appropriate dialect of Inuktitut.
13. Develop and enhance safe community spaces for Inuit youth and children that are accessible outside of normal working hours, such as youth centres.
14. Provide comprehensive and Inuit-specific cultural safety training for all *qallunaat* (non-Inuit) service providers in the health, justice and social sectors in Inuit Nunangat to improve the capacity of services and to address the needs of Inuit communities.



CHAPTER ONE
CONCEPTUALIZING THE RESEARCH

1.0 Project Scope

Across Inuit Nunangat, women and girls experiencing violence do not have access to reliable, consistent, Inuit-specific or sustainably-funded programs and services. Instead, the landscape of existing supports represents a variety of emergency measures, temporary programs and determined community members who are attempting to address the immediate needs of women experiencing violence within a chronically under-funded support system. Responding to gender-based violence requires the coordination of primary health, mental health and social work services, and policing and justice services yet within Inuit communities many of the positions in these fields are vacant, experience high turnover, and often filled by non-Inuit personnel. As women and girls in Inuit Nunangat experience the highest rates of violent crime in the country, the lack of strategic funding and sustainable services is a pressing issue with devastating consequences for the safety and health of Inuit families.

While the provinces and territories are responsible for housing and safe shelters for women, the Government of Canada provides two avenues of operational funding through the Family Violence Prevention Program.

1. Funding for the day-to-day operations of a network of shelters that provide services for women and children living on reserve in provinces and in the Yukon
2. Funding for annual or multi-year community-driven prevention projects such as public awareness campaigns, conferences, workshops, stress and anger management seminars, support groups, and community needs assessments on and off reserve (Government of Canada, 2018)

As Inuit communities are not reserves, shelters serving Inuit women in Inuit Nunangat cannot directly access this funding. Over the past three decades, Pauktuutit has worked closely with shelter directors in Inuit communities and in 2007 created the Inuit Women's Shelter Directors Association. The creation of this Inuit-specific organization was intended to: 1) help shelters in Inuit communities access additional funds to support their internal capacity; 2) provide resources and programs to meet the training needs of shelter workers in remote communities; and, 3) advocate for new shelters in more Inuit communities. Unfortunately, due to the broad and chronic lack of capacity of shelter directors, ongoing heavy day-to-day workloads and high staff turnover, it was not possible for the Board of Directors of the Association to sustain the corporation in addition to their existing priorities. The corporation was dissolved in 2015-2016 and the shelters across Inuit Nunangat were left without a coordinating and advocacy body. Pauktuutit has long advanced that, just as the government funds shelters on reserves, so must they fund shelters in Inuit communities.

1.1 Project Goal

The main goal of the Gender-based Violence and Shelter Service Needs across Inuit Nunangat project was to conduct a comprehensive research study on the current factors affecting gendered violence across the Inuit regions in general, as well as specifically against Inuit women and girls. The study identifies the reasons Inuit women access shelters to inform an assessment of shelter services and the socio-economic cost of gendered violence to the health care system and to Inuit communities. The study describes several of the barriers that prevent more effective action to address these specific issues and highlights the strengths of community-based responses. The project is sharing what is working best in responding to the needs of Inuit women experiencing violence, as well as identifies current gaps in meeting these needs. The recommendations emerging from the research have been distilled from surveys of service providers and shelter directors/workers, and in-depth conversations with women who have experienced violence, community members impacted by violence and key informants within the community.

1.2 Context

Violence against women and girls is a complex issue that is interconnected with many social, economic, cultural and political factors ranging from inadequate housing to low incomes to experiencing a higher incidence of homelessness. This relationship between gender, violence, poverty and access to adequate housing has been well documented in several Inuit-specific studies. For example, the temporary houses that were used to build permanent settlements across Inuit Nunangat roughly 70 years ago have long outlived their practical lifespan and basic infrastructure is severely lacking in a majority of communities. Nearly a decade ago, the report *The Little Voices of Nunavut: A Study of Women's Homelessness North of 60*, prepared for Qulliit Nunavut Status of Women Council, estimated that "Fifty-four percent of Inuit currently live in overcrowded conditions, and 38.7% of them are considered in core need" (Qulliit Nunavut Status of Women Council, 2007: 4). In fact, one of the main themes identified in this study is explained below:

> *"The vast majority of the women interviewed have been victims of violence or exposed to high levels of violence when moving from place to place. Several of the women became homeless when they made the decision to flee an abusive family member, most often their intimate partners. When asked what they believe is causing women's homelessness, the interviewees have been very forthcoming in noting violence as a serious problem requiring immediate intervention in the North," Qulliit Nunavut Status of Women Council (2007: 4).*

Similarly, the report *If Not Now...When? Addressing the Ongoing Inuit Housing Crisis in Canada* produced by Inuit Tuttarvingat of the National Aboriginal Health Organization (Knotsch & Kinnon, 2011) is consistent with these findings, reporting that 31% of Inuit lived in crowded housing, compared to three per cent of Canada's total population. This data reveals that from 2007 to 2011, social inequality was pervasive and inadequate housing was an issue directly linked to violence across Inuit Nunangat, even more so when compared to non-Inuit and other Canadian regions. Certainly, inadequate housing and access to affordable and safe living spaces is a pressing issue in Inuit Nunangat that is directly associated with gender and violence. According to Pauktuutit Inuit Women of Canada, (2018):

> *"The most recent Canadian statistics continue to show that Inuit Nunangat has some of the highest rates of family and gendered violence in the country. More than 70% of the 53[1] Inuit communities spread across four geographic regions of the Canadian Arctic do not have a safe shelter for women and children experiencing family violence. This can mean a woman may have to plead with local social service workers to be flown to another community to seek safety. There have been too many cases in the Arctic when the lack of access to safe alternatives has led to the loss of lives."*

Pauktuutit Inuit Women of Canada (2018) continues to explain that with very few safe shelters for women and girls, coupled with high occupancy rates and high levels of staff turnover, there can be nowhere for women to seek safety or respite when they experience violence. Given this limited availability of shelter services and the lack of adequate housing, it is also alarming that there exists "no second-stage housing in the Arctic, which can be crucial in a woman's efforts to re-establish a life without violence," (Pauktuutit Inuit Women of Canada, 2018). The recent National Inuit

1 Currently, there are 51 communities in Inuit Nunangat.

Submission on the Pre-Inquiry Phase of the National Inquiry into Missing and Murdered Indigenous Women and Girls by Inuit Tapiriit Kanatami and Tungasuvvingat Inuit (2016) links these ongoing issues to the continued impacts of colonial attitudes and policies imposed by the Crown on Inuit. Specifically, the report highlights the fact that "there is a strong belief among Inuit that Inuit women and girls are seen by Government agents and agencies as less valuable than non-Inuit women and girls. It is firmly believed that this indifference, which is rooted in prejudice and racism, the cornerstones of colonial attitudes, is resulting in public services failing Inuit women and girls." (2016: 5). As the impacts of violence against Inuit women and girls continue to devastate lives and families in Inuit communities throughout Canada, the issue can no longer remain in the background of public awareness and social policy consideration but requires specific and sustained attention from all levels of government.

1.3 Research Objectives

Pauktuutit Inuit Women of Canada, with support from Indigenous and Northern Affairs Canada, and in direct consultation with community members and Inuit specific organizations, engaged in a two-tiered 24-month community-based research titled Study of Gendered-based Violence and Shelter Service Needs across Inuit Nunangat. The primary research questions of this study are below.

1. To assess, inform and improve the shelter services in Inuit Nunangat by exploring the issues related to the incidence and impact of gendered violence, but especially against women and girls by:
   i. mapping the determinants of violence against Inuit women, including the relationship between violence and other determinants of well-being as identified in sociological and population health literature;
   ii. asking what are the conditions in a woman's life related to experiencing violence;
   iii. asking what are the social, economic, political and cultural factors in communities that contribute to violence against women; and
   iv. asking if there are specific determinants of violence among Inuit in Inuit Nunangat and does this vary by region and community.
2. Seek to understand the impacts of violence in direct relation to shelter needs which will inform and improve the services provided in Inuit Nunangat. Housing and shelter needs in Inuit Nunangat are in high demand and short supply and women's shelters that do exist are constantly forced to turn away women who are in need. The study explores:
   i. the quality of service provided by other organizations and agencies across Inuit Nunangat serving women in need;
   ii. public policy and territorial and regional program initiatives that are more effective at addressing shelter services and reducing the negative impacts of violence against women; and
   iii. the cost of violence to the health care system as it relates to the use of medevac services in the region.

3. Map the services/programs environment designed to reduce violence against women and to mitigate its harmful impact for women and their families across Inuit Nunangat.
   i. Which services/programs currently exist to assist women or those at risk of becoming victims of violence?
   ii. Which services/programs exist to assist communities to work on the determinants of violence such that fewer women are becoming victims of violence?
   iii. Which services/programs specifically target Inuit women?
   iv. What is the difference in shelter service level from remote communities to the larger settlements?
   v. What is working about these shelter services?
   vi. What is needed to make them better?
4. To influence the quality of service provided by other organizations and agencies across Inuit Nunangat serving women and those at risk of becoming victims of violence by:
   i. including them as active participants in the study; and
   ii. sharing the research results with study participants.

These are the outcomes sought from this study.

1. The informing of public policy and territorial and regional program initiatives such that they are more effective at reducing violence against women and understanding the cost of violence on the health care system by:
   a. including policy makers and program leaders as active participants in the study; and
   b. sharing the research results with policy makers and program leaders.
2. The stimulation of community action aimed at developing awareness of the issues related to violence against women and reduce the negative impacts of violence experienced among Inuit women by:
   a. broadly sharing the results of the study throughout Inuit Nunangat; and
   b. including the community determinants and impacts of violence, and shelter service needs among women as a focus of the study.

To address these research objectives and questions it was important that the project be community driven and uphold the values of Pauktuutit Inuit Women of Canada and the Inuit women that the organization serves.

The research team made efforts to uphold the Inuit-specific values of *Inuit Qaujimajatuqangit* (IQ) in each of the seven communities and three urban centres visited as case sites: Inuvik and Yellowknife in the Northwest Territories; Cape Dorset, Clyde River and Iqaluit in Nunavut; Kuujjuaq in Nunavik; Nain in Nunatsiavut; Happy Valley-Goose Bay in Newfoundland and Labrador; Ottawa in Ontario; and, Montréal in Quebec.

Source: Inuit Tapiriit Kanatami, 2019

1.4 Socio-Demographic Characteristics

By providing a demographic overview of a community it is possible to offer insight into the circumstances which influence overall states of well-being and factors that contribute to violence. While demographic data is a useful way to characterize a community, basic population data are included to create a more complete portrait of the communities that participated in the study. Recognizing that many Inuit now live outside of Inuit Nunangat, efforts were made to connect with Inuit women, service providers, key informants and shelter directors/workers in three major urban centres: Ottawa, Ontario; Yellowknife, Northwest Territories; and, Montréal, Quebec.

The Inuit community is young and growing quickly. Most of the Inuit population live in 51 communities spread across Inuit Nunangat but increasing numbers of Inuit are moving to live in larger urban centres. According to Statistics Canada, in 2011 over half (54%) of Inuit were younger than 25, compared with 30% of the non-Indigenous community (Statistics Canada, 2015). In addition, in 2011, 13.2% of the Inuit population in Inuit Nunangat was under the age of five, compared to 5.5% for non-Indigenous children. In fact, the Inuit community (62,205) grew by 29.1% from 2006-2016 and grew the fastest in Nunavik (+23.3%) and Nunavut (+22.5%) (Statistics Canada, 2017a). While 54% of the Indigenous population in Canada now live in urban areas, 67% of Inuit

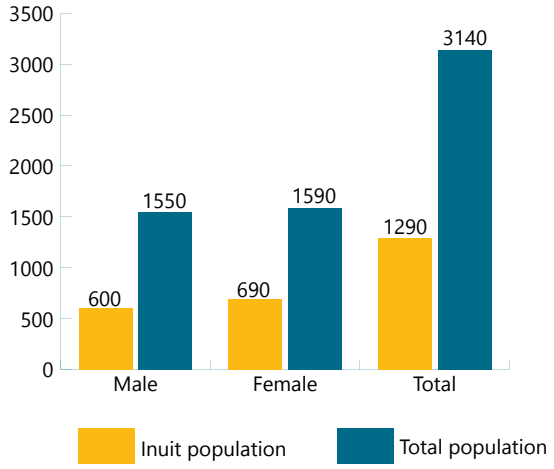
continue to live in remote communities (Smith et al., 2016a; Smith et al., 2016b). The 2016 Canadian Census reported 39,770 speakers of Inuktitut in Canada, of which 65% were in Nunavut and 30.8% were in Quebec (Statistics Canada, 2017b).

1.4.1 INUVIK, INUVIALUIT

Total population: 3,140
Total Inuit population: 1,290

Figure 1 displays the demographics of the Inuit community of Inuvik which is made up of 600 males and 690 females (total Inuit population is 1,290). The total population of Inuvik is 3,140 people whereby 1,550 are males and 1,590 are females (Statistics Canada, 2018b). Based on this data, 41% of the total population in Inuvik are Inuit. The two main Inuit languages spoken in Inuvik are Inuvialuktun and Inuktitut. 155 people – 12% of the Inuit population – reported having working knowledge of Inuvialuktun (Statistics Canada, 2018b). The median age of the population is 33.4 years and the average age is 32.2 years. The median age for Inuit is 26.6 years and the average age is 29.9 years (Statistics Canada, 2018b).

FIGURE 1: POPULATION OF INUVIK, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

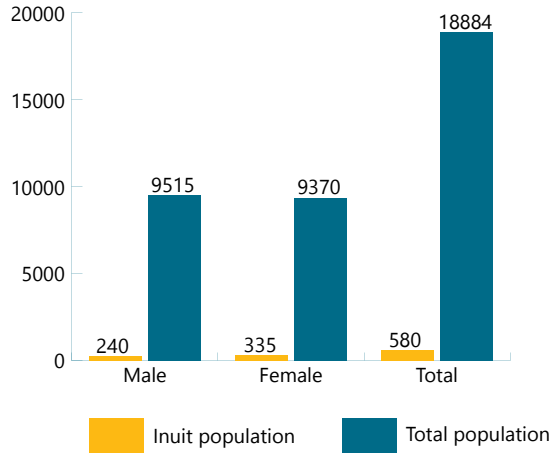


1.4.2 YELLOWKNIFE, NORTHWEST TERRITORIES

Total population: 18,884
Total Inuit population: 580

The 2016 census by Statistics Canada found that 22.7% of residents in Yellowknife identified as Indigenous and the data presented in Figure 2 displays the total Inuit community comprised of 580 people, of which 240 are males and 335 are females.* This compares to a total population size of 18,884 people, of which 9,515 are males and 9,370 are females (Statistics Canada, 2018c). The Inuit population of Yellowknife is about three per cent (3%) of the total population with the two main Inuit languages spoken being Inuinnaqtun and Inuktitut (Statistics Canada, 2018c). The median age of the population is 34.4 years and the average age is 34.6 years.

FIGURE 2: POPULATION OF YELLOWKNIFE, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)



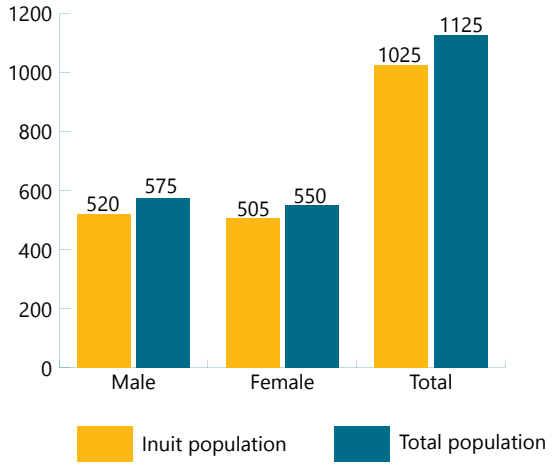
* Some of the Statistics Canada data has small discrepencies (the totals do not add up exactly).

1.4.3 NAIN, NUNATSIAVUT

Total population: 1,125
Total Inuit population: 1,025

Figure 3 displays the total number of Inuit residing in Nain, which represents 1,025 people distributed nearly evenly between males (520), and females (505) (Statistics Canada, 2018d). Nain is in the Nunatsiavut region and is 91.1% Inuit with the main Inuit language spoken being Inuktitut. Of the people residing in Nain, 390 individuals reported having knowledge of the Inuktitut language, representing 38% of the Inuit members of the community (Statistics Canada, 2018d). The median age of the population is 31.0 years and the average age is 33.3 years.

FIGURE 3: POPULATION OF NAIN, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

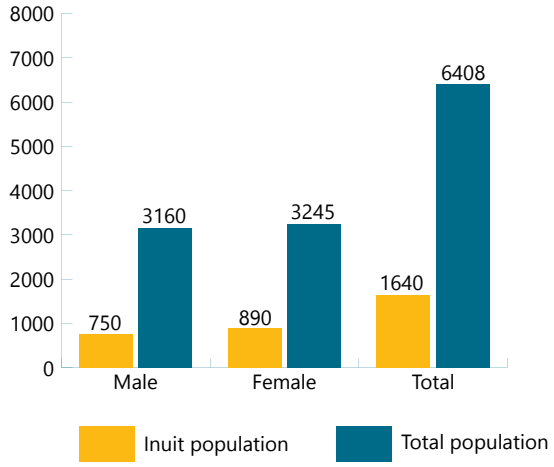


1.4.4 HAPPY VALLEY-GOOSE BAY, NEWFOUNDLAND AND LABRADOR

Total population: 6,408
Total Inuit population: 1,640

Figure 4 displays the total Inuit population of 1,640 individuals residing in Happy Valley-Goose Bay, which is comprised of 750 males and 890 females. The total population of this community is 6,408 people with 3,160 males and 3,245 females (Statistics Canada, 2018e). This makes the Inuit population of Happy Valley-Goose Bay 25.59% of the total. Reported use of Inuktitut is low (4.5%) – only 75 individuals reported having knowledge of Inuktitut (Statistics Canada, 2018e).

FIGURE 4: POPULATION OF HAPPY VALLEY GOOSE-BAY, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

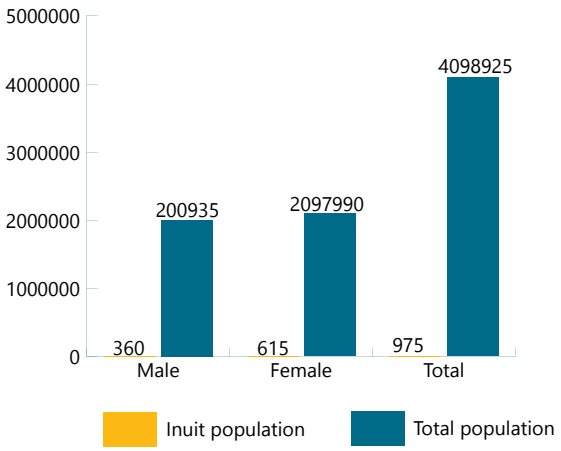


1.4.5 MONTREAL, QUEBEC

Total population: 4,098,925
Total Inuit population: 975 (note: likely represents significant undercounting)

Figure 5 displays the total Inuit population of 975 people estimated by Statistics Canada to reside in the census Metropolitan Area of Montreal, comprised of 360 males and 615 females. The total population of Montreal is 4,098,925 people, consisting of 2,000,935 males and 2,097,990 females (Statistics Canada, 2018f). As a result, the portion of population that is Inuit was very low (0.00023%). However, estimates by Inuit organizations suggest that there is significant underreporting and undercounting of Inuit. Overall, of the 975 people who identified as Inuit in the 2016 census, 450 individuals reported having knowledge of Inuktitut (Statistics Canada, 2018f) – which means that nearly 46% of Inuit living in Montreal can speak an Inuit language. The median age of the population is 40.3 years and the average age is 40.6 years.

FIGURE 5: POPULATION OF MONTRÉAL, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

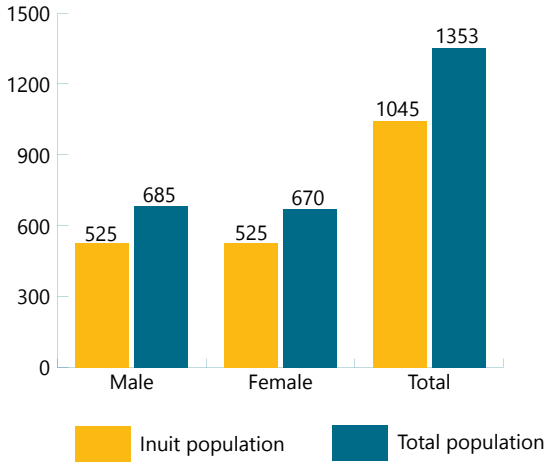


1.4.6 KUUJJUAQ, NUNAVIK

Total population: 1,353
Total Inuit population: 1,045

Figure 6 displays the total Inuit population of 1,045 people residing in Kuujjuaq (Statistics Canada, 2018g) which is comprised of 525 males and 525 females.* The total population in Kuujjuaq is 1,353 of which 685 are males and 670 are females. The population of Kuujjuaq is 77.2% Inuit and the main Inuit language spoken in Kuujjuaq is Inuktitut. Of the Inuit living in Kuujjuaq, 92.7% (1,050) reported having knowledge of the Inuktitut language (Statistics Canada, 2018g). The median age of the population is 27.8 years and the average age is 30.4 years.

FIGURE 6: POPULATION OF KUUJJUAQ, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

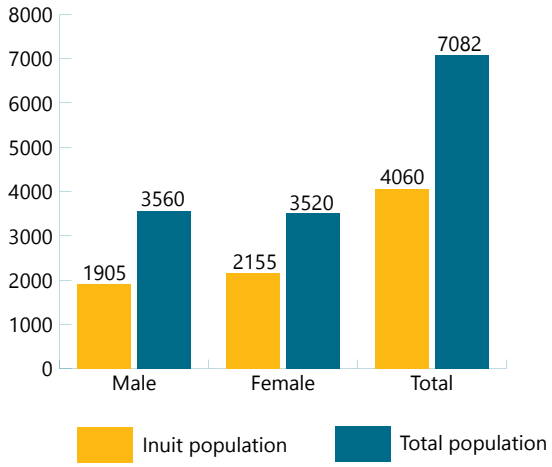


1.4.7 IQALUIT, NUNAVUT

Total population: 7,082*
Total Inuit population: 4,060

Figure 7 displays the total Inuit population of 4,060 residing in Iqaluit which is comprised of 1,905 males and 2,155 females. The total population is 7,082, which is comprised of 3,560 males and 3,520 females (Statistics Canada, 2018h). The population of Iqaluit is 57.3% Inuit and the main Inuit language spoken is Inuktitut. Of Inuit living in Iqaluit, 3,685 individuals reported having knowledge of the Inuktitut language, representing 90.7% of the total Inuit population (Statistics Canada, 2018h). The median age of the Inuit population is 30.9 (Statistics Canada, 2016). The overall average age of the population of 31.2 and the median age is 30.9.

FIGURE 7: POPULATION OF IQALUIT, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

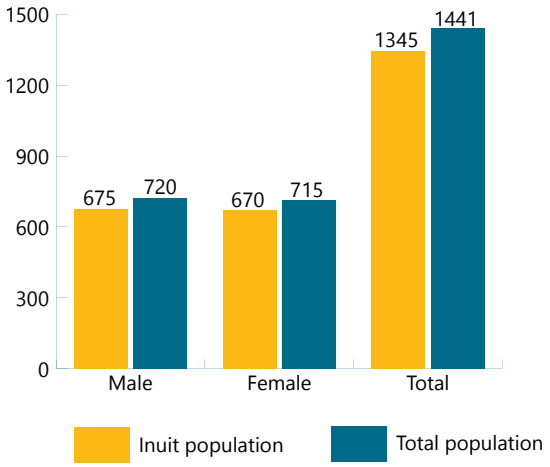


1.4.8 CAPE DORSET, NUNAVUT

Total population: 1,441*
Total Inuit population: 1,345

Figure 8 displays the Inuit population residing in Cape Dorset – 675 males and 670 females for a total Inuit population of 1,345. The total reported population of Cape Dorset is 1,441 of whom 720 are males and 715 are females (Statistics Canada, 2018i). The population of Cape Dorset is 93.4% Inuit. There is knowledge of one main Inuit language in Cape Dorset – Inuktitut. In Cape Dorset, nearly 1,360 people reported knowledge and use of Inuktitut (Statistics Canada, 2018i). In 2016, the average age of the population was 26.6 and the median age of the population was 23.3.

FIGURE 8: POPULATION OF CAPE DORSET, 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)

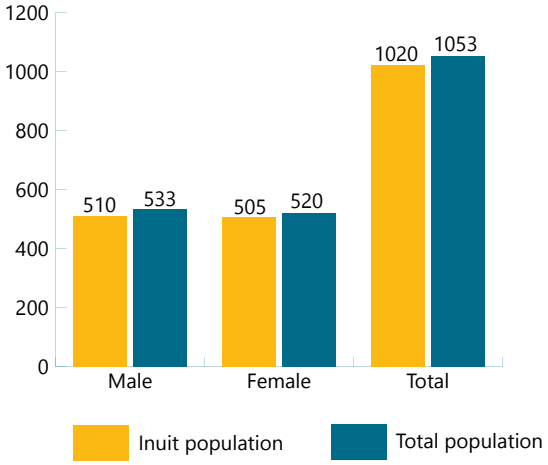


1.4.9 CLYDE RIVER, NUNAVUT

Total population: 1,053
Total Inuit population: 1,020*

Figure 9 displays the Inuit population residing in Clyde River of approximately 1,020 people, of which 510 are males and 505 are females (Statistics Canada, 2018j). As the total population of Clyde River is 1,053, Inuit represent 96.83% of the population. There is knowledge of one main Inuit language in Clyde River – Inuktitut. Of the people living in this community, 1,030 individuals reported having knowledge of the Inuktitut language, representing 97.8% of the population (Statistics Canada, 2018j). The average age of the population was 25.6 and the median age of the population was 22.0.

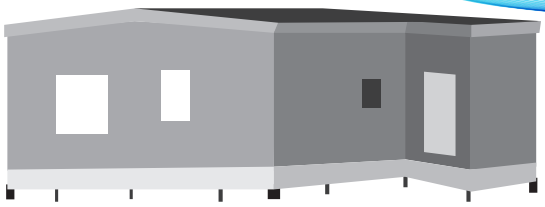
FIGURE 9: POPULATION OF CLYDE RIVER 2016 CENSUS PROFILE (STATISTICS CANADA, 2018)



1.5 Concluding Remarks

It is well-known that there is a housing shortage crisis in Inuit Nunangat. In 2016, 8.5% of people in Canada lived in crowded conditions. Inuit living in Inuit Nunangat had the highest rate in Canada at 51.7% – six times higher than the average (Statistics Canada, 2017c). In its Strategy and Action Plan, Inuit Tapiriit Kanatami (2015) stated that "in spite of significant efforts to improve our socio-economic conditions, substantial work remains to address underlying conditions that impact Inuit health outcomes" (6). Also, according to Inuit Tapiriit Kanatami, "Anecdotal evidence suggests that scarce employment opportunities in Inuit communities contribute to feelings of low self-esteem, listlessness, violence and suicide," (2014:18).

Inuit women face health and wellness issues in Inuit communities that are extremely challenging. Healy, et al. (2007) provided an overview of Inuit women's health in Nunavut and found that the quality of early childhood, acculturation, income and housing, education, food security and access to health services are all interconnected factors that impact well-being. The demographic profiles presented in this chapter provide context for the socio-economic determinants of living conditions in Inuit communities and demonstrate the social and health inequalities experienced by Inuit in the regions and communities that were part of this study. The relationship between these socio-economic determinants and violence in relation to individual and community well-being will be discussed in subsequent chapters.



CHAPTER TWO
RESEARCH METHODOLOGY

2.0 National Inuit Strategy on Research

The National Inuit Strategy on Research (NISR) (Inuit Tapiriit Kanatami, 2018a) "outlines the coordinated actions required to improve the way Inuit Nunangat research is governed, resourced, conducted, and shared. This strategy builds upon the important strides taken by Inuit towards self-determination in research by offering solutions to challenges our people have grappled with for decades" (Inuit Tapiriit Kanatami, 2018:3). The methodological approach applied in this study implements current best practices in social science research methods in a rigorous and ethical manner. These approaches are in line with the NISR and community protocols and aim to ensure that the knowledge generated through the research is relevant, valid, reliable and of value to Inuit, key partners and Pauktuutit. The research process was highly participatory in nature and involved consultation with multiple stakeholders as well as seeking input from survivors of violence across Inuit Nunangat. Specifically, the research approach employed a decolonized community-based participatory action research framework using responsive research (Quinless et al., 2018; Corntassel, 2008; Corntassel, 2012). The process centered Inuit values and ways of knowing (IQ) throughout all phases of the research design, data collection and analysis, and the understanding of community ethical protocols has been prioritized as a key part of building on *Inuit Qaujimajatuqangit*.[1]

2.1 Participant Involvement

One of the main research objectives of this study was to influence the quality of service provided by the organizations and agencies across Inuit Nunangat serving women and children at risk of

1 Our research team is knowledgeable about, committed to, and regularly employ research methods and decolonizing practices to ensure high quality research processes and outcomes. For example, understanding trauma and the ways in which extractive research processes enhance trauma is an ethical requirement of doing research work with Indigenous peoples and was applied in the work carried out with the Inuit communities that were part of this study.

experiencing violence. To do so, the research included women with lived experience of violence as active participants in the study and shared the results back with communities. Based on the sensitive nature of the topic, a qualitative snowball sampling approach was used to invite participants to be part of the research study. Snowball sampling is a method of participant recruitment in which researchers initiate contact with a small group of people relevant to the topic of study and these contacts are then used to identify further participants (Bryman, 2001). The contact information for the first participant was obtained by the research team and this individual then provided a recommendation for the next interview based on two criteria: 1) the individual would be considered knowledgeable on the topic; and, 2) the individual was working or has worked in one of the services/program areas related to violence and abuse prevention and awareness.

All study participants were asked to sign a written informed consent form prior to being interviewed. Semi-structured interviews were used as the primary means of data collection with service providers and key informants and took place through both telephone and face-to-face interviews. Ten discussion circles were also conducted with community members who have directly or indirectly experienced violence. Each interview was audio-recorded, and all materials were carefully transcribed and analyzed for themes and sub-themes[2] using the qualitative software NVivo. Table 1 outlines all sources of data collected for the study through the various mixed methods approaches.

TABLE 1: DATA COLLECTION METHOD BY RESPONSE RATE, QRG 2018

Data Collection Method	No. of Participants
10 discussion circles with community members who have experienced violence – almost all women and ranging in age from youth to elders	70
Key informant interviews	44
Service provider interviews	37
Interviews with shelters directors/workers	13
Total	**164**

The 164 individuals who participated in the study had varied backgrounds. Key informants and service providers were employed in the following occupational sectors:

- government (Executive Director/managers/policy analysts);
- criminal justice workers;
- community health nurses;
- victim service workers;

2 Field notes (memos) were also made available at the end of each interview. At the end of transcription, each informant was emailed their interview transcripts and asked to review the transcript for misinterpretations and ensure that an accurate representation of their whole case is presented. Each participant then received a follow up telephone call to discuss and verify the concepts that emerged.

- social workers, outreach workers and caseworkers;
- program and service providers;
- youth workers; and
- RCMP.

The data presented in the following Table 2 provides a breakdown of the different methods used with the participants by each study location and date.

TABLE 2: SUMMARY OF THE DATA COLLECTION METHODS FOR EACH REGION, QRG 2018

Issues Scoping	Location	Date	# of participants
Meeting with Pauktuutit	Pauktuutit Inuit Women of Canada (Ottawa)	October 18, 2017	3
Research methods and data collection meeting with Pauktuutit – approval of research tools	Pauktuutit Inuit Women of Canada (Ottawa)	December 3, 2017	5

Issues Scoping	Location	Date	# of participants
Inuvialuit Region (Inuvik & Tuktoyaktuk); Yellowknife, Northwest Territories			
Discussion circle #1	Mackenzie Hotel (Inuvik)	November 14, 2017	1
Discussion circle #2	Mackenzie Hotel (Inuvik)	November 15, 2017	2
Key informant interviews	Inuvialuit Regional Corporation (Inuvik)	November 14-16, 2017	2
Service and program provider's surveys	Inuvialuit Regional Corporation, Victim Services (Inuvik)	November 14-16, 2017	8
Shelter worker interviews	Inuvik Transition House Society (Inuvik); shelter (Tuktoyaktuk)	March 16, 2018 April 10, 2018	2
		Total	**15**

Issues Scoping	Location	Date	# of participants
Nunatsiavut (Nain); Newfoundland and Labrador (Happy Valley-Goose Bay)			
Discussion circle #3	Department of Social Development; Labrador Friendship Centre (Happy Valley-Goose Bay)	February 14, 2018	2
Discussion circle #4		February 16, 2018	3
Key informant interviews	Youth Center (Nain); Department of Health, Food and Social Development; men's correctional facility; Labrador Friendship Centre (Happy Valley-Goose Bay)	February 14, 2018	10
Service and program provider's surveys	Youth emergency shelter; Department of Health, Food and Social Development; men's correctional facility; Labrador Friendship Centre (Happy Valley-Goose Bay)	February 14-16, 2018	14
Shelter interviews	Nain	February 14, 2018	1
	Selma Onalik Safe House (Hopedale)	March 3, 2018	1
	Shelter (Goose Bay)	March 19, 2018	1
	Kirkina House (Rigolet)	April 10, 2018	1
		Total	**33**
Nunavik (Kuujjuaq); Montréal, Quebec			
Discussion circle #5	Church of The Epiphany Verdun (Montreal)	April 3, 2018	12
Discussion circle #6	Makivik Corporation, Inuit Values and Practices Department (Kuujjuaq)	April 5, 2018	4
Key informant interviews	Nunavik Regional Board of Health and Social Services (Kuujjuaq)	April 5, 2018	4
	Community members	April 6, 2018	2

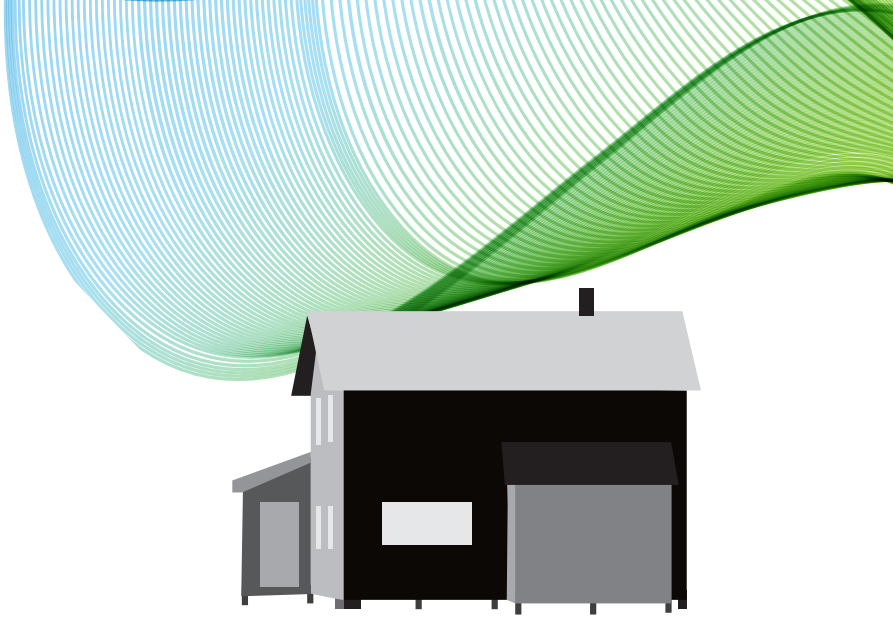
Issues Scoping	Location	Date	# of participants
Service and program provider's surveys	Chez Doris (drop-in and day shelter) (Montreal)	April 3, 2018	4
	Nunavik Regional Board of Health and Social Services (Kuujjuaq)	April 5, 2018	4
	Business managers and community employment providers	April 6, 2018	2
Shelter interviews	Tungasuvvik Women's Shelter (Kuujjuaq)	March 14, 2018	1
	Initsiaq Inuit Women's Shelter (Salluit)	April 5, 2018	1
	Ajapirvik Women's Shelter (Inukjuaq)	March 22, 2018	1
		Total	**35**
Nunavut (Iqaluit, Cape Dorset, Clyde River); Ontario, (Ottawa)			
Discussion circle #7	St. Margaret's Church (Ottawa)	February 29, 2018	4
Discussion circle #8	Elders sewing centre	May 28, 2018	18
Discussion circle #9	Elder's Qammaq (drop-in centre) (Iqaluit)	May 31, 2018	6
Discussion circle #10	Ilsaqsivik Society (Clyde River)	August 27, 2018	18
Key informant interviews	RCMP; Ilisaqsivik Society; Quluaq School; Health Centre; Government of Nunavut; Qaujigiartiit Health Research Centre (Iqaluit)	May 28 to August 27, 2018	18
Service and program provider's surveys	Recreation Centre, Health Centre, Peter Pitseolak High School, Arctic Children and Youth Foundation, Embrace Life Council, Makkutkutuvik, Nunavummi Disabilities Makinnasuaqtiit (Iqaluit)	May 28 to August 27, 2018	12

Issues Scoping	Location	Date	# of participants
Shelter interviews	Women's crisis centre (Kugaaruk	March 28, 2018	1
	Women's crisis centre (Kugluktuk)	April 2, 2018	1
	Kataujaq Society Safe Shelter (Rankin Inlet)	April 5, 2018	1
	Shelter (Cambridge Bay)	April 11, 2018	1
Key informant interviews	Tungasuvvingat Inuit (Ottawa)	February 29, 2018	1
		Total	**81**
		Total study participants	**164**[3]

2.2 Concluding Remarks

Overall, 37 in-depth interviews (n=37) were conducted across the four Inuit regions and three urban centres with Inuit women, service providers, and shelter directors and workers. Employing snowball sampling methods, participants were recruited from seven communities in Inuit Nunangat – Inuvik, Nain, Happy Valley-Goose Bay, Kuujjuaq, Iqaluit, Cape Dorset and Clyde River – as well as the urban centres of Yellowknife, Montreal and Ottawa. Ten discussion circles were conducted which varied in size of participant turnout, ranging from one to 18 participants, with the largest groups in Cape Dorset and Clyde River. In total, 70 people (n=70) attended the discussion circles of whom 95% of participants were women. In some circles, men also joined the discussion and offered valuable insights by sharing their own stories of experiencing and perpetrating violence, seeking to create healthy non-violent relationships and supporting those around them. Structured interviews were also conducted with the aid of a questionnaire (see Appendix A) with 44 service providers (n=44) and 13 interviews with shelter directors/assistant directors/workers (n=13). Overall, a total number of 164 people participated in this study. The research team was honoured that so many people chose to participate given the relatively short research timeline of October 2017 to August 2018 (10 months). The demonstrated will to participate is suggestive of the priority that communities are placing on addressing the issue of gendered violence and access to safe living spaces for women and children.

3 Meetings between the researchers and Pauktuutit on October 18 and December 3, 2018 are not included in this total.



CHAPTER THREE
THE DETERMINANTS OF VIOLENCE

The first objective of this study was to explore the issues related to the incidence and impact of violence against Inuit women and girls to assess, inform and improve shelter services across Inuit Nunangat. To do so, this chapter aims to map the determinants of violence against Inuit women and girls, with attention to the relationship between violence and other determinants of well-being. The analysis provided in this chapter comes from data collected through discussion circles and in-depth interviews with the study participants. Based on conversations with both key informants and women who have experienced violence, this chapter presents the unique lived reality of experiencing violence in Inuit communities and discusses the factors that appear to maintain and reinforce gender-based violence. This chapter examines the individual conditions in a woman's life related to experiencing violence, and the broader social, economic, political and cultural determinants described by participants as contributing to violence against Inuit women and girls.

Sections 3.2 - 3.5 outline the cultural, political, social and economic determinants of violence as described by the participants of the study. The data is presented as a synthesis of findings from interviews and discussion circle transcripts that were coded and analyzed using NVivo qualitative software and the voices of Inuit women are shared throughout.

3.0 Context: Violence in Inuit Nunangat

The four regions of Inuit Nunangat experience the highest rates of violence in Canada. According to the report "Police-reported Crime in Inuit Nunangat" by the Canadian Centre for Justice Statistics, during the period of 2006-2008 "police services reported nearly 45,000 criminal incidents in Inuit Nunangat" (Charron et al., 2010: 6) of which more than 10,000 incidents were violent crimes. Compared to the rest of Canada, this report demonstrated that in Inuit Nunangat "the overall crime rate is six times higher" (Charron et al., 2010: 6) while violent crime rates are nine times higher and rates of sexual assault and common assault are both 12 times higher. More recent data from Statistics Canada (2018) shows that high rates of crime and violence across Inuit Nunangat remain

a pressing issue. For example, in Nunavut, the most populous of the Inuit regions, the crime rate increased by two per cent over the period of 2016-17, while the rate of violent crime remained the highest in the country at more than seven times the national rate (Statistics Canada, 2018). This means that women and girls are far more likely to be killed in Nunavut than in any other jurisdiction in Canada (Canadian Femicide Observatory for Justice and Accountability, 2018:7).

Overall, the breakdown of police-reported crime in Nunavut in 2016 demonstrated a tendency towards serious and violent crime with victims of assault comprising more than three quarters (77%) of all police-reported victims, while victims of sexual offences and victims of other violence offences accounted for 9 per cent and 13 per cent respectively (Statistics Canada, 2018). Although the statistical incidence of crime and violence is alarmingly high, anecdotal evidence around underreporting of crimes suggests that the real prevalence of violence experienced across Inuit Nunangat is likely much higher than reported (Government of Nunavut, 2015; Scrim, 2017).

For Inuit women and girls, these statistics represent the painful lived reality of those experiencing violence and abuse in their homes and communities. Inuit women experience violence, particularly intimate partner violence, at a rate that is higher than that experienced by any other group of women in Canada. In Nunavut, women and girls represented nearly two-thirds of police-reported crime victims and 95% of sexual offence victims in 2016. Similarly, the 2004 Nunavik Inuit Health Survey entitled "Qanuippitaa? How are we?" illuminated the significant burden of gendered sexual violence in Nunavik. The results of the survey demonstrated that "In terms of abuse before the age of 18, 49.0% of adult women report having being forced or having attempts made to force them to perform a sexual act" and "27.4% of adult women report having being forced or having attempts made to force them into sexual activity as adults" (Nunavik Regional Board of Health and Social Services, 2004: 6). Given its prevalence, gender-based violence and its resulting trauma across Inuit Nunangat plays a strong role in shaping the lives of Inuit women, including their health, identity, social relationships and access to economic opportunities. A recent research report by Pauktuutit titled *Understanding the Needs of Urban Inuit Women* (2017) suggested that violence is a primary factor influencing the relocation of Inuit women to urban centres, particularly outside Inuit Nunangat. The research findings demonstrated that experiences among the participating Inuit women "are rooted in similar intergenerational and personal traumas" and "The lack of adequate services within northern communities often came up as the reason women had to stay in urban centres" (Pauktuutit, 2017:17).

Despite the alarmingly high levels of gender-based violence, little research has explored how this violence is directly and indirectly experienced by Inuit women and girls or what factors are contributing to and reinforcing this violence in Inuit communities. While nationally, a wide range of initiatives has been planned and implemented to address gender-based violence, there are "many knowledge gaps with regards to primary prevention and key interventions that require more research" (Status of Women Canada, 2018). One critical knowledge gap exists around the needs of Inuit women and girls experiencing violence and their access to services for violence prevention – shelter and healing. Given the unique intersection of geography, history, culture and experiences

of colonization in Inuit communities, violence prevention and health promotion strategies must be grounded in the lived experiences of Inuit women to effectively respond to and address the increasing rates of family and gender-based violence across Inuit Nunangat.

3.1 Inuit Women's Experiences of Violence

To explore and understand Inuit women's experiences of violence, research participants in community discussion circles were asked, 'Do you think violence is increasing, and if so how?' According to participants' perceptions outlined in Table 3, including Inuit and non-Inuit views and experiences, violence was described as increasing in multiple ways. These findings suggest that violence in Inuit communities takes many forms and that these different forms are both interrelated and increasing. In general, the data suggests that violence is pervasive in family, community and online life and affects Inuit women, elders and children, as well as animals and health and social service providers.

TABLE 3: THE INCREASE OF DIFFERENT FORMS OF VIOLENCE IN INUIT NUNANGAT

Circle Discussion Participants' Views of the Increase in Violence
▪ Violence towards health workers is increasing.
▪ Domestic violence rates appear to remain steady.
▪ Elder abuse is increasing primarily through financial, verbal and emotional abuse.
▪ Psychological and emotional abuse in relationships is more common.
▪ Physical violence remains the same and there are more occurrences of abuse of animals.
▪ Violence is covert and is happening more online and on Facebook and Instagram. Cyber bulling happens a lot more.
▪ Vandalism happens a lot.
▪ Verbal violence increases with racist, derogatory, and aggressive comments towards women.
▪ There is more verbal violence coming from children towards health workers and service providers (there is more aggression towards non-Inuit service providers).
▪ Suicidal ideation is alarmingly high and is increasing with youth.
▪ Lateral violence is common in the community with gossip and bullying through shaming and blaming and putting people down.
▪ There has been an increase of reporting of child sexual abuse.
▪ Familial violence between siblings is more common. Also, there are more incidences of children being violent to a parent or elder and towards service providers like nurses and counsellors.

While violence is a major health issue as well as a pervasive social and economic issue across Inuit Nunangat, it is important to understand that there are many different forms of violence which invariably differ across and between each region and community. Based on the emerging themes from discussion circles with participants, the research findings demonstrate that many important

determinants of violence are similar across the four Inuit regions. Table 4 provides a high-level overview of the commonalities of violence across these regions.

TABLE 4: SIMILAR FORMS OF VIOLENCE BY REGION

Commonalities of violence
▪ Disruption of culture
▪ Displacement and forced relocation/settlement
▪ Inadequate housing and overcrowding
▪ Unhealed trauma from residential schools
▪ Increased alcohol and substance abuse
▪ Food insecurity

These determinants are directly linked to Inuit experiences with colonization across Inuit Nunangat and the ongoing impacts of colonial structures and policies. Yet, the ways in which these determinants are expressed as priorities across the regions appears to vary, as specific determinants play more or less significant roles in each community and region.

3.2 Cultural Determinants of Violence

Research participants identified important determinants that sustain the high rates of violence experienced by Inuit women and girls across Inuit Nunangat. These determinants reflect the ways in which healthy and strong Inuit cultural identities have been disrupted by government policies and legislation, as well as changing lifestyles with serious negative impacts for self-esteem, cultural pride, sense of belonging and the transmission of Inuit knowledge. The primary cultural determinants of violence to emerge from the discussions with participants were the disruption of Inuit culture and identity, the normalization of violence, the impact of social media and cyber-bullying and the changing physical landscape.

3.2.1 DISRUPTION OF CULTURE AND IDENTITY

For Inuit communities, traditional Inuit ways of living sustained strong and healthy cultures and identities for thousands of years prior to colonization. These Inuit ways of life encompassed all knowledge, practices, relationships, norms and values required to thrive in the harsh Arctic environment and were intimately tied to the places where Inuit families lived and harvested. Culture was inseparable from Inuit food, economic, political and spiritual systems, and was transmitted intergenerationally from elders to youth through Inuktitut and through teaching and learning. Through the process of colonization, the Government of Canada and churches implemented programs, policies and legislation that aimed to control and assimilate Inuit by destroying their culture and ways of life. For example, the forced relocation and permanent settlement of Inuit families by the federal government physically disconnected Inuit from their traditional ways of

living on the land and the places in which their cultural knowledge and practices were grounded. This environmental dispossession was reinforced by policies such as the slaughter of sled dogs, the 'Eskimo tag' identification system and the high Arctic and other forced relocations. Similarly, the imposition of Christianity and the residential school system targeted the transmission of cultural identity by seeking to eliminate Inuit spirituality, language, health practices and knowledge. Western systems of governance, justice, health and the wage economy were imposed on Inuit communities and positioned as superior to traditional Inuit ways of being.

Participants described how the disruption of Inuit culture and identity acts as an ongoing determinant of violence in Inuit communities. As one participant explained,

> *"[our] lifestyle has changed, living off of the land, with clear roles and responsibilities of each member of your family, to an imposed system. There's fear and anxiety and stress built up among the family members. There's [a] lack of clarity and how to provide and [also] access the supports you would have normally have provided in your traditional role," participant, Iqaluit.*

As the quote demonstrates, the impacts of colonial and assimilationist policies remain present across Inuit Nunangat as communities continue to struggle to address changing lifestyles and to reclaim cultural identity. The forced transition to permanent settlement has disrupted traditional cultural roles and responsibilities, social supports and ways of living, thereby causing fear, anxiety and stress in Inuit families. Another participant explained how western values and norms continue to be imposed on Inuit communities with negative consequences for the protection and revitalization of Inuit culture.

> *"The limitations to live traditional lives and also individuals who are moving into the communities with absolutely no respect for the tradition, and values, and interfering with daily life [which] makes it impossible for Inuit to continue their traditions. In Iqaluit there was a dogsled team, and they took away the puppies. Because visitors believe that puppies shouldn't be outside. And so, this specific trainer is setback years, because six of her dogs were taken. And it was confirmed that, I think one or two of them were sent down south, because they have an agreement, and if the dogs aren't taken care of, they send them down south to shelters. Um, so there was already the killing of the dogs," participant, Montreal.*

In referencing the experience of the sled dog slaughter, this participant is comparing the impact of current practices and realities in Inuit communities to the ongoing effects of colonization.

Participants further described how many Inuit lack the coping skills to deal with these strong negative feelings due to intergenerational trauma resulting from the residential school system, as well as its effects on parenting and social skills. In particular, participants discussed that one of the primary causes of violence is related to the lack of appropriate coping skills to channel natural outbursts of frustration or anger, which instead often results in alcohol and substance abuse. This is best illustrated by one of the participants when she explained that,

> *"Alcohol is the main thing I would say. But, even if they're not drinking, there's bad relationships with the younger generation. Some can become violent. Like, the other lady was saying last night, she's seeing that even at the stores. Us elders have experienced that in the community, not in our house, but couples arguing publicly, shouting at each other. Calling names and all that. And it's really sad to see," participant, Cape Dorset.*

There was consensus among participants that the lack of coping skills for anger and frustration leads to a disconnection from one's sense of self and Inuit cultural ways of conflict resolution. This creates a cycle of anger which, when compounded with drug and alcohol abuse, often results in increased levels of violence.

Overall, participants' descriptions of violence demonstrate the link between the disruption of culture and identity, self-esteem and sense of belonging, mental health and coping, and interpersonal violence. These findings are consistent with the broader academic literature around Inuit and Indigenous health in Canada, and the ways that disconnection from cultural identity and practices continues to manifest in violence and other negative impacts on well-being (Adelson, 2005; Richmond and Ross, 2009; Kral et al., 2011). Further, the Truth and Reconciliation Commission of Canada (TRC) described this intentional disruption of indigenous cultures and identities in Canada as a process of cultural genocide by "States that engage in cultural genocide set out to destroy the political and social institutions of the targeted group. Land is seized, and populations are forcibly transferred, and their movement is restricted," such that "[...] families are disrupted to prevent the transmission of cultural values and identity from one generation to the next," (Truth and Reconciliation Commission of Canada, 2015:1).

3.2.2 NORMALIZATION OF VIOLENCE

The intergenerational trauma resulting from the residential school experience, as well as the broader disruption of Inuit culture and identity have contributed to the normalization of violence in many Inuit communities. Specifically, participants explained how recent increases in youth violence were directly connected to witnessing parents' and family members' perpetration of violence on many levels: emotionally, sexually, physically, financially. As one participant described,

> *"I grew up with my mother being battered and beaten. And, watching that, as a little girl two, three years old growing up, when I grew up, I thought it was okay for me. Until people started telling me that it's not. I grew up with my grandparents. And they had the same situation. The only difference was that they stayed together," participant, Iqaluit.*

The high rate at which children and youth are witnessing or experiencing violence in the home is contributing to the normalization of family and intimate partner violence in many Inuit communities. Participants expressed how the normalization of violence is being transmitted intergenerationally and reinforced through social expectations that position it as a private issue. For example, a discussion circle participant explained,

> *"When I was still living in Cape Dorset, I had new bruises on top of old ones, and nobody was doing anything about it. Because that's how much the community is closed. No communication," participant, Iqaluit.*

Other participants described their parents' generation to be "not open minded about violence in [their] community or in [their] home," and to expect domestic violence to be addressed privately in the home and among family. As stated by another participant,

> *"With some families, I think they have violence in their family but they are reluctant to ask for help, because they see it as a very personal issue. And they don't want authorities involved. So, I think there's two fears…one from the abuser, and one from authorities," participant, Nain.*

In response, participants described deep concerns that if youth are not provided with the necessary tools to develop healthy relationships, address conflict in healthy ways, and to recognize and alleviate violence, then the cycle may continue into future generations. One participant expressed fear that the intergenerational trauma of experiencing and perpetrating violence was worsening through the generations.

> *"As someone who has worked frontline for a very long time with the people on the receiving end, I look at it as a correlation between trauma. And as years come on, sometimes the violence intensifies with generations of kin. I know within my own family situation the victimization of my family member escalated greatly as the years went on. It's very broad," participant, Happy Valley-Goose Bay.*

As a result, many participants described distress around how the normalization of violence may impact her own children,

> *"You know, I got babies. I got a two-year old and a one-year old. What if my son becomes the abuser and my daughter the victim?"*

Another participant spoke about her individual efforts to curb violence by talking to her young son.

> *"I have a seven-year-old son. And I'm so afraid that one day, he's gonna start hitting. He may be seven, but I talk to him all the time about violence. That violence is not right. That violence is wrong. I... I'm... I'm gonna continue to talk to him about violence until he no longer lives with me. It's... it's wrong. Because I believe that's the role of a mother, to discourage violence in their home and in their own... own community. That's what I believe," participant, Cape Dorset.*

In the community of Nain, Nunatsiavut, a community youth centre was established to mitigate some of these effects and serve as a safe place for youth to seek respite from 8:00 p.m. to 8:00 a.m. The center is a proactive way in which the community is countering the intergenerational transmission of violence and trauma by supporting youth to escape witnessing or experiencing family violence. Participants at the youth centre discussed the relationship between youth violence and the lack of strong role models or people able to exhibit healthy relationships in the community. The normalization of violence extends far beyond the home to affect broader social relationships within communities, as a participant in Nain described,

> *"[I] used to be bullied in school. [Interviewer: Where does violence come from?] The bar... home... on the Internet... [Interviewer: Like cyber bullying?] ... Yep."*

The pervasiveness of violence throughout community life was echoed by participants across the Inuit regions. A participant in Cape Dorset described the unprecedented and overwhelming feelings of anger permeating the community that often lead to interpersonal conflict and violence in all aspects of social life.

> *"[There's an] undertone of anger that's unprecedented. And it's very overt, [and] we see violence more family, inter-family, inter-community. I feel like right now it's directed at everyone. It's coming from kids, it's coming from youth. Its fearful here. And, we're still seeing a lot of violence in families, often related to drugs and alcohol. [There are] threats to nurses, threats to teachers, overt threats and racial slurs in stores. It's not just domestic violence, its every type [of violence]. It's very prevalent," participant, Cape Dorset.*

As violence pervades many interpersonal relationships within families and communities, it negatively impacts youth self-esteem and sense of belonging in ways that reinforce the unhealthy relationships youth have with themselves and others.

3.2.3 SOCIAL MEDIA AND CYBER-BULLYING

Alongside the impacts on cultural identity of colonization, many participants described how the advent of the Internet and social media is reinforcing changes in Inuit lifestyles, ways of living and social relationships. Particularly among elders there are feelings of unfamiliarity with new technology and a sense that this technology is contributing to the social disconnection between elders and youth. One participant explained that,

> *"When you look at history, connection to the land and to country food, and the environment has been linked to the spirituality and well-being of the Inuit for a long time. And this generation of youth don't know where to go. They want a piece of western influences of the world, and they want to connect to their culture. If they were connected with their culture, [they] would have a lot stronger sense of well-being," participant, Cape Dorset.*

It is important for youth to be connected to Inuit cultural identity, practices and knowledge to foster self-esteem, sense of belonging and well-being, yet this requires building strong relationships with elders. Social media and online activities may be taking time and attention away from the social relationships needed for cultural transmission, as well as contributing to the social isolation of youth more broadly.

Furthermore, social media is perpetuating forms of lateral violence and cyberbullying among classmates, and youth now experience intensifying bullying from peers. Issues at school are also conflated with the racialization of students, especially in southern urban centres where Inuit youth make up an extremely small proportion of the student population. There is little culturally-informed, Inuit-specific education available to students about issues of Inuit identity and self-esteem and how to cultivate healthy intimate partner relationships. As a result, many Inuit youth also turn to social media for support in dealing with the challenges of unhealthy relationships and violence. One youth participant explained that,

> *"Individuals my age, [and] I have many friends who do the same thing, and post everything online. All their feelings. Everything they're going through in life. They don't know where to go. They don't know what to do next. It's hard. A lot of them are running away from abusive men in their lives. Scared, alone," participant, Montreal.*

Conflicts were also perpetuated by low levels of confidence in cultural identity. Many of the youth in the study discussed experiencing low self-esteem, especially in the context of comparing themselves against western beauty standards. In particular, the promotion of westernized beauty standards undermines the diversity of Inuit characteristics and their expression of gender and culture through clothing and jewelry. For example, one youth participant expressed,

> *"I think there's not enough conversation about race in a community like ours. And I mean, I didn't learn any words about privilege and there's so much racism that happens in schools in a place that's already been uncomfortable for people to be in. And I was talking to girls about self-esteem, and there's no representation of Inuit beauty at all. It's all white females," participant, Iqaluit.*

Disconnected from Inuit culture and identity, young women and girls are surrounded by representations of western beauty and norms online and in school with negative impacts for their self-image and confidence. In this way, access to social media and its impacts on the self-esteem and confidence of Inuit youth and women can increase vulnerability to violence both online and in communities as well as self-harm. For example, work by Pauktuutit around the issue of human trafficking has suggested that Inuit women and girls trafficked from Inuit Nunangat through southern urban centres are often initially contacted through social media and lured out of their communities through fake relationships (Pauktuutit Inuit Women of Canada, 2013). Human traffickers frequently target Inuit women and youth that appear to be socially isolated and experiencing low self-esteem or other mental health challenges.

3.2.4 THE CHANGING PHYSICAL LANDSCAPE

Climate change and extractive resource development are interconnected issues that were discussed throughout the research conversations across Inuit Nunangat. Many participants expressed deep concern with how the physical landscape has changed so rapidly, with devastating impacts on traditional ways of life and food security. Both climate change and resource extraction activities are changing Inuit relationships to the environment by limiting access to the land and sea while also disrupting traditional ecological knowledge of landscape conditions. For example, small increases in climate temperature can drastically change sea ice conditions in ways that limit access to country foods and jeopardize the health of community members (Durkalec et al., 2015). As explained by a discussion circle participant,

> *"Our summer is cold, so during the warm part of our summer, there's actually a little bit of colour in the landscape. So, change is very drastic. Small change is very drastic for people who live in an environment like this. So little change can be so hard too. That's why grief and loss, is something so hard for people to address," participant, Iqaluit.*

The rapid change in the physical landscape was described as mirroring the rapid social change resulting from colonization, with both processes of change reinforcing the disconnection from Inuit culture and identity. As climate change and resource development contribute to food insecurity, stress and diminished ability to practice culture in Inuit families and communities, they reinforce the determinants of violence experienced by Inuit women and girls across Inuit Nunangat.

3.3 Political Determinants of Violence

The political determinants of violence were characterized by participants as historical events and actions taken by the Government of Canada as well as the British and French empires – actions which have influenced the prevalence of violence in Inuit communities. The primary political determinants that emerged from the discussion circles with participants include frustration over federal government policy and ongoing challenges with the criminal justice system.

3.3.1 FRUSTRATION OVER FEDERAL GOVERNMENT POLICY

The imposition of federal government policy on Inuit communities has drastically altered Inuit culture, social relationships, governance structures, and economic sustainability resulting in significant impacts on rates of violence. While specific policies and historical events vary across the four Inuit regions, the common experience of forced settlement and the frequent relocation of families has directly contributed to the prevalence of violence across Inuit Nunangat. As one participant explained,

> *"The increase of a population or the consolidation of multiple communities, with diverse ways of living, into a smaller area increased the prevalence of violence. Frustrations with the government in regard to relocations and the very recent impacts of colonization are being taken out on fellow community members," participant, Cape Dorset.*

As this quote demonstrates, the frustration and stress resulting from the experience of forced settlement and relocation has negatively impacted interpersonal relationships in Inuit communities in ways that contribute to violence. At the same time, forcing increased numbers of different groups

of Inuit into small communities without similar increases in infrastructure and resources has further raised interpersonal conflicts. Another participant stated,

> *"Violence is from residential schools and forced relocation… and then battles over land rights. Mostly for hunting. Nainmiut, people from Nain, had always hunted in a certain area. And then when the Hebron [people] came because of forced relocation, [the] Hebron tried to go hunting in certain areas, but just [started] fighting over hunting areas," participant, Nain.*

Taken together, the impacts of individual colonial policies such as the slaughter of sled dogs and the 'Eskimo tag' identification system have cumulated in widespread feelings of powerlessness that enhance the risk of family and intimate partner violence. One of the participants emphasized the relationship between the slaughter of sled dogs, assimilationist government policy and cultural self-determination.

> *"It's really sad what the government has done. I mean trying to assimilate [us]. The dog slaughtering for my community seems like the apex, because they had no choice but to stay in the community now because their dogs were slaughtered… the government said, 'Who do you think you are?' to our parents, [and] killed their dogs," participant, Montreal.*

Participants expressed that a great deal of anger and frustration exists in communities with respect to the relationship between government policy, especially residential school policy, and Inuit well-being. This was particularly evident in discussion circles with participants in the region of Nunavik.

Negative experiences with federal government policy are not simply historical and persist widely across Inuit communities. The impacts of colonization remain pervasive and ongoing, and the Inuit regions continue to fight for the full implementation of land claims agreements and access to adequate financial resources. The study participants generally concurred that government policy and initiatives related to forced settlements and relocations, residential schools and the imposition of western forms of governance and social order have acted as tactics for assimilation. As many of these policies remain in place or have yet to be fully addressed, Inuit communities continue to bear the negative consequence of federal policies and legislation aimed at enhancing state sovereignty and economic prosperity. Through these discussions, participants linked the lack of political self-determination with the high prevalence of violence across Inuit Nunangat. Participants explained that "100 years of oppression" was the primary cause of violent outbursts, reflecting the

abuse Inuit have experienced at the hands of the government and the resulting disruption of Inuit ways of life.

3.3.2 CRIMINAL JUSTICE SYSTEM

In terms of the political determinants of violence against women and girls, participants highlighted the inadequacies of the current legal system and its incompatibilities with the realities of everyday life in Inuit communities. Participants discussed how violence persisted in communities due to both a deep mistrust of the Royal Canadian Mounted Police (RCMP) and the bureaucracy disconnecting the provincial and federal legal systems from the needs and preferences of Inuit communities. The RCMP are viewed in many Inuit communities as an imposed colonial authority with little understanding of community dynamics or Inuit principles and traditions of justice. Many women do not trust the RCMP and its predominantly *qallunaat* workforce and thus will not turn to them when experiencing violence. Related to this, a significant deterrent from contacting the police is Inuit women's fears of losing custody of their children if police deem the home to be violent and unsafe. The practice of removing children from their mothers in cases of domestic violence in the home may force women to choose between losing their children and their personal safety. A few participants further noted that they did not call the police during violent incidents because they did not want to have their partner arrested. As one participant articulated,

> *"...that sizzling pain, that fresh-bruised feeling is still there [crying]. And it's not just in me, it's in my abuser too. It hurts both of us. It hurts all of us."*

Participants described wanting to have more healing resources for themselves, their children and their partners grounded in Inuit perspectives on justice as the restoration of community harmony rather than the punishment of offenders.

In cases where the RCMP and legal system do become involved, participants described the challenges of navigating the systems' procedures and the resulting fear that comes from relying on a slow and overburdened system that does not respond to the realities of small Inuit communities. As one participant who works in the criminal justice system explained,

> *"We don't know the culture and once we get involved and its very specific for us and we have to follow rules according to the federal government to press charges in a domestic situation. Things like no contact and going to court. But this is a small community and these things don't really work. People still see each other and everyone in the community talks a lot," participant, Clyde River.*

The bureaucratic and procedural culture of the provincial and federal legal systems is difficult for many Inuit women to understand and the regulations frequently clash with Inuit culture and local community needs. No-contact or emergency protection orders cannot be effectively applied in small Inuit communities with limited infrastructure, few or no safe shelters, and where everyone in the community is known to each other. Participants suggested that they do not believe no-contact or emergency protection orders, as currently applied, can provide adequate safety and protection, and described offenders routinely violating court-issued orders or police not enforcing them. Several discussion circle participants and key informants further explained the ineffectiveness of the frequently overburdened circuit court system which only visits communities two to six times a year. As a result, it may take an inordinate amount of time for perpetrators to be tried and victims of violence may have to endure the stressful daily reality of maintaining hyper-vigilance or hiding from the abuser, his family and friends to protect herself from scorn, threats, and potential physical harm. Upon successfully navigating the legal system, some participants described sentences for perpetrators of violence as "a slap on the wrist" which not only fails to protect the victims but may also serve as a deterrent to reporting future violence.

3.4 Social Determinants of Violence

All the determinants of violence discussed by the research participants have impacted social relationships among Inuit families and communities with negative consequences for social cohesion. In the discussion circles, however, the participants highlighted two critical social determinants of violence against Inuit women and girls that also strongly shape Inuit well-being more broadly – substance abuse and inadequate housing.

3.4.1 SUBSTANCE ABUSE

Drug abuse was a common theme that was discussed with reference to cannabis, prescription pills, crystal meth and fentanyl use, especially among youth. Participants indicated that the use of synthetic and "harder" drugs has become more prevalent among Inuit in the cities of Iqaluit, Yellowknife, Ottawa and Montréal. Yellowknife has been recognized as having significantly higher drug use and the fentanyl epidemic has been most notable in this region. A 2016 CBC article reported that,

> *"Fentanyl or other related compounds are being sold on the illicit market either mixed with other forms of opioids, or substituted completely for other drugs" (CBC, 2016).*

Substance use and abuse was identified by participants as a key social determinant of the high prevalence of all forms of violence in communities and specifically intimate partner violence. One participant in Clyde River explained that,

> *"Communities have seemed to normalize drinking large amounts of alcohol at a quick pace,"*

which often translates into interpersonal conflict and violence against women and girls in the home. Another participant reinforced the relationship between the consumption of alcohol and violence by stating,

> *"I prefer having my husband under... under cannabis, because he's not beating me, instead like when he's under alcohol."*

Despite the negative social consequences of alcohol abuse and the interventions by many communities to restrict access to it, participants described the normalization of binge drinking across many Inuit communities. Although some hamlets are officially dry communities or have implemented permit systems to control consumption, participants suggested that these policies are not effective in preventing or addressing alcohol abuse. For example, participants in Clyde River (a community with an alcohol permit system) suggested that restrictions can increase the desirability of finding and quickly consuming large amounts of alcohol. This was further substantiated by a law enforcement officer who observed that,

> *"Clyde River is a restricted community, so people still purchase alcohol with a permit... and you are allowed so much per month. I've been doing this or 11 or 12 years and what I observed is that alcohol is a huge factor in how things play out here," participant, Clyde River.*

In large urban centres, such as Montreal, the increasing rates of substance abuse alongside high rates of violence was linked to survival sex work. During one discussion circle, participants explained that women employed in the sex industry are often substance users and suggested there is a close relationship between violence, substance abuse and sex work. One participant detailed this link,

> *"A lot of young ladies are running away from abusive men in their lives. They're coming here with their children. Scared, alone. To a new place, where they think that there's gonna be many opportunities. And there's language barriers, there's discrimination. There's a whole slew of people waiting to prey on them. Right now, SPVM (Montreal Police Service) is working [and] ha[s] a survivors' program, with sex workers and do anti-trafficking work. And they're working on a book in Inuktitut to give that information to Inuit. The girls don't know what they're... what they're gonna get into when they get here," participant, Montreal.*

Indeed, many of the characteristics which link violence and substance use are related to interactions of economic and social power as many of the women affected also face discrimination and poverty. Participants were passionate about reducing substance use because of its effect on younger generations and highlighted the need for the cycle of substance abuse to be broken to start healing.

3.4.2 INADEQUATE HOUSING

Across Inuit Nunangat, a significant shortage of housing coupled with a lack of affordable housing options increases the vulnerabilities of Inuit women and girls to violence. Data from Statistics Canada shows that in 2016, over half (51.7%) of Inuit in Inuit Nunangat lived in crowded housing compared to only 8.5% of non-Indigenous Canadians (Statistics Canada, 2017c). Poor housing conditions are an important contributor to the creation of unhealthy living environments and the link between poor housing conditions and family, domestic and sexual violence is well established. All the service providers interviewed in the study identified the lack of housing as an exacerbating factor in the perpetuation of violence against women as overcrowding leadings to stress, tensions and conflicts within families. As a participant clarified,

> *"If you have 20 people in a three-bedroom house, you have situations… with health, violence, uh, second-hand smoke, kids can't find a space to study. You can't put that many people… none of us can live with that many people," participant, Iqaluit.*

The relationship between overcrowded and inadequate housing was described as follows:

> *"With many generations [and] a lot of people sharing a two- or three-room house, the proximity of people can lead to violence – things that wouldn't happen in less crowded places. We're so close to each other, and we know everyone, [so] when something happens we all know about it. It's a lot different than the south. Suicide, and violence, and we see it a lot. And people die a lot here,' participant, Kuujjuaq.*

As well as perpetuating violence, inadequate access to housing is an important factor in why Inuit women may remain in unsafe relationships or situations of violence. Another participant in Kuujjuaq explained,

> *"With the lack of housing that we have, even when a woman wants to get out of the situation, they can't, because they have no place else to go. So, they're gonna stick with what, deal with what they have, that's within the household, until sometimes the worst things possible happens, like, being killed. If you were living in the south, and you're in a situation like that, you can just move out and get an apartment, and go on with your life. But here, in small communities, there's nowhere else to go."*

The housing crisis jeopardizes the safety of women fleeing or seeking to flee violence and abuse. While Inuit families tend to be close-knit and an important source of social support, the prevalence of overcrowded housing means that many families do not have the space or financial resources to offer to women seeking to escape violence. A community health worker described the challenging situation:

> *"[w]e have families who volunteer to shelter people temporarily. The problem with that is housing, their houses are seriously overcrowded, and, uh, food security. Those are two things that I hear often deter people from taking women (and their children) in," participant, Pangnirtung.*

Several participants further indicated that community members may be reluctant to provide refuge for women and their children fleeing violence due to fear that it will put their own safety in danger.

As a result, many women experiencing violence must rely on a shelter within the community to seek safety for themselves and their children or leave the community. Due to the high costs of plane travel out of Inuit communities, this is not an option for most women experiencing violence and may only be available if funded by local social service workers. Given that the population of Inuit Nunangat is young and growing rapidly, the conditions of inadequate housing can be expected to intensify in the future, resulting in the heightened vulnerability of women and girls to violence.

3.5 Economic Determinants of Violence

The economic determinants of income, economic status and education are widely recognized to be related to experiences of gender-based violence, as low access to financial resources and power contribute to stress and frustration that leads to conflict. While these economic determinants of violence are important across Inuit Nunangat, Inuit communities experience unique determinants that reflect their remote and resource-based economic context, as well as the recent imposition of the wage economy. The unique economic determinants of violence that emerged through the research included: food insecurity, high unemployment rates, the high cost of living, gendered wage gaps, elder pension and income support related financial abuse, and the onset of temporary workers.

3.5.1 INFLUX OF NON-INUIT WORKERS

The labour market in Inuit Nunangat is characterized by large influxes of temporary workers, particularly in terms of high-skilled and higher paying positions. These temporary workers are non-Inuit, predominantly male and tend to earn significantly more than Inuit community members. As resource development and extraction have become larger priorities for economic development across the Inuit regions, this temporary labour market segment has grown and created social impacts for the Inuit communities these workers live in or interact with. Participants suggested that non-Inuit temporary workers in male-dominated resource industries may be introducing or reinforcing negative attitudes towards women in Inuit communities. One participant explained that in Newfoundland and Labrador there has been an increase in temporary workers which she felt was contributing to an increase in violence towards women. These events of violence are conflated with drinking alcohol and other activities which were characterized by the participant as temporary workers "letting off steam." The participant said,

> *"These men from away, they come into our communities and they get ridiculous amounts of money, and they go to the bars and prey on women who are drinking. And they feel entitled to sex or whatever. And it's scary, the sense of entitlement, and entitlement to women's bodies. I think that's an attitude of young men especially that you see around here. I think it's compounded by money, and the workers from away and just*

here for a couple weeks. Letting out whatever, letting off steam," participant, Happy Valley-Goose Bay.

Temporary workers with no accountability to the communities that they are working in or nearby often do not feel obliged to uphold community social expectations and sometimes feel they can act with impunity towards local Inuit women. Further, the high income and social inequality between non-Inuit workers and Inuit women creates a significant power imbalance that may lead to gender-based acts of manipulation and violence. These findings are consistent with research Pauktuutit conducted in Baker Lake on the gendered impacts of resource extraction in 2013-14. Inuit women participants in the Baker Lake case study described incidents of sexual violence at the mine site stemming from the power imbalance between themselves and non-Inuit employees (Pauktuutit, 2016).

3.5.2 INFLUX OF HIGH SALARIES AND WAGE GAPS

Income disparities in earnings between Inuit and non-Inuit are apparent. Often the income inequality can be as high as 30 to 50 per cent, a significant difference with serious social impacts. Higher wage disparities are problematic and create feelings of resentment and tension within communities between Inuit and *qallunaat*. This is because high wages drive up the cost of living in terms of affordable housing and food and make traditional gathering practices like hunting challenging for Inuit. As a participant explained,

> *"There's not a whole lot of resources for people to work. [and] there's a lot of high unemployment rate. So, with poverty comes a high food insecurity, and its challenging when we don't have something to eat, then you can't manage basic needs," participant, Cape Dorset.*

Participants clarified that when community members are stressed by the lack of employment opportunities and food insecurity, violence was more prevalent. As well, the ability of Inuit to cope with financial stresses and violence has been inhibited by the poor quality of food that is being consumed and hinders optimal brain activity. For example, one participant said,

> *"I think there's compounded, compounded issues that lead to the violence. Where you're getting your next meal, the nutritional value of your meals [which] affect your chemical balancing, to substances. Putting bad nutrients [and], bad chemicals into your body, to living in confined spaces with multiple people," participant, Iqaluit.*

The inability to afford to hunt regularly due to the cost of snowmobiles, hunting gear and gasoline results in Inuit consuming less nutritious food and disconnects them from cultural practices that are linked to their well-being. Furthermore, increasing income disparities between Inuit community members is contributing to feelings of jealousy and family conflict that may be released through acts of family and intimate partner violence.

3.5.3 FINANCIAL ABUSE

Economic violence was described most prominently by participants in relation to elder abuse. The financial abuse of elders is common and has been identified as a theme across the communities and urban centres that were part of the study. Participants explained that this is a significant problem, particularly with debt often being highest amongst elders due to their low incomes. As one participant described,

> *"Youth now approach their grandparents knowing they have received income support or a pension cheque and elders often feel obliged to give because they assume it is their obligation," participant, Kuujjuaq.*

Financial abuse appears to be occurring most commonly among elders and participants stated that some youth exploit elders for financial support. Given the recent introduction of the market economy and western financial system into Inuit Nunangat over the past 50 years, many elders lack financial literacy and are thus easy targets for financial exploitation and abuse. This financial abuse has been further facilitated by the erosion of elders' social and cultural roles in Inuit communities because of the residential school system and other colonial policies.

3.6 Conclusion and Recommendations

Based on qualitative data gathered from discussion circles and in-depth interviews with the study participants, this chapter describes the experiences of violence of Inuit women and maps the unique determinants that sustain the prevalence of this violence. While there are many complex and interrelated factors that contribute to violence against women and girls, the study findings suggest that Inuit women face specific cultural, political, social and economic determinants that reflect the unique context and daily realities of Inuit Nunangat. Analysis of the research data reveals the key determinants of violence experienced by Inuit women to be:

- disruption of Inuit culture and identity;
- normalization of violence;
- inadequate and overcrowded housing;
- impacts of colonial government policy;
- increased alcohol and substance abuse;

- challenges with the criminal justice system;
- economic inequality and income instability; and,
- food insecurity.

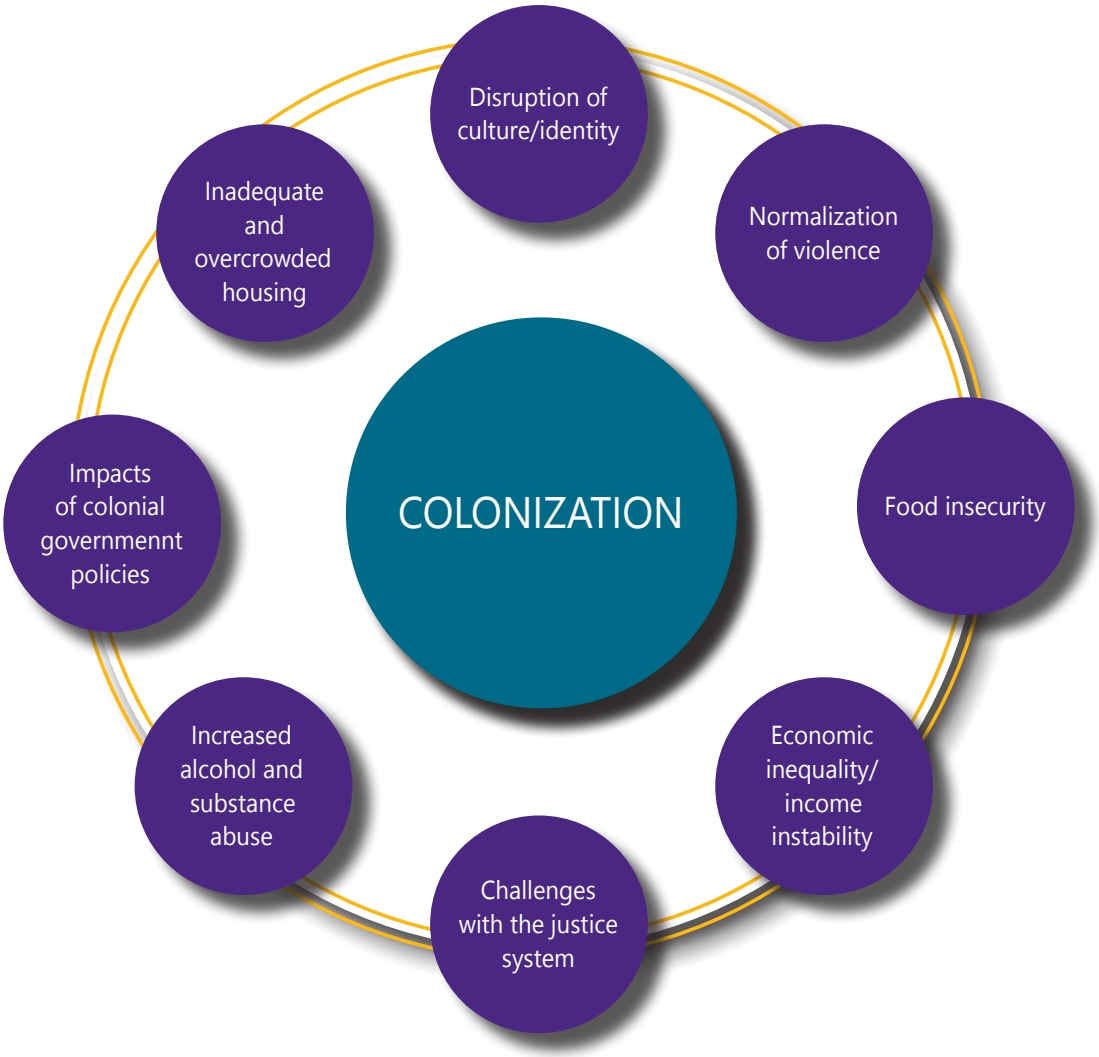
Together, these determinants create conditions of stress, tension, frustration and anger in Inuit communities and limit self-esteem, sense of belonging and cultural pride, perpetuating the high rates of violence experienced across Inuit Nunangat.

While the determinants of violence vary across Inuit communities, the study data demonstrate that the most common factors that lead to violence experienced across all four regions include:

- disruption of culture;
- displacement and forced relocation/settlement;
- inadequate and overcrowded housing;
- unhealed trauma from residential schools;
- increased alcohol and substance abuse; and,
- food insecurity.

These factors are all inextricably linked to the historical and ongoing Inuit experiences of colonization. Through the process of colonization, government policies, programs and legislation intended to control and assimilate Inuit communities by destroying cultural knowledge, practices and identities. The forced relocation and permanent settlement of Inuit families, the residential school system and the slaughter of sled dogs are three critical policies that were implemented to disrupt Inuit culture and prevent its intergenerational transmission. The result of this cultural disconnection for Inuit communities has been rapidly changing lifestyles, social roles, economic livelihoods and governance structures that have displaced traditional Inuit ways of living and negatively impacted mental and physical health. The high rates of violence experienced in Inuit communities and the cycles of intergenerational trauma it fosters are a legacy of this cultural disconnection. Figure 10 illustrates the primary determinants of violence to emerge from the research for this study and the ongoing role of colonization in shaping these determinants. Recently, both Nunavut Tunngavik Incorporated (2016) and Status of Women Canada (2018) have recognized colonization as a structural determinant of the high rates of physical and sexual violence, as well as self-harm, in Inuit communities.

FIGURE 10: DETERMINANTS OF VIOLENCE



By exploring the perspectives of Inuit women and key informants on the determinants of gender-based violence, this study was able to bring forward and privilege the voices and experiences of Inuit women as the evidence base for future interventions and violence prevention strategies. Given the complexities and interconnections of the determinants of violence experienced by women and girls across Inuit Nunangat, multiple and diverse approaches are required in the short-, medium- and long-terms.

Below are the 14 recommendations that have been developed from the research conducted for this study. They are not new but rather reiterate long-standing needs to begin meaningfully addressing the high prevalence of violence against Inuit women and girls.

1. Develop violence intervention, prevention and healing strategies that are Inuit-specific, led by Inuit women, and respond to the unique cultural, political, economic, social and historical context of Inuit Nunangat.
2. Prioritize funding for the development of appropriate, safe and affordable housing across Inuit unangat at all levels of government.
3. Enhance the provision of Inuit-specific and Inuktitut services for survivors of violence and offenders to interact with and navigate the federal and provincial criminal justice systems.
4. Promote community-based collaboration between survivors of violence, police, service providers and community members to identify effective measures to ensure the safety and well-being of Inuit women and their children.
5. Provide adequate, sustainable and flexible funding in Inuit communities for emergency shelters serving Inuit women and children experiencing violence.
   a. The Government of Canada must reverse its policy that excludes Inuit communities from accessing operational funding for shelters through the Family Violence Prevention Plan (FVPP). Shelter funding must be made available to Inuit communities at a minimum equitable amount to that provided for shelters on First Nations reserves.
   b. Funding should support the operation and maintenance of existing shelters and the development of new shelters in consultation with communities.
   c. Eligible costs for shelter funding should include: general operations and maintenance; staff training, retention and professional development; and, programs and supports responsive to the needs of Inuit women.
6. Examine the feasibility and community readiness for transition and second-stage housing services in Inuit Nunangat in consultation with Inuit organizations, shelter directors, service providers, and survivors of violence.
7. Conduct a needs assessment to determine the gaps in culturally safe services for Inuit women experiencing violence in urban centres, including the need for Inuit-specific emergency shelters and transitional housing services.
8. Collect data on the use of medevac and emergency health services that is disaggregated by gender and cause to support increased understanding of the prevalence and cost of violence against women and girls in Inuit communities.
9. Undertake research to estimate the economic cost of violence against Inuit women and girls in Inuit Nunangat at the individual and systemic levels.

10. Prioritize upstream investments in prevention, intervention, postvention initiatives to both enhance the quality of Inuit women's lives and reduce the hard financial costs of the highest rates of violence in the country.
11. Develop and promote Inuit-specific public education and multimedia campaigns to increase awareness of gender-based violence among men, women and youth, including forms of violence, causes of violence, and available support resources.
12. Enhance funding for family-centered and community-based healing programs for victims of violence and perpetrators.
    a. Healing programs should integrate *Inuit Qaujimajatuqangit* and on-the-land activities and be available in the regionally appropriate dialect of Inuktitut.
13. Develop and enhance safe community spaces for Inuit youth and children that are accessible outside of normal working hours, such as youth centres.
14. Provide comprehensive and Inuit-specific cultural safety training for all *qallunaat* (non-Inuit) service providers in the health, justice and social sectors in Inuit Nunangat to improve the capacity of services and to address the needs of Inuit communities.

CHAPTER FOUR:
THE NEED FOR SHELTERS AND SAFETY

The second objective of this research study was to understand the impacts of violence in direct relation to shelter needs to inform and improve the services provided in Inuit Nunangat for women and girls experiencing violence. Across the 51 communities of Inuit Nunangat, more than 70% do not have a safe shelter for women and children experiencing family violence. As a result, a woman may have to "plead with local social service workers to be flown to another community to seek safety" (Pauktuutit, 2018). Alongside the lack of shelters, many existing shelters are experiencing increases in demand and are often at full capacity, meaning that they must increasingly turn away women and children in need. As Canadian statistics continue to show that Inuit Nunangat experiences the highest rates of family and gender-based violence in the country (Charron et al., 2010; Inuit Tapiriit Kanatami, 2014; Nunavik Regional Board of Health and Social Services, 2004), the lack of access to emergency shelter services has real and serious consequences for the safety and health of Inuit women with "too many cases in the Arctic when the lack of access to safe alternatives has led to the loss of lives" (Pauktuutit, 2018).

The analysis provided in this chapter comes from data collected from surveys with service providers and shelter directors/assistant directors/workers, as well as the community discussion circles. In total, structured interviews were conducted with 44 service providers (n=44) across Inuit Nunangat and in the larger urban centres of Montréal, Ottawa, Yellowknife, and Happy Valley-Goose Bay. Interviews were conducted with staff at 13 of the 15 existing shelters in Inuit Nunangat. It should be noted that these shelters are comprised of safe shelters, crisis centres and transition homes, and that all service women and their children only. A further 10 discussion circles were held with 70 community members (n=70). From all these conversations, the following primary findings emerged around the challenges shelters have when attempting to meet the needs of Inuit women and their children at risk of experiencing violence.

- There is a lack of resources and funding to maintain the operational costs of shelters.
- There are high staff turnover rates.
- There are limited transitional supports available to women and their children when it is time to leave the respite of the shelter.

This chapter outlines and discusses these three key findings in relation to the data collected from different groups of research participants who have various direct and professional experiences with shelter needs.

4.0 Shelters – Main Gaps and Needs

This section provides an overview of the data derived from in-depth interviews with shelter staff (directors/assistant directors/workers, others) regarding the:

- reasons why women access shelters;
- services provided;
- reasons why an individual may be denied access to the shelter;
- average length of stay; and,
- perceptions of the incidence of violence in the community.

Of the 13 shelters engaged in the research from February to April 2018 (n=13), the findings presented in Table 5 reveal that at that time of the survey, 31% of shelters indicated that they were full and operating over capacity, while 69% of shelters indicated that they were not currently full. When asked why the shelter was not full, one participant in Nunavik explained,

> *"It [full occupancy] comes in spurts and when we are full in the shelter we rent space from a company in the community, where we have a three-bedroom house and can have four families living there," participant, Kuujjuaq.*

TABLE 5: SNAPSHOT OF INUIT NUNANGAT SHELTERS (N=13), CAPACITY LEVELS

Shelter	Currently Full	Numbers of Communities Served	Occupancy Level by Number of Person	Average Length of Stay
1	Yes	13	6-10	Several weeks, varies case to case
2	No	N/A	2-5	A few days
3	No	1	2-5	A few days
4	No	2	6-10	Several weeks (six weeks maximum)
5	No	5	6-10	More than six months
6	No	3	10	A few days to a week
7	No	5	11+	1-2 days
8	No	7	10	Several weeks
9	Yes	2	7	Until they are safe and feel comfortable going home
10	Yes	4	11+	Several weeks
11	Yes	25	11+	Several weeks but up to six weeks
12	No	4	6-10	four weeks
13	No	14	11+	N/A

The shelters contacted predominantly serve women and children who are seeking respite from violence, and as the data presented in Table 6 shows, the three main reasons why women access these shelters is to seek safety from physical abuse, sexual abuse and for child protection. These forms of violence are often interconnected and can be experienced simultaneously by women and their children.

TABLE 6: REASONS FOR SHELTERS ACCESS IN INUIT NUNANGAT

Region	Type of Shelter	Up to Three Main Services Provided	Three Main Reasons Why Women Access the Shelter
Labrador	Women's emergency shelter	▪ Mental health service ▪ Housing referrals	▪ Physical abuse ▪ Mental abuse

Region	Type of Shelter	Up to Three Main Services Provided	Three Main Reasons Why Women Access the Shelter
Inuvialuit	Emergency domestic violence shelter	▪ Referrals: housing; mental health services ▪ Weekly sewing group ▪ Counselling	▪ Physical abuse ▪ Sexual abuse ▪ Child protection
	Emergency shelter for women	▪ Referrals: counselling; safety planning; legal services; financial assistance; job training and employment search; parenting skills; housing ▪ Advocacy on behalf of women ▪ Provide a comfort allowance per person when in the shelter	▪ Physical abuse ▪ Emotional abuse ▪ Safety/protection of children
Newfoundland and Labrador	Emergency domestic violence shelter	▪ Advocacy	▪ Physical abuse ▪ Emotional abuse ▪ Safety/protection of children
	Emergency homeless shelter Emergency domestic violence shelter Transition house Second-stage housing	▪ Safety planning/protection planning ▪ Crisis telephone line ▪ Referrals: mental health services; financial assistance; housing	▪ Physical abuse ▪ Sexual abuse ▪ Financial abuse
Nunatsiavut	Emergency domestic violence shelter	▪ Individual short-term counselling ▪ Safety planning or protection ▪ Referrals: mental health, legal services, financial assistance, life skills, housing referral; advocacy on behalf of women	▪ Physical abuse ▪ Sexual abuse ▪ Child protection
Nunavik	Emergency domestic violence shelter Other: "women in difficulty but we are not a homeless shelter"	▪ Referrals to other organizations	▪ Physical abuse ▪ Emotional abuse ▪ Child protection

Region	Type of Shelter	Up to Three Main Services Provided	Three Main Reasons Why Women Access the Shelter
Nunavut	First line emergency shelter for abused women and children	▪ Crisis telephone line/on call phone ▪ Taxi credits	▪ Physical abuse ▪ Sexual abuse ▪ Child protection
	Emergency homeless shelter	▪ Referrals: social services (for all counselling and mental health services)	▪ Physical abuse ▪ Sexual abuse ▪ Protection of children ▪ Housing support
	Emergency domestic violence shelter	▪ Referrals: individual short-term counselling/addiction counselling ▪ Advocacy on behalf of women, transportation services	▪ Physical abuse ▪ Child protection from witnessing abuse of mother
	Emergency domestic violence shelter		
	Emergency shelter for women and children	▪ Referrals: individual short-term counselling; safety planning; job training or employment search ▪ Provide taxi vouchers to access other services ▪ Help women in dealing with the Department of Justice	▪ Physical abuse ▪ Sexual abuse ▪ Child protection from witnessing the abuse of mother
	Emergency homeless shelter	▪ Referrals: counselling; legal services; life skills; job training; housing ▪ Transportation to shelters and court	▪ Physical abuse ▪ Psychological abuse ▪ Sexual abuse ▪ Threats ▪ Neglect ▪ Witnessing abuse of the mother ▪ Sometimes housing problems
	Emergency domestic violence shelter		
Quebec	Emergency homeless shelter	▪ Individual short-term counselling in conjunction with social workers ▪ Housing referrals ▪ Advocacy on behalf of women	▪ Physical abuse ▪ Sexual abuse ▪ Housing problems
	Emergency domestic violence shelter		
	Transition house		
	Emergency shelter		

4.0.1 ACCESS TO SHELTERS

The data in Table 5 shows that all 13 shelters serve multiple communities, or at least are willing to do so. Specifically, 93% of the shelters that participated in this study serve multiple communities – from two to 14 at any given time. The exception to this is the shelter in Iqaluit, which serves 25 (all Nunavut communities). This means that there are only approximately 6-10 beds at any given shelter to offer support to multiple communities with women and children who need safety. These figures, along with the occupancy levels recorded for each shelter (which range from 2-15 beds) and compounded by community size (1,000 to 5,000 people) are concerning. As previously noted, the rates of violence across Inuit Nunangat are the highest in the country and steadily increasing. Considering that the most recent estimate of the Inuit population in Inuit Nunangat was 47,330 people (Inuit Tapiriit Kanatami, 2018b), of which approximately two-thirds were adults and half were females, this provides alarmingly few shelter beds for Inuit women. Essentially, the data suggests that 90 to 150 beds are available across Inuit Nunangat for an estimated population of 15,850 Inuit women, resulting in a maximum average of one bed per 106 women.

For Inuit women who live in more remote communities without shelters, accessing this form of support remains an even greater challenge. The few available shelters in the larger communities may be operating at full capacity and, even when spaces are available travel between communities requires significant time and financial resources. As one woman who has previously used a shelter explained,

> *"I think we need more women's shelters in communities. Because they [women] have to fly out here cause there's [few] women's shelters in [all of] Nunavik," participant, Kuujjuaq.*

The cost of plane travel can be a prohibitive factor in accessing safe shelters, as a one-way ticket between communities or to southern urban centres generally costs thousands of dollars per person and may also only operate a few days a week. Another participant described this challenge in detail:

> *"One big thing that keeps the cycle in repeat, there's no shelter here and even if a lot of these families try and go to Iqaluit for shelter or [the] YMCA in Ottawa, they might tell you [to] get there on your own. It's already a desperate call. Maybe he's financially in control, or maybe you had to flee, you don't have your card. You have no way of getting out," participant, Cape Dorset.*

The often-necessary practice of relocating women from their communities to access shelters can have further negative impacts for women and their children experiencing violence. As a participant in Iqaluit explained based on her personal experience:

> *"And that's the thing – the lack of shelters. I have been here for a few weeks and I haven't been comfortable. Everything is new to me. Society is new to me. Coming from a small community like Cape Dorset, everything is different here. There are different faces, different names… this and that. If it were up to me, I would've stayed home. That's where my family is. That's where my family is. That's where my support is. But, I had no other place to turn to anymore. If there were shelters back in Cape Dorset, I wouldn't be here today. We need one in every community."*

This sentiment was consistent across numerous interviews. Another respondent from a community without a shelter further stated:

> *"It took me over nine months to get to the shelter here. And nine months of those beatings could have been prevented. I am still healing from it. It is time to be heard. It is time to be heard!" participant, Iqaluit.*

Many of the service providers and shelter workers interviewed discussed the impacts of women and their children being uprooted from their community during times of crisis. While the community is the site of the violence, it is also the source of family, social and cultural support that can be crucial in the healing and wellness of women who have experienced violence and abuse. Relocation from their home community is a further disruption to a woman and her children during a time of stress, fear and multiple challenges and can exacerbate the mental and physical health impacts of violence.

While physical access to shelters for most communities is a challenge, there are other significant barriers that prevent women from accessing the supports and services of shelters. The first barrier is related to operational resources and the capacity constraints of shelters. For example, many shelters reported experiencing a lack of adequate and sustainable funding, high staff turnover, and a lack of available and affordable space in Inuit communities. Many shelter staff described the challenges of high operating and maintenance costs across Inuit Nunangat – high costs of living, infrastructure, food, salaries and building maintenance – which can limit the number and types of services that shelters are able to offer, as well as the length of stay that shelters are able to provide. In the recent past, these costs have also been the main reason that some shelters in smaller communities closed.

The second barrier that prevents women from accessing shelters is related to social expectations in Inuit communities. For example, many women experienced being labelled and faced judgement for going to a shelter and disrupting their family life, especially if she had to leave her children or take them with her away from the community. In many instances, women lived in a state of "received" fear of what was going to happen when they returned to their community. As one participant explained, the key issue she faced was the learned behaviour to accept violence as normal, as well as having nowhere to go.

> *"I was brainwashed. After getting away from the abuse, it took about two years to finally let the kids be [and] feel safe around police, or around social workers, and it is just learned behavior... somebody that's been abused actually tries to leave, maybe 10 times before they finally do it. And that's me... [it] took over 15 years in the making, and then I just leave and nowhere to go, I go back home once everything is settled down," participant, Inuvik.*

Many women are expected to remain in the family and do not leave violent environments as a result. When women do leave and make it to a shelter, there is often pressure to return home after they have maximized the time allotted by the shelter for their stay. There is a temporary nature to shelters and women must consider where they will go afterwards. Many must return to their home, community and abuser, and so the cycle of violence often repeats. With the housing crisis in Inuit Nunangat and the increasing rates of violence, one of the important issues that emerged from the research was the lack of second-stage housing available in Inuit communities. In fact, there is no second-stage housing anywhere in Inuit Nunangat. This is an area that deserves urgent attention as many women and their children do not have a place to go after their time at a shelter is over. As one of the shelter director/assistant directors/ workers explained,

> *"We are working hard advocating the need for second-stage housing. [W]omen are stuck and can only go so far, which contributes to feelings of hopelessness. [We] need a place for them to go, [because there are] no housing facilities for the women to go to. We have the highest rate of violence against women in Canada," participant, Nunavut.*

Many shelters are attempting to respond to this issue by advocating for second-stage housing as well as extending the programs and services that they offer to women seeking respite from violence. While shelters are intended to offer immediate and emergency protection during critical stress periods, they also provide referrals to community services and programs and Inuit traditional healing practices, as well as developing their own. As one shelter worker explained,

> *"Our shelter is a place of refuge for the women. It plays an important role in the community and creates a safe haven for the women… it's a very nice shelter for people to stabilize. And I think sometimes people stay longer than they might need to. And that's okay, too. But, as soon as we feel someone's ready to move on, we help them move on, and then they've got to… But there's nowhere, there's nowhere to go. This is the last stop in Iqaluit," participant, Iqaluit.*

Overall, the data suggests that many women may return to their homes and abusive partners, and the cycle of abuse and violence starts again.

4.0.2 SHELTER SERVICES

In addition to providing a safe place to escape family violence, interviews with shelter staff revealed that the shelters offer a range of supports and services for women and their children. In many cases, the shelter acts as an access point of referral to an array of other services, including individual and group counselling, legal supports, and wherever possible, available housing. Programs that provide Inuit-specific approaches to healing from violence and abuse are also delivered by many of the shelters in Inuit Nunangat. The data presented below in Table 7 demonstrates the perceptions of shelter staff around the range of supports and services offered by the 13 shelters engaged in this study.

TABLE 7: DOES YOUR SHELTER OFFER ANY SUPPORTS FOR HEALING?

Inuvialuit Region	"Women's group to get women to open up and support each other" "Social services/mental health services send the women out to Yellowknife for healing." "We have a woman who comes in once per week, and she is residential school support counsellor, and we have a traditional sewing program."
Nunatsiavut Region, Newfoundland and Labrador	"We have talking groups and comfort people through activities like sewing, arts and painting."
Nunavut	"We have a wellness coordinator with 14 programs in the community on health and wellness, and a residential school support program." "We offer sewing and making sealskin mittens to help."
Nunavik Region, Quebec	"We are very supportive toward clients and we had a big healing workshop and brought healers in from different area. This was co-sponsored with the mayor's office, and open to the whole community."

While shelters offer tremendous supports relative to their capacities, there are also many needs and gaps in what shelters can offer to women who have experienced violence. The key challenges faced by shelter staff that emerged from the research include:

- being overworked;
- being underpaid,
- having a lack of cultural understanding and little to no meaningful training;
- language barriers; and,
- issues around confidentiality.

These five challenges all act as barriers to the quality of services provided by shelters. In turn, these barriers prevent shelter workers, and shelters in general, from meeting the needs of Inuit women seeking to escape violence. For example, one of the participants explained that there is only one counsellor who is rarely available, and because of this she can't receive the support she needs.

> *"I've been asking for help for 16 months now. So far, I haven't seen it. At least not the way I want to. I want ongoing sessions, frequent visits with someone I can talk to. Not just bi-weekly. Not every third week like the mental health [worker] has here," participant, Iqaluit.*

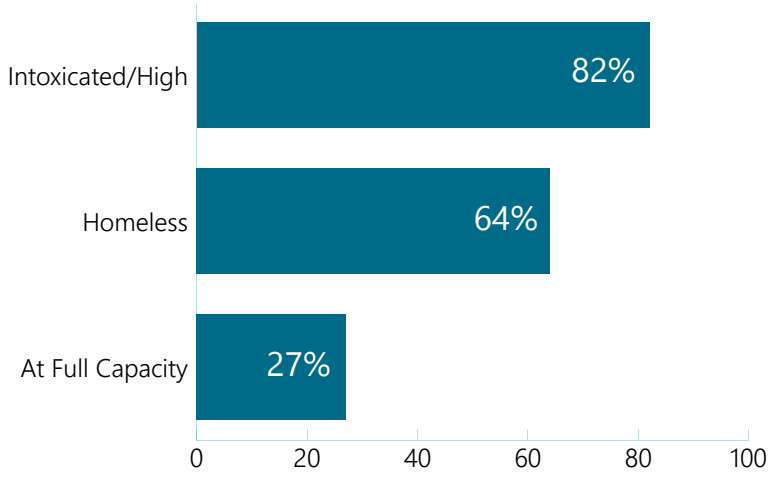
This quote is representative of many participants' broader feelings towards the availability of appropriate, Inuit-specific services for healing from the impacts of experiencing violence.

Furthermore, some shelters struggle with the challenge of balancing the immediate needs of women seeking respite from violence with the comfort and safety of staff and other users in overcrowded and under-resourced shelters. Based on surveys with shelter staff, Figure 11 below demonstrates the main reasons why a woman may be denied access to a shelter. For example, 82% of shelters that responded to this survey question suggested that alcohol intoxication and substance use was a primary reason for restricting access. Without the capacity to provide appropriate services for women who are intoxicated or using drugs, and to ensure the safety of other women and children in the shelter, some women may be denied access. Other reasons for denying access to shelters include when the shelter is at full capacity and when the woman may be homeless but not currently experiencing violence. One shelter worker described how the shelters attempt to work around their capacity and space challenges:

> *"Some of the kids sleep with the moms. And we have a couple of extra mattresses we throw on the floor, and if [they] really need to be here, we'll put a mattress out in the hallway," participant, Iqaluit.*

When shelters are already operating at maximum capacity, making space for additional women can be difficult. The data demonstrates that women who may have substance abuse issues and who are homeless face additional challenges to accessing safety from violence. This has serious implications for Inuit women who experience violence and raises questions around the extent to which these women's needs are being met across Inuit Nunangat and in urban spaces.

FIGURE 11: THREE MAIN REASONS DENIED ACCESS TO THE SHELTER (N=11)



4.1 Programs and Services: Main Gaps and Needs

The following section provides insight on the findings from discussion circles in which participants shared their perspectives on the programs and services available in their communities and expressed what is working and where there is need for improvement. The data presented in Table 8 (below) reflects the themes that emerged from this data based on 10 discussion circles with 70 community members (n=70) across the four Inuit regions and urban centres. The data pertains to the types of services and programs that are needed to support individuals, families and communities to move forward in their healing processes and to achieve improved levels of overall well-being. Table 9 also demonstrates the gaps in these services and programs as outlined by participants. Based on this data, key themes were distilled from the views of participants and ranked in accordance with how much emphasis participants placed on each of these needs and gaps. The three main areas which participants identified most frequently as needs and gaps are below.

1. Transition and second-stage houses/shelters
   The number and types of shelters offered is extremely limited in remote communities, particularly in communities without any supports for women experiencing violence. There is also an urgent need for transition and second-stage housing for Inuit women who leave shelters and need temporary or long-term housing. The need for transitional housing and more shelters is regarded as an intervention strategy to end cycles of violence, especially considering that many women have no choice but to return to their homes and communities because there are no housing options available.

2. Inuit-specific counselling
   The influence of alcohol and drug abuse is directly related to the incidence of violence, yet services in this regard are lacking. Participants mentioned throughout many discussion circles that Inuit-specific counselling services and on-the-land therapy are needed to adequately support people living with addictions.

3. Youth services
   There is an overall lack of support services for Inuit youth. Participants discussed that more early intervention programs and training through workshops are required to support youth in learning about healthy relationships and building healthy lives. Youth in both remote communities and urban centres need spaces to "hang-out" where they can interact socially with their peers and have access to food and safety.

TABLE 8: PARTICIPANT PERCEPTIONS OF NEEDS AND GAPS IN PROGRAM AND SERVICE DELIVERY

Gaps and Needs
▪ Shelters in remote communities
▪ Transitional housing
▪ Alcohol and substances treatment services
▪ Land-based programs
▪ Land-based therapy
▪ More Inuit-specific counselling services
▪ Access to traditional foods
▪ Violence prevention and health promotion workshops and training
▪ Transportation from communities to urban centres
▪ Job skills and training
▪ High health and social worker turnover
▪ Early childhood violence prevention
▪ Safe places for youth

Many participants described the need for holistic programs and services that address the social challenges in Inuit communities by rebuilding access to cultural practices and identities, as well as social relationships. Specifically, supports are needed to address many of the health issues that are related to violence against women and girls in communities, such as healing and counselling programs directed at alcohol and substance abuse and intergenerational trauma. As one participant explained, programs are needed:

> *"Not only just for counselling. But for healing. I think they might need to offer programs to learn economics and budgeting courses or sewing groups. There's not enough social programming to keep the community enlightened. There's not enough social programming to keep the community spirit alive with happiness," participant, Nain.*

Participants emphasized that it is crucial that these supports be Inuit-specific and integrate activities, workshops and training that reconnect Inuit with the land and Inuit culture.

Currently, the quality of services provided in many Inuit communities for women who have experienced violence are problematic and substandard. The following table outlines the perceptions of discussion circle participants on the main areas of program and service delivery that need to be addressed. The study participants expressed further concerns around the quality of services

provided more broadly for women by government, organizations and agencies across Inuit Nunangat. Specifically, the main three barriers to delivering high quality and responsive services that the participants suggested were: human resources, funding, and improved policies.

TABLE 9: PARTICIPANT PERCEPTIONS OF THE QUALITY OF SERVICES PROVIDED

Human resources	Understaffing: Mental health and addictions work is understaffed (in some communities there are three staff for a population of more than 1,300 people).
	Lack of experience: New hires are often newly graduated from post-secondary education and outsiders to the region with little knowledge of Inuit culture and society.
	Lack of cultural competence: Providers discussed that frontline workers from outside the region could be a barrier to effective service delivery due to their lack of cultural understanding of the dynamics of the region when working primarily with Inuit women and families.
Funding	Limited funding: There is limited funding available for wellness initiatives and often the funding that is available is not used to engage with youth.
	Non-Inuit specific programming: Programs are designed to respond to crisis rather than prevention. Connecting Inuit with restorative justice programs is lacking.
	Lack of transition homes: Supporting women to transition into short- and long-term housing is problematic. There are no transition homes in Inuit Nunangat which is a barrier to addressing women's needs.
Improved policies	Restrictive policy: Policy that informs practice and is 'top-down' does not meet the actual needs of communities. Policy is needed that integrates cultural practices such as on-the-land training and learning how to harvest and prepare traditional foods.
	Non-Inuit shelter staff: Staff at shelters that are not known within the community may cause fear and distrust, which is intimidating and deters Inuit clients from utilizing services.
	Lack of day shelters: When overnight shelters are not available, day shelters are only sometimes available. There is a need for secure places to be available throughout the day for respite.
	Culturally appropriate training: Child abuse training for RCMP officers, social workers and other support workers is needed.
	Need for self-determination: Localized approaches that empower community-organized programs to promote feelings of safety and security should be promoted for communities to lead themselves.

The lack of services and low quality of services and programs that are provided are of concern among Inuit women who are survivors of violence. This is highlighted by one of the discussion circle participants who explained,

> *"But for someone like me, I need to learn how to have a stable relationship. I don't even have a routine of my own. The shelter right now is running my life. Family services are running my life. They say everything has to be on paper. What about life? Life is not about material [on paper]. I've been asking for help for 16 months now. So far, I haven't seen it. At least not the way I want to. I want ongoing sessions, frequent visits with someone I can talk to," participant, Iqaluit.*

Another participant explained the limited opportunities for Inuit-specific and culturally appropriate training that are currently offered in the service area in which she works.

> *"There's been a few people here on our desk. They're lovely women. You know, they're church-going people, and they're kind. But, they're very linear in their approach and they cannot seem to understand that their job is to just listen and care," participant, Iqaluit.*

Based on the data gathered from the discussion circles, human resource constraints, limited funding and a lack of Inuit-specific policies are acting as barriers to effectiveness of services and programs provided for women who have experienced violence.

4.2 CONCLUSION AND RECOMMENDATIONS

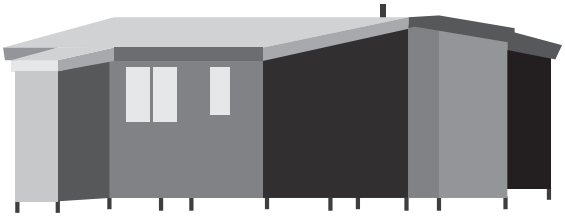
This chapter explores the perspectives of shelter directors/assistant directors/workers as well as Inuit women in communities about the adequacy of current supports for women and their children experiencing violence. The data demonstrated several gaps and challenges that prevent programs and services from effectively addressing the needs of Inuit women as they seek to escape violence, find safe housing and access resources to heal and begin rebuilding their lives.

A key consideration is how to bridge the significant gaps between the needs of Inuit women and their children and the services currently provided. Those participating in the study have identified several critical needs of community members, such as Inuit-specific counselling, youth services, and increased availability of shelters and transition houses. These needs are much more complex than simply addressing services at face value – they require Inuit community perspectives and

priorities to provide culturally relevant and community specific pathways to healing and well-being. Effective supports for Inuit youth, for example, might entail land-based therapy, access to traditional foods, and youth centres that are consistently and reliably staffed. Additionally, to be effective counseling services should integrate healing programs and social programming as well as provide transportation to improve access to these community supports.

The research conducted for this study points to the recommendations below. Numbers 5 - 7 are specific to addressing the service and programming needs of Inuit women and their children who are experiencing or are survivors of violence.

5. Provide adequate, sustainable and flexible funding in Inuit communities for emergency shelters serving Inuit women and children experiencing violence.
    a. The Government of Canada must reverse its policy that excludes Inuit communities from accessing operational funding for shelters through the Family Violence Prevention Plan (FVPP). Shelter funding must be made available to Inuit communities at a minimum equitable amount to that provided for shelters on First Nations reserves.
    b. Funding should support the operation and maintenance of existing shelters and the development of new shelters in consultation with communities.
    c. Eligible costs for shelter funding should include: general operations and maintenance; staff training, retention and professional development; and, programs and supports responsive to the needs of Inuit women.
6. Examine the feasibility and community readiness for transition and second-stage housing services in Inuit Nunangat in consultation with Inuit organizations, shelter directors, service providers, and survivors of violence.
7. Conduct a needs assessment to determine the gaps in culturally safe services for Inuit women experiencing violence in urban centres, including the need for Inuit-specific emergency shelters and transitional housing services.



CHAPTER FIVE:
THE COST OF VIOLENCE TO THE HEALTH CARE SYSTEM

The third objective of the study was to promote a better understanding of the costs of gender-based violence on the health care system to improve the effectiveness of public policy and regional and territorial health initiatives. For individuals experiencing violence, the cost over the lifespan is both immense and immeasurable, and includes significant financial, economic, social and health hardships. As an individual seeks support from and interacts with the federal and provincial/territorial health, legal, policing and social systems, structural costs are incurred that draw financial resources away from other important priorities and strategic investments. Violence against women and girls is preventable and prevention-focused programs and services are recognized to be less costly than the outcomes of violence (Patel and Taylor, 2012; Max et al., 2004; Day, 1995). These outcome costs include: the direct costs to the health care system; the indirect costs of long-term mental and physical health issues resulting from violence; the economic costs of lost wages and productivity; the costs to the policing and legal systems of responding to violence; and, future intergenerational effects on health. While it is difficult to measure the total cost of violence against women and girls, Health Canada (2012) estimated that the direct medical costs of violence against women were $1.1 billion a year.

In Inuit Nunangat, the high rates of violence coupled with the lack of shelters and other support services suggest that the costs of violence are much higher than the other regions of Canada. These costs are exacerbated by the limited health care options in most Inuit communities, as many communities have a health centre but no emergency or serious condition health care services. As a result, the shelter staff, community members and key informants participating in this research indicated that many women experiencing violence in Inuit Nunangat must rely on the use of medevac services to receive emergency and rehabilitative health care outside of their home community. In relation to this unique health care context, this chapter explores the costs associated with violence against Inuit women and girls and outlines the challenges of measuring these costs to the extent possible given limited data availability.

5.0 Health Needs and Realities

The realities of health care in Inuit Nunangat differ greatly from southern Canada. Due to its remote location, large geographic area and small population size, the people living in the four regions of Inuit Nunangat do not have access to the same health care services as found in other areas of Canada. Most Inuit communities are served by health centres. Doctors are available in larger regional centres and specialized services are often only offered in southern centres, requiring patients to travel great distances, geographically and culturally, to access these services. As a result, there is often a delay in – or even lack of access to – the following:

- disease detection;
- emergency services;
- follow-up;
- rehabilitation;
- palliative care;
- services that reflect Inuit culture and language; and,
- social supports for patients.

With a low-density population spread across a vast territory, the distances to health care services are a significant challenge in Inuit Nunangat. Located in Iqaluit, the Qitiqtani General hospital is the sole hospital in Nunavut (McDonnell et al., 2019). With only one hospital, Nunavut must rely on hospitals located outside its own territory through the use of scheduled and unscheduled/emergency (medevac) flights (Nunavut Tunngavik Incorporated, 2008). McDonnell et al., 2019, identify that the "Nunavut healthcare system is the most geographically stretched north-to-south healthcare network in Canada, leaving the system fragmented both administratively and operationally: patients from the Kitikmeot regions access hospital care in Yellowknife (Northwest Territories), Edmonton (located in Alberta) and sometimes Vancouver (British Columbia); patients from the Kivalliq region are predominantly transferred to Winnipeg (Manitoba); and patients from the Qikiqtaaluk region most often travel to Ottawa (Ontario) for hospital and specialist care not available in Iqaluit (3)." Environmental factors across the remote regions of Nunavut, including severe weather conditions, may delay patients' ability to travel and seek timely (and in some cases critical) medical care (McDonnell et al., 2019).

In 2017–2018, the territorial operations and maintenance budget for the Department of Health was $353,387,000 (Health Canada, 2019). It was found that, one third of the Department's total operational budget was spent on costs associated with medical travel and treatment provided in out-of-territory facilities (Health Canada, 2019).

Despite these findings, the health care systems across Inuit Nunangat continue to rely on medevac services to southern urban centres to provide many emergency or acute health care services with direct costs to the patient and the system. In Nunavut, if a resident is enrolled in the Nunavut Health Care Plan, the cost of the medevac service, less the one-way $125 deductible, is covered. The Non-Insured Health Benefits (NIHB) program and the Extended Health Benefits (EHB) program may

cover the $125 one-way deductible. If an individual is not enrolled in the Nunavut Health Care Plan or is a visitor to Nunavut, the fee for the cost of the medevac flight is issued to the individual – the cost can be up to $40,000 depending on location (Government of Nunavut, n.d.). The other Inuit regions operate under similar medevac policies.

5.1 Acute Care Hospitalization Rates

Acute care hospitalization rates for Inuit are twice as high as for non-Indigenous Canadians (Statistics Canada, 2016). The second most common cause of acute care hospitalization for Inuit is "injuries, poisoning and other consequences of external causes," the category in which injuries sustained due to violence are categorized (Statistics Canada, 2016). Compared to the non-Indigenous population, the rate ratios for hospitalization due to injuries are two and a half (2.5) times higher. A study that quantified the life expectancy gap between Inuit in Canada and the general population found that between the years of 2004-2008, injuries accounted for 21 per cent of the life expectancy gap for Inuit women (Peters, 2013). In 2015, Statistics Canada projected the average life expectancy for Inuit women to be 73 years in 2017, compared to 83 years for Canadian women in general – a significant and persistent difference that represents length and quality of life outcomes (Statistics Canada, 2017d).

5.2 The Cost of Intimate Partner Violence in Canada

Violence against women can undermine health services by re-inflicting injuries that must be treated repeatedly and/or treating injuries only when they are severe enough to require hospitalization (Morris, 2016). While the total financial costs to the health system are difficult to quantify, "The Department of Justice calculated that in 2009, emergency room visits by female victims of spousal violence cost a minimum of $4.4 million and acute hospitalization costs were $3.5 million," (Morris, 2016). Furthermore:

> *"The direct costs of intimate partner violence in Canada was $1.7 billion in 2009, which includes both costs to the taxpayer such as health care, policing and criminal justice system costs, and costs to the victim such as lost wages, medical expenses not otherwise covered, loss and damage to property, and losses to third parties, such as employers and family members, but does not include indirect costs such as pain and suffering. The direct costs of sexual assault are over $546 million per year," (Morris, 2016: 1).*

Beyond the direct costs of violence, the Department of Justice estimated the total economic impact of spousal violence in Canada to be more than $7.4 billion in 2009 (Zhang, et al., 2017:x).

In the context of the lives of Inuit women, calculating the cost of gender-based violence is made more difficult by both the limited availability of quantitative data and the inadequacy of Inuit-specific data (Jackson-Pulver et al., 2010:47). These two challenges have a significant impact on the ability to assess the actual direct and indirect costs of violence against Inuit women in general and specifically for the health care system. In effect, the lack of high-quality data that is disaggregated by gender and Inuit identity creates an incomplete picture of the health issues experienced by Inuit in Canada and the economic effects of violence.

Key data issues for the Inuit population include:

- lack of funding and infrastructure to conduct Inuit-specific population-level survey research;
- confidentiality and validity in small sample sizes;
- lack of an Inuit identifier in most provincial and territorial administrative data;
- lack of Inuit-specific rather than geographically-based socio-economic data and information on health determinants;
- difficulties accessing university-based research funding;
- financial support for community-driven applied research; and,
- lack of data on urban Inuit populations.

5.3 The Cost of Intimate Partner Violence in Inuit Nunangat

Based on available data, the following list provides an outline of the rates of violence and related estimated costs from 2013-2015 across Inuit Nunangat.

In 2014, Nunavut recorded the highest rates of violent victimization among the territories. In that same year, the Government of Nunavut spent $110,296,000 on justice and $317,335,000 on health (Nunavut Department of Finance, 2016).

The 2015 Nunatsiavut Budget Act allocated $21,363,642 for the Department of Health and Social Development and $15,361,704 for the Department of Nunatsiavut Affairs, which includes criminal justice, for the 2015-2016 fiscal year (Nunatsiavut Government, 2015).

5.4 Challenges in Retrieving Medevac Data

A medical emergency evacuation occurs when an individual is in immediate need of urgent care at a better-equipped medical facility. As McKenzie (2015) points out, "While medevac refers to emergency evacuations, medical transfer denotes the practice of transporting patients on a commercial airline," (81). For remote communities, this means the use of expensive and logistically challenging air transportation services. This raises the question of exactly how expensive it is for women and children to be transferred out of remote communities using medevac services because of violence. Based on the data gathered from shelter workers, key informants, service and program providers, and community members throughout this study, a clear challenge to calculating the cost of medevac services emerged: there is little if any data available on the medevac costs associated with incidences of violence. One of the research participants explained that the Government of Nunavut,

> *"ha[s] access to the medevac database however its records are more structured for billing purposes, the patient's diagnosis (leading to medevac) is recorded but it's not always precise or reliable," participant, Nunavut Department of Health.*

The Canadian Institute for Health Information (2010) data demonstrates that in 2010, the three territories experienced the highest outflow of patients as a percentage of total hospitalizations, with the highest per cent of outflow recorded at 58% in the Northwest Territories, followed by 21% in both Nunavut and the Yukon. In comparison to the recorded rates in the provinces, except for British Columbia, the rates in the territories are more than five times higher.

According to Cameron, while there is little quantitative data available regarding medevac costs, an important finding regard is:

> *"An important finding of the present study is that most respondents perceived a negative psychosocial impact on Inuit who travel south for medical care. The interviews revealed that no official programs have yet been developed to adequately meet the psychosocial needs of Inuit patients who require medical transfer to the south and their families," (McKenzie, 2015: 85).*

Despite this data limitation, study participants expressed many concerns regarding the costs of medevac services associated with violence against Inuit women and girls. It is also important to remember that medevac services represent only one direct cost out of all the economic impacts of gender-based violence. As one of the participants explained, there are many costs associated with experiencing violence in Inuit Nunangat:

> *"But I think [medevacs] are only a small part of the total cost. The costs through the criminal justice system, enormous, like it's almost immeasurable. Exponential costs. Like, huge multi-million. Our whole social work program, our foster care program, our criminal justice system," participant, Iqaluit.*

Another participant in Cape Dorset further discussed the issue of medevacs from the perspective of remote communities:

> *"We have medevacs for suicide, attempted suicide and yes [it's] frequent. If somebody's beaten, stabbed or shot, they're medevaced out of the community. And it's awful that we're even talking about it [but] it's prevalent. I mean it does happen. Lots of the violence that we see isn't that extreme, if it's something we can fix, they wouldn't be medevaced necessarily. [but] there is also scheduled flights out. So, say somebody came in and they had their arm broken by their spouse. They could go on a scheduled flight being escorted by a family member to see a physician. So, medevacs [are] not the only way to transport a patient, or a community member that's been hurt," participant, Cape Dorset.*

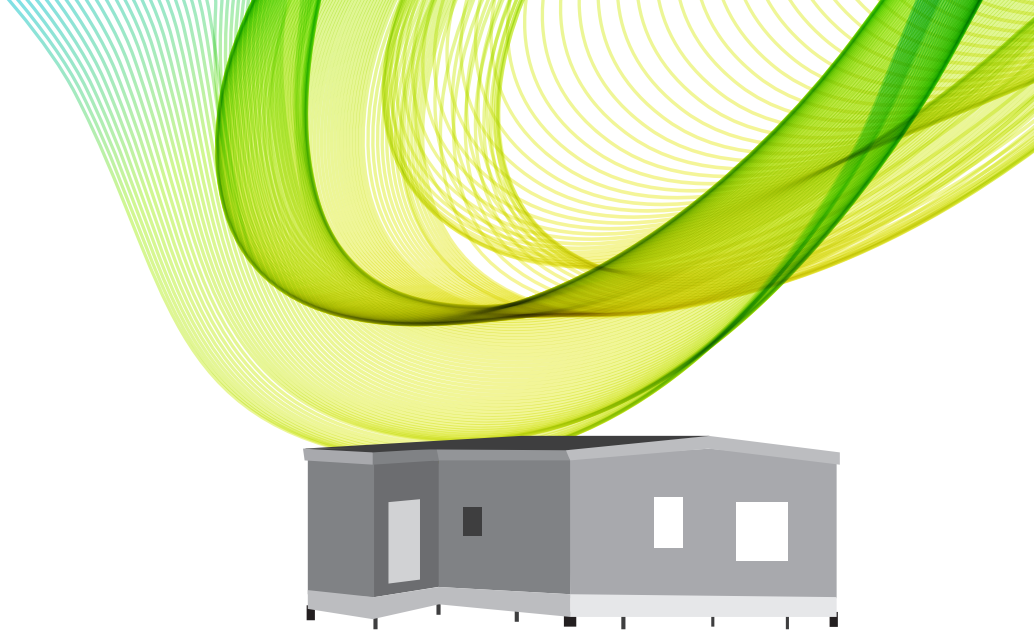
Accurate and reliable data around the cost of medevac services related to violence against women and girls is not readily available or accessible. There is a need to gather and compile this data in a system that is both current and available to the public. These specific types of data are important and necessary for supporting policy researchers and analysts in their work to make evidence-based recommendations to inform policy around strategic and cost-effective services, supports and programs related to gender-based violence across Inuit Nunangat.

5.5 Conclusion and Recommmendations

Violence against Inuit women and girls creates numerous economic impacts for provincial and territorial health, legal, policing and social services. Given the geographic remoteness of Inuit communities and the lack of local emergency and acute medical services, one of the key costs associated with violence across Inuit Nunangat is the provision of medevac services. Medevac services are frequently necessary to ensure that Inuit women who have experienced violence can receive appropriate medical and rehabilitative care. The cost of each medevac transportation can be up to $40,000 each way (Government of Nunavut, n.d.). On top of the direct cost of medevacs, other costs related to violence include: hospitalization and direct medical expenses; long-term mental and physical treatment; economic impacts such as lost wages and productivity; and, policing and justice services for responding to violence. While data is not available to calculate the current total economic cost of violence against Inuit women and girls, the data that is available suggests that in Inuit Nunangat this figure is likely to be as much as hundreds of millions of dollars. Although this chapter has focused on the economic costs of violence, it is important to remember that the human costs to Inuit women and girls of gender-based violence include pain, suffering, and loss of lives.

Based on the quantitative data available and the qualitative data collected from research participants, the recommendation specific to this chapter are:

8. Collect data on the use of medevac and emergency health services that is disaggregated by gender and cause to support increased understanding of the prevalence and cost of violence against women and girls in Inuit communities.
9. Undertake research to estimate the economic cost of violence against Inuit women and girls in Inuit Nunangat at the individual and systemic levels.
10. Prioritize upstream investments in prevention, intervention, postvention initiatives to both enhance the quality of Inuit women's lives and reduce the hard-financial costs of the highest rates of violence in the country.



CHAPTER SIX

HEALING AND BUILDING HEALTHY RELATIONSHIPS

As a community-based study, the final objective of the research was to map community action that is aimed at developing awareness of the issues related to violence, as well as the strategies intended to reduce the negative impacts of violence experienced by Inuit women and girls. While the previous chapters outlined the many forms of violence against Inuit women and girls, discussed the determinants of this violence, and highlighted current needs and gaps, this chapter is focused on exploring the programs and services that were deemed by research participants to be working. This chapter provides an overview of the programs and services across the four Inuit regions that appear to be effective in both supporting Inuit women and communities in their healing processes and building capacity for establishing healthy relationships. These programs and services are discussed in relation to the elements that make them successful, and recommendations are made on the development and maintenance of Inuit-specific programming to support healing and healthy relationships across Inuit Nunangat.

6.0 Resilience and Resurgence

The systems of colonialism remain in place in Canada with ongoing effects that pose considerable challenges for Inuit identity, language and cultural practices. In many ways, the pervasive negative impacts of colonization are directly related to the alarmingly high rates of violence experienced across Inuit Nunangat. The loss of Inuit autonomy reinforced through the residential school system, relocation of communities and destruction of natural resources has adverse effects on Inuit culture, sense of belonging, self-esteem and social cohesion that are linked to interpersonal conflict and family violence. At the same time, the inadequate provision of health and social services throughout remote Inuit communities produces further negative consequences for quality of life, as well as hard financial costs to the provincial and territorial health and justice systems.

Despite the significant and ongoing challenges, the research findings point to the resilience of Inuit communities, and the healing that is currently taking place through the revitalization of Inuit cultural activities and land-based practices. The research participants described the most successful and effective strategies for reducing violence as localized educational awareness, and Inuit-specific training and counselling. Figure 12 (below) illustrates the five factors that were most commonly identified by participants as the areas that should be prioritized to enhance individual and community well-being, and to foster healing from the many impacts of violence. The data analyzed in this section was collected from all groups of research participants, including shelter workers, key informants, service and program providers and community members.

FIGURE 12: KEY AREAS TO SUPPORT HEALING, INUIT NUNANGAT AND URBAN CENTRES

6.0.1 Develop Awareness through Counselling Services and Workshops

Research participants expressed that effective educational awareness for the community should focus on identifying forms of violence in their community and personal lives and appropriate means of navigating violence. For example, utilizing social media for promoting awareness was deemed to be impactful and an appropriate means of reaching community members. Education was regarded as successful when centered on learning the truths about colonization, addressing the lifelong impacts of childhood adversities and building awareness about violence. Participants further suggested that individuals who had already started healing themselves and learning about their own perceptions could be effective helpers to others. They also described a need for health promotion resources to include tangible facts about what and where services were offered in the community. As one of the participants explained,

> *"We worked with family services and had funding one year to bring 20-odd organizations together within Iqaluit, such as health and education, to talk about violence prevention and to look at what things we needed to put in place. And one of the big things was media. Getting the message out there about violence," participant, Iqaluit.*

The lack of Inuit-specific resources and programs grounded in Inuit cultural values and available in Inuktitut was described by participants as a barrier to accessing services. In turn, the services that have been deemed effective in Inuit communities are those that incorporate Inuit culture, Inuktitut and *Inuit Qaujimajatuqangit* into their design and delivery. One participant in Clyde River used Ilisaqsivik as an example of a successful social program that was developed from Inuit ways of knowing and living:

> *"The social work program called "Our Life Journey" in Ilisaqsivik is a social program that is taught in Inuit ways of knowing and in the Inuit language. It teaches social workers how to be Inuit social workers."*

Other important characteristics that make this program effective include: trauma-informed practices; incorporating land-based healing practices; and, support and recommendations from Inuit initiatives and organizations.

6.0.2 Land-based Resurgence

Being specific about what services entailed and making those services approachable and accessible to community members was regarded as a measure of success. Participants discussed that it was important for service providers to recognize the past treatment of Inuit with respect to colonization

and assimilationist government policies. If colonization dispossessed Inuit communities from land and culture, "then resurgence is about reconnecting with traditional land-based and water-based cultural practices," (Corntassel, 2012: 89). The need for continued support for land-based programs was consistent across Inuit Nunangat. There is a lot work in this area currently and all regions have on-the-land programs that focus on Inuit approaches to healing for all ages and genders. These types of programs can be especially important for Inuit living in urban centres who are often disconnected from their homelands. As one urban participant explained:

> *"But even for all of our programs we do run, retreats or camps, especially for the youth program, and youth and transition programming, [the] youth need to be on the land to do Inuit studies. Baker Lake, they do a full outdoor camp, it's actually tailored specifically for our youth that we bring," participant, Ottawa.*

6.0.3 Build Youth Centres

Education of youth to strengthen cultural identity and support self-esteem was discussed as an important programming area that needs immediate attention. Participants discussed the critical role of the public-school system in adding knowledge about consent and body autonomy in their general curriculum, and how starting these practices with youth can reduce their risk of experiencing violence. Overall, it was suggested that youth need dedicated safe spaces where they can interact with their peers, build healthy social relationships and access programming and services relevant to their needs. Participants explained that providing food as an incentive for youth to gather and supporting members such as LGBTQ individuals would be beneficial. As one participant described,

> *"Emotional literacy has been something that's been really important. If they could find a sub community, like, LGBTQ community ended up being quite a positive space for people that were dealing with trauma. 'Cause all of a sudden, there's these resources online that are saying, 'If you find other members of this community, this is someone you can talk to.' And it can just be talking about general stigma, and then it could kind of dive into something deeper. And mentorship programs have been proven to be very, very helpful," participant, Iqaluit.*

6.0.4 Create Transitional and Second-stage Housing

Consensus emerged among participants that an important aspect of healing for Inuit women and children who are survivors of violence is access to safe and secure temporary and long-term housing. As previously detailed in this report, transition homes are not available in Inuit Nunangat and there is limited access to any type of temporary housing, especially because of the housing crisis. Participants were adamant that more services were required to support women's transitions into independent living while still being able to access ongoing emotional supports. For Inuit women to live an independent life away from abusive relationships, housing supports are essential to facilitating the development of self-empowerment and financial autonomy. For example, one of the participants explained:

> *"[if the shelter is full] then we call Social Services then they would have to call [to] get in contact with the on-call social worker. And they would probably put them up in the hotel, or wherever. And if there's children involved, the children would be included," participant, Nain.*

6.0.5 Access to Country Food

Healing from violence is supported in Inuit communities when an understanding of violence as a community problem rather than an individual one, is promoted. As part of the healing process, the need for engagement with one's environment is important for well-being. Participants discussed food as an important tradition that generated positive activities that improved the mindset of community members. Food-related traditional practices such as clam-digging, making and sharing tea, berry-picking, walks on the land, and building fires were described as activities that provided a deeper sense of social and cultural connections and supported healing from violence. Engaging extended and immediate family members in these harvesting and on-the-land activities was understood to be critical for the healing journeys of people impacted by violence. Participants explained that access to country food promotes holistic healing at the individual, family and community levels. One of the participants in Nain explained,

> *"I think that's a big part for the issues [here], it is the food security. Or food insecurity. This... that would alleviate a lot of the problems here, is the food security. If people were able to... So, could some of that be getting access to the land, or getting access to, you know, hunting/fishing, or is it more, is it more than that?"*

6.1 Programs and Services for Individual and Community Healing

Throughout the research, activities were identified as supportive of healing in Inuit communities such as drum dancing, hunting, arts and crafts, cultural on-the-land based programs, berry picking, soapstone carving, support circles for women and violence prevention. The data presented in Table 10 (below) demonstrates the specific types of programs and services that are offered in each Inuit region – while many are similar in nature, they tend to vary in scope. For example, various types of counselling services, such as life skills workshops, job and skills training and housing referrals are offered across all four regions. The overview of information presented in this table highlights the types of activities that are currently offered and how these activities are connected to social, emotional and cultural supports that are meeting individual and community needs for healing.

TABLE 10: TYPES OF PROGRAMS AND SERVICES OFFERED FOR HEALING, QRG ANALYSIS (2018)

Inuvialuit	▪ Counselling and referrals to medical services and mental health services ▪ Case-by-case advocacy for women; partnering with others to write letters, e.g., for housing arrears ▪ Project Jewel is an on-the-land program which is client-centered and client-driven. This program offers formal wellness planning, culturally relevant healing, and after care planning. ▪ Talking/connection/referrals for counselling; safety planning (best solutions available); ambulance for substance abuse or medical; life skills (basic budgeting, cooking/baking, hygiene) ▪ Community outreach including suicide awareness, family violence and parenting programs; providing help with applications, e.g., driver's license ▪ Emotional support and elder support network in the evenings over dinner ▪ Young parents' program (adults-only sessions and families together); women's groups for self-care and healing; awareness of violence; pottery; sewing and jobs skills; legal services (prep for court, statements, etc.); referrals to counselling, housing and support ▪ Presentations and workshops; outreach van for harm reduction

Nunatsiavut	▪ Individual short-term counselling; life skills; job skills training; parenting skills; housing referral; recreation services; youth services; tobacco control; sexual violence prevention; residential school survivors' program ▪ Mental health services; medical services ▪ Connect people to legal support and addictions counselling; family assistance ▪ Cooking and sewing classes and a youth drop-in centre
Nunavik	▪ Individual short-term counselling; addictions counselling; medical services; mental health services; financial assistance or welfare; life skills; job training; housing referral; casework ▪ Advocacy on behalf of Inuit women ▪ Crisis telephone line
Nunavut	▪ Safety planning in relation to general health concerns; medical services (e.g., x-ray technician); medevac services for people who have been injured, including victims of violence ▪ High school education and counselling ▪ Personal safety training (CPR, First Aid) ▪ Programs for parents and young children with healthy snacks and after school programs ▪ Monthly elders' gatherings ▪ Community clean up ▪ Help with résumés ▪ Pool nights ▪ Women's space ▪ Strengthening families program ▪ Recreation (swimming, yoga, photography and on-the-land program) ▪ Taxi vouchers to access supports and programs ▪ Drop-in centre; suicide awareness program that offers a trauma-informed practice for people working with youth

When discussing service providers, participants emphasized the importance of employing people who are from the region and thus aware of local needs and culture. "Northern" and "southern" or "Inuit" and "non-Inuit" emerged as tensions in several of the discussion circles and became evident in the interviews with service and program providers and key informants. For example, while participants agreed that Inuit need to be hired, many expressed a preference for Inuit employed in social services to work outside of their home communities due to concerns around trust and confidentiality in the small and close-knit communities. Yet, even when service agencies intend to hire Inuit staff it can be challenging to fill these positions, particularly given the remoteness of

many communities and the limited number of trained Inuit health and social workers. One of the participants explained it this way:

> *"Of people who can't speak their own language. I mean, people are angry here because we don't have enough Inuit staff who speak Inuktitut. We have a couple. And that overloads them, and that's not necessarily their job, to be the counsellor or client support worker. So, it's starts to get quite intense. I have said to them, we're doing our very best to hire people," participant, Iqaluit.*

The programs described by participants as successful can adapt to the changing needs of clients and present information through diverse mediums and mobile service providers. For example, some participants mentioned that shelters and health centers can be difficult to reach if the support required is located outside of the community. The services and programs that were regarded as effective by participants tended to be Inuit-specific and provide adequate access to Inuit counsellors, mentors, nurses, and social workers. While there are many specific programs that are unique to each region, the following represent a selection of programs and organizations that were shared by participants as best practice models.

1. Project Jewel
   Based in the Inuvialuit region, this is an on-the-land wellness program that builds in after-care support for its participants. It strives to provide services that are client-driven, culturally sensitive and relevant. According to one participant in the region, "In this program we offer formalized wellness planning, culturally relevant after care plan." For more information about this program, please see: http://www.irc.inuvialuit.com/program/project-jewel.

2. Youth Drop-in Center
   Located in Nain, Nunatsiavut, this centre is unique to the region and offers youth a safe place to seek respite during the night. Since violence against youth and violence against women can often co-occur and youth living in violent homes are at a heightened risk for experiencing maltreatment, having safe places of refuge are critical. The centre provides an opportunity for young people to spend time with other youth in a non-judgmental environment where they feel safe. It also gives them access to referral services to which they may otherwise not have access. The facility offers a wide range of activities, including access to the Internet and résumé writing support. The centre is open from 8:30 p.m. to 8:30 a.m. It employs four full-time and two casual call-in staff and supports high school students needing to get volunteer career hours. Every night there are approximately 30 youth at the centre. Those 15 years and under may stay until 10 p.m., while those 16 to 30 years are

welcomed to stay all night. Quiet time starts at midnight on weekdays and 1 a.m. on the weekends. Most nights the youth cook a meal together and bake bread.

3. Circles of Accountability
   Located in Nunatsiavut, this unique program is based on restorative justice models and works with male sexual offenders. As one of the participants in Nunatsiavut explained, this work is focused on "offenders to reduce reoccurrence of sexual offences. Because what we identified was that there are professionals throughout the region who are comfortable working with victims, but there are very few who are comfortable, or are experienced in working with offenders. And that really is a specialty in and of itself and that if we want to reduce incidence of sexual violence, then we need to prevent offences from happening. [The] work is [based] on models of process, so, circles of support and accountability developed out of the Mennonite Central Committee [MCC]." For more information about Circles of Accountability, please see: https://mcccanada.ca/media/resources/581.

4. Family Connections
   Based in Nunatsiavut, this program enhances the well-being of families by providing them with support to address their specific needs. The program is a multifaceted community-based service program that works with families in their homes and in the community by providing tailored interventions. Individualized family intervention is geared to increase protective factors, decrease risk factors, and target family safety and well-being. Participation in this program is voluntary and families themselves identify areas in which they would like some help. Support that the program provides includes, but is not limited to, the following: helping families to more effectively budget their money; connecting families to services and supports both within and outside their community; participating with families in community programs and events; spending time with families to support them during times of crisis; availability in family emergencies; assistance with housing and other applications; and supporting in communicating and working with the Department of Children, Seniors and Social Development (CSSD) to help preserve and/or reunify families. Parents themselves can self-refer to the program or a third party (often a service provider) can complete a referral to the program on their behalf.

5. Ilisaqsivik
   Located in Clyde River, Nunavut, this is an award-winning community-based and initiated Inuit organization. It is dedicated to promoting community wellness by providing resources and programming that help families and individuals find healing and develop their strengths. As one of the participants in Clyde River explained, "Ilisaqsivik provides programming that helps the community and also serves surrounding communities to find healing and enhance health promotion. There are many programs offered at the organization but 'Our Life's Journey' program that trains counsellors in one of the first of its kind in Inuit Nunangat that focuses on Inuit-specific

social work and traditional Inuit knowledge (IQ)." For more information, please see: https://ilisaqsivik.ca/programs-and-services.

6. Qarmaapik House
   Located in Kangiqsualujjjuaq, Nunavik, Qarmaapik House was established as a non-profit, community-led, multi-use place for families. It was developed in response to high rates of child placements under youth protection and large gaps in the coordination of social services. To reduce the intervention of the provincial youth protection system for children aged 0 – 17, this alternative, community-driven approach, builds on existing community strengths by offering a safe, culturally appropriate space for families in crisis by placing children, families and the community at the centre. Developed to support the well-being of children and their families, Qarmaapik's mission is to have a place where parents or guardians are supported to meet their children's needs better, to improve the bond within their family and to instill traditional Inuit family values in the community (Emudluk, 2017).

   The Qarmaapik Board of Directors has established a formal written understanding, in the form of a Collaboration Agreement, with Youth Protection Services and the Nunavik Regional Board of Health and Social Services so that all parties have a shared understanding of protocols and procedures (ibid). Representatives from all three organizations meet monthly to ensure smooth collaboration between all parties. There are two central workings of the Collaboration Agreement: prevention and safe house. The prevention component operates during regular working hours (9 a.m. to 5 p.m.) and the safe house component is a 24-hour service (ibid).

   To assist families in learning and improving their capacity to be responsible and capable parents, Qarmaapik House offers programming to educate parents on the fundamentals of handling and responding to crisis situations without succumbing to conflict and violence (ibid). Qarmaapik House also engages a multidisciplinary team [health services, social services, Director of Youth Protection (DYP), CLSC; local community services centres; parents; Elders; Kativik Regional Police Force; Ulluriaq School; and, Nunavik Child and Wellness Network] to address the underlying causes of family conflict and family breakdown. It also provides counselling, workshops and temporary lodging for families to spend up to seven days with access to 24-hour support. After the seven-day period, if clients are unable to resolve their problems, their files are then handed over to youth protection.

   Other prevention and support services for parents, children and youth include a drop-in centre, on-the-land excursions and cultural activities. There is also space for a pediatrician to provide medical check-ups, vaccinations, and perinatal services to 0-5-year olds. A public health/wellness coordinator organizes awareness and prevention activities for the public.

Additionally, Qarmaapik offers courses in cooking, fetal alcohol spectrum disorder (FASD), sexual abuse, traditional skills with the local cultural committee and elders both on-site and during excursions for on-the-land after school activities.

Qarmaapik intends to offer more training programs for parents, women, men, youth/children such as: parenting courses based on traditional Inuit values; conflict resolution; family budgeting; early childhood development; dealing with adolescents; baby book making; time management; employment support; and a young parent-child play group. It also plans to offer a men's program in collaboration with the local men's group to strengthen father-son relationships and awareness workshops to educate the community about topics such as youth protection and procedures, the court systems and services of the justice committee. For more information, please see: http://www.northernpublicaffairs.ca/index/volume-5-issue-2-innovations-in-community-health-and-wellness/qarmaapik-house-a-multi-use-and-safe-place-for-families-in-kangiqsualujjuaq/.

6.2 CONCLUSION AND RECOMMENDATIONS

Many community programs and actions exist that are aimed at developing awareness of the issues related to violence and reducing the negative impacts of violence experienced by Inuit women and girls. This chapter provided an overview of the existing programs and services in each region that are accessed by Inuit women as supports for healing and building capacity for healthy relationships. Based on the data collected from key informants, community members and service providers, the chapter discussed participants' perceptions of these programs and what specific elements make them effective for the women using them. Overall, the participants identified five program areas that have been proven to support individuals, families and communities in responding to and healing from the impacts of violence. These five areas are:

- awareness of violence as a community issue;
- land-based resurgence;
- youth centres;
- transition housing; and,
- access to country food.

While there are a variety of organizations and services across Inuit Nunangat working in these five program areas, many are limited in their capacity by funding constraints. Most community-based programs rely on short-term federal, provincial or territorial funding which can make long-term and strategic planning difficult. This also means that programs may face time limitations, and even if demand in the community is high and there is a proven track record of success, the program may be forced to end. In terms of youth centres and transition houses, the high costs of building and maintaining infrastructure in the Inuit regions, coupled with a lack of dedicated funding sources, means that there are few to no programs that have been recognized by service providers and community members as effective. Sustainable funding and strategic investments are urgently

needed in these five areas to support the development and maintenance of community-driven, Inuit-specific programs and services that directly respond to community needs for individual and community level healing.

The recommendations specific to this chapter, based on the existing best practice models described by participants and the five priority areas identified as necessary to supporting healing and healthy relationships in Inuit communities, are:

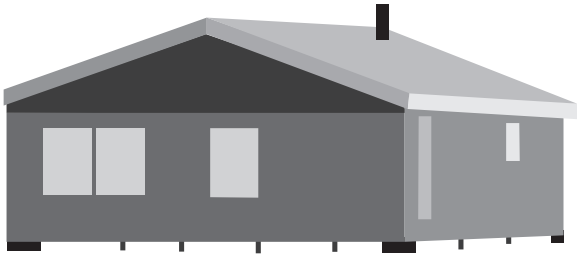
11. Develop and promote Inuit-specific public education and multimedia campaigns to increase awareness of gender-based violence among men, women and youth, including forms of violence, causes of violence, and available support resources.

12. Enhance funding for family-centered and community-based healing programs for victims of violence and perpetrators.

    a. Healing programs should integrate *Inuit Qaujimajatuqangit* and on-the-land activities and be available in the regionally appropriate dialect of Inuktitut.

13. Develop and enhance safe community spaces for Inuit youth and children that are accessible outside of normal working hours, such as youth centres.

14. Provide comprehensive and Inuit-specific cultural safety training for all *qallunaat* (non-Inuit) service providers in the health, justice and social sectors in Inuit Nunangat to improve the capacity of services and to address the needs of Inuit communities.



CHAPTER SEVEN:
CONCLUSION AND RECOMMENDATIONS

Every Inuk woman and child deserves to live free from violence. The determinants of violence against Inuit women and girls are complex and comprise multiple cultural, political, social and economic factors that are interrelated and specific to the context of Inuit Nunangat. As a result, single-focused and mainstream interventions will not be effective in addressing the alarmingly high rates of violence in Inuit communities. Instead, a holistic and Inuit-specific strategy is needed to achieve the safety and well-being of Inuit women and their children that ensures access to high-quality and culturally-safe prevention, intervention and aftercare services and resources to provide for safety, healing and long-term well-being. Inuit women and their children must have access to supports in their communities that address their needs for safety, healing and well-being and are responsive to their daily realities.

This study undertook qualitative research with shelter staff, service providers, key informants and Inuit women to explore the unique experiences of violence of Inuit women and girls. In total, 164 participants were engaged through the research to understand the determinants of gender-based violence in Inuit communities and examine current gaps and needs in terms of shelter and other social services. The findings in this report illustrate the challenges and the opportunities for collaboration and effective change across Inuit Nunangat and the urban centres in which Inuit live. The financial costs of violence to the health care and criminal justice systems alone are astronomical and while it is hard to quantify such amounts, they are likely to be in the hundreds of millions of dollars. The loss of Inuit autonomy reinforced through the residential school system, forced relocation and settlement of communities, and destruction of natural resources has adverse effects for Inuit well-being and produces costly consequences for the Inuit regions, territories and provinces.

There are only 15 shelters across the 51 communities in Inuit Nunangat and survivors of abuse and violence must often leave their communities and social supports to seek safety at a shelter where the stay ranges from only a few days to up to eight weeks. If the shelter is operating at full

capacity, women are left with few safe options until space becomes available. For Inuit women who experience extreme abuse, many must access medical services through medevac transportation to hospitals in southern urban centres where they are treated in an unfamiliar cultural environment. This distancing of women from family and friends can serve to further isolate them from family, community and social supports during a time of pain and distress.

Overall, research participants tended to agree that education and awareness are critical as a harm reduction and prevention approach to reducing incidents of violence, especially intimate partner violence. The best way to develop this education is through open community conversations about violence which position it as a social problem linked to the socio-historical context of colonization. Inuit women, men and children need to know there is help and support available, and that the normalization of violence is not acceptable or inevitable. The findings from this study are intended to expand the knowledge base around violence as experienced by Inuit women and girls and access to shelters across Inuit Nunangat. Furthermore, the research results are intended to be shared among federal, provincial and territorial governments, Inuit organizations, community organizations and the Inuit public as a starting point for institutional action. The aggregated results will be shared with government and community organizations nationally to inform them of services that promote health and prevent violence against Inuit women and girls. Building on the study findings, Pauktuutit Inuit Women of Canada will continue to play an active role in advocating and developing supports for Inuit women across Canada experiencing the impacts of violence and abuse.

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PAUKTUUTIT
INUIT WOMEN OF CANADA

Study of Gender-based Violence and Shelter Service Needs across Inuit Nunangat

Recommendations

Recommendations

1. Develop violence intervention, prevention and healing strategies that are Inuit-specific, led by Inuit women, and respond to the unique cultural, political, economic, social and historical context of Inuit Nunangat.

2. Prioritize funding for the development of appropriate, safe and affordable housing across Inuit Nunangat at all levels of government.

3. Enhance the provision of Inuit-specific and Inuktitut services for survivors of violence and offenders to interact with and navigate the federal and provincial criminal justice systems.

4. Promote community-based collaboration between survivors of violence, police, service providers and community members to identify effective measures to ensure the safety and well-being of Inuit women and their children.

5. Provide adequate, sustainable and flexible funding in Inuit communities for emergency shelters serving Inuit women and children experiencing violence.

    a. The Government of Canada must reverse its policy that excludes Inuit communities from accessing operational funding for shelters through the Family Violence Prevention Plan (FVPP). Shelter funding must be made available to Inuit communities at a minimum equitable amount to that provided for shelters on First Nations reserves.

    b. Funding should support the operation and maintenance of existing shelters and the development of new shelters in consultation with communities.

    c. Eligible costs for shelter funding should include: general operations and maintenance; staff training, retention and professional development; and, programs and supports responsive to the needs of Inuit women.

6. Examine the feasibility and community readiness for transition and second-stage housing services in Inuit Nunangat in consultation with Inuit organizations, shelter directors, service providers, and survivors of violence.

7. Conduct a needs assessment to determine the gaps in culturally safe services for Inuit women experiencing violence in urban centres, including the need for Inuit-specific emergency shelters and transitional housing services.

8. Collect data on the use of medevac and emergency health services that is disaggregated by gender and cause to support increased understanding of the prevalence and cost of violence against women and girls in Inuit communities.

9. Undertake research to estimate the economic cost of violence against Inuit women and girls in Inuit Nunangat at the individual and systemic levels.

10. Prioritize upstream investments in prevention, intervention, postvention initiatives to both enhance the quality of Inuit women's lives and reduce the hard financial costs of the highest rates of violence in the country.

11. Develop and promote Inuit-specific public education and multimedia campaigns to increase awareness of gender-based violence among men, women and youth, including forms of violence, causes of violence, and available support resources.

12. Enhance funding for family-centered and community-based healing programs for victims of violence and perpetrators.

    a. Healing programs should integrate Inuit Qaujimajatuqangit and on-the-land activities and be available in the regionally appropriate dialect of Inuktitut.

13. Develop and enhance safe community spaces for Inuit youth and children that are accessible outside of normal working hours, such as youth centres.

14. Provide comprehensive and Inuit-specific cultural safety training for all qallunaat (non-Inuit) service providers in the health, justice and social sectors in Inuit Nunangat to improve the capacity of services and to address the needs of Inuit communities.

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Appendix A

1 APPENDIX A: INUIT ETHICAL PROTOCOLS

2 APPENDIX B: DRAFT QUESTIONNAIRE 1- SHELTER NEEDS

Introduction and Background:

Pauktuutit is conducting a research project designed to capture information on gender-based violence against women and shelter needs across Inuit Nunangat. We are interested to understand factors affecting violence against Inuit women and identify the reasons for accessing shelters. The study will address several of the barriers that currently prevent more effective action to address these specific issues and the gathering information related to types of violence, shelter programs and referral processes and barriers to expanding shelter capacity.

Your participation in this research project is important and please know that all of the information you provide will be kept confidential and only used for research purposes. There are 24 questions which should take between 10-20 minutes to complete.

SECTION 1 – DEMOGRAPHIC QUESTIONS

To begin our interview, I would like to ask some general questions about your shelter:

Q1. Facility Name: _____

Q2. Location of Facility:_____

Q3. Date: _____

Q4a. Number of full-time staff: _____

Q4b. Number of part-time/volunteer staff_____

SECTION 2 – SERVICES AND PROGRAMS

The next sets of questions are about the type of programs and services offered at the shelter.

Q5. Please indicate all services your facility provides on a regular basis. Please select all that apply.¬¬¬

☐ Individual short-term counselling

☐ Individual long-term counselling

☐ Group counselling

☐ Family counselling programs (includes mother, child (ren) and partner)

☐ Safety planning or protection planning

☐ Addiction counselling (e.g. information or support)

☐ Crisis telephone line (staffed 24 hour line)

☐ Medical services (e.g. information or support)

☐ Mental health services (e.g. information or support)

☐ Legal services (e.g. information or support, paralegal services)

☐ Financial assistance or welfare (e.g. information or support)

☐ Life skills (e.g. banking, groceries, day-to-day management)

☐ Job training or employment search

☐ Parenting skills

☐ Housing referral

☐Recreation services

☐Advocacy on behalf of women

☐Transportation/accompaniment (e.g., transportation to the shelter, to court)

☐Other services (please specify) ¬¬¬¬¬¬¬¬¬_____

Q6. What is the total number of beds within your facility?_____

SECTION 3 – SHELTER USE QUESTIONS

I am now going to ask you some questions to understand some of the reasons as to why people use the shelter.

Q7. What population does this shelter primarily serve? Please select all that apply

☐Women only

☐Women and Children

☐Adults only

☐Teens

☐Other, please explain _____

Q8. How would you describe your shelter? Please select all that apply

☐Emergency Homeless Shelter

☐Emergency Domestic Violence Shelter

☐Transition House

☐Second Stage Housing

☐Safe Home Network

☐Satellite

☐Women's Emergency Centre

☐Emergency Shelter

☐Other (please specify) _____

Q9.For each adult woman residing in your facility please indicate the reason(s) she came to your facility (number). Count all the reasons that apply

☐Physical abuse

☐Sexual abuse

☐Financial abuse

☐Emotional abuse

☐Psychological abuse

☐Threats

☐Harassment

☐Protection of her child (ren) from

☐Physical abuse

☐Sexual abuse

☐Threats

☐Psychological abuse

☐Neglect

☐Witnessing abuse of mother

☐Other abuse (please specify)

☐Housing problems

☐Other, please specify _____

Q10. What is the maximum capacity of your shelter?

☐ One person

☐ 2-5 persons

☐ 6-10 persons

☐ 11+ persons

Q11. Is the shelter currently full?

☐Yes ☐No ☐ I Don't know

Q12. What type of data does your shelter regularly collect in regard to denials?

☐No data ☐Number of denials ☐Number of denials and primary reason for denial

Q13. On average, over the past 12 months, how many people would you say have been denied access to your shelter?

☐No one

☐1 -2 people

☐3- 5 people

☐ 6 -9 people

☐ 10 + people

Q14. What are the top three reasons why a person has been denied access to your shelter?

1._____

2._____

3._____

Q15. What is the average length of time that people stay at the shelter? Would you say, it is somewhere between:

☐A few days

☐One to two weeks

☐Several weeks

☐Several months

☐more than six months

☐One year

☐More than one year

Q16. What is the maximum amount of time a person can stay at the shelter?

☐A few days

☐One to two weeks

☐Several weeks

☐Several months

☐More than six months

☐One year

☐More than one year

☐There is no time limit

☐Don't know

Q17. What are the main reasons there is a maximum amount of time a person can stay at the shelter?

1._____

2._____

3._____

Q18. Describe the standard screening process of your shelter.

☐Application ☐Referral from an agency ☐Walk-in

☐Other, explain_____

Q19. When can the shelter conduct standard screening processes?

☐Monday-Friday (five days) ☐Sunday-Saturday (seven days)
☐Other, explain_____

Q20. What kinds of services are offered by your agency to people staying in the shelter?

_____

Q21. Is there a referral process for outside services?

☐Yes ☐No ☐Don't know

Q22. Is there a plan in place to aid clients in transitioning out of the shelter/transitional home?

☐Yes ☐No ☐Don't know

Q23. Does your shelter/transitional home offer any supports for healing?

☐Yes ☐No ☐Don't know

If yes, what are they? _____

Q24.We are now at the end of the interview and I want to know if there anything else you would like to share with us – questions or comments?

3 DRAFT QUESTIONNAIRE 2- GENDERED VIOLENCE

Introduction and Background:

Pauktuutit is conducting a research project designed to capture information on gender-based violence against women and shelter needs across Inuit Nunangat. We are interested to understand factors affecting violence against Inuit women and identify the reasons for accessing shelters. The study will address several of the barriers that currently prevent more effective action to address these specific issues and the gathering information related to types of violence, shelter programs and referral processes and barriers to expanding shelter capacity.

Your participation in this research project is important and please know that all of the information you provide will be kept confidential and only used for research purposes. There are 30 questions which should take between 20-30 mins to complete.

SECTION 1 – DEMOGRAPHIC QUESTIONS

To begin our interview, I would like to ask some very general questions

Q1. What is your date of birth? _____

Q2a. Do you identify as Inuit or an Indigenous person?

☐ No ☐Yes

Q2b. If yes, then are you ☐ Inuit ☐ Metis ☐First Nations ☐Other, explain_____

Q3. How many children are currently living with you, as dependents?

☐ No children

☐ 1 child

☐ 2 children

☐ 3 children

☐ 4 children

☐ 5 or more children

Q4. What is your highest level of Schooling?

☐ elementary or less

☐ some high school

☐ completed high school

☐ some post-secondary non-university

☐ completed postsecondary non-university

☐ some university

☐ completed university

Q5. What is your relationship status?

☐ common law/cohabitation ☐ legally married ☐ separated ☐ divorced ☐ single

Q6. Are you: ☐ female ☐ male ☐ other¬¬¬¬¬, explain¬_____

SECTION 2 – VIEWS ON GENDERED VIOLENCE

Now, I would like to ask some very general questions regarding gendered violence in the community. Many people often worry about the threat that violence poses to our personal safety. I am going to ask you some questions about everyday situations and can you please tell me how you feel in each of these situations.

Q7. Have you ever witnessed violence occurring in your community?

☐Yes ☐No ☐Not Sure

Q8. When walking alone in your community after dark do you feel….

☐ very worried about your personal safety?

☐ worried about your personal safety?

☐ somewhat worried about your personal safety?

☐ not at all worried about your personal safety?

☐ I don't know

Q9. When alone in your home do you feel…

☐ very worried about your personal safety?

☐ worried about your personal safety?

☐ somewhat worried about your personal safety?

☐ not at all worried about your personal safety?

☐ I don't know

Q10a. As women we often do things to make ourselves feel safer. What sorts of things do you do to make yourself feel safer in your community? Please explain¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬____

Q10b. As women we often do things to make ourselves feel safer. What sorts of things do you do to make yourself feel safer in your home? Please explain

____

Q11. Many people have witnessed gendered violence. Do you remember how old you were when you witnessed violence for the first time?

☐ 0-6 years

☐ 7-12 years

☐ 13 to 18 years

☐ 19- to 25 years

☐ 26- -30 years

☐ 31-40 years

☐41- 50 years

☐ 51 + years

☐ I have never witnessed violence

☐ I don't know

Q12. More and more, we hear about women being harassed or receiving unwanted attention from men. In the past 12 months, can you tell me if you have received any of the following:

An obscene phone call ☐Yes ☐No ☐ Not Sure

An obscene text message ☐Yes ☐No ☐ Not Sure

An obscene comment on social media ☐Yes ☐No ☐ Not Sure

Unwanted attention such as cat calls/ whistles/leering ☐Yes ☐No ☐ Not Sure

Q13. More and more, we hear about women experience abuse from men. In the past 12 months, can you tell me if you have received any of the following types of abuse:

Physical ☐Yes ☐No ☐
Not Sure
Emotional ☐Yes ☐No ☐
Not Sure
Sexual ☐Yes ☐No ☐
Not Sure
Psychological/mental ☐Yes ☐No ☐
Not Sure
Threats of Violence ☐Yes ☐No ☐
Not Sure
Had Something Thrown at You ☐Yes ☐No ☐
Not Sure
Hair pulled, slapped, hit, punched ☐Yes ☐No ☐
Not Sure
Choked or Burned ☐Yes ☐No ☐
Not Sure
Other, please explain_____

Q14. How many times would you say you have you experienced each form of violence?

Physical ☐1-3 times ☐4-6 times ☐7-10 times
☐10+ times ☐ I Don't remember
Emotional ☐1-3 times ☐4-6 times ☐7-10 times
☐10+ times ☐ I Don't remember
Sexual ☐1-3 times ☐4-6 times ☐7-10 times
☐10+ times ☐ I Don't remember
Psychological/mental ☐1-3 times ☐4-6 times ☐7-10 times
☐10+ times ☐ I Don't remember

Threats of Violence Physical ☐1-3 times ☐4-6 times ☐7-10 times

☐10+ times ☐ I Don't remember

Had Something Thrown at You ☐1-3 times ☐4-6 times ☐7-10 times

☐10+ times ☐ I Don't remember

Hair pulled, slapped, hit, punched ☐1-3 times ☐4-6 times ☐7-10 times

☐10+ times ☐ I Don't remember

Choked or Burned ☐1-3 times ☐4-6 times ☐7-10 times

☐10+ times ☐ I Don't remember

Q15. Intimate partner violence is violence that occurs between partners. Do you recall when you last experienced violence from a partner?

☐ This month

☐ 1 month ago

☐ 2-3 months ago

☐ 4-6 months ago

☐ 6+ months ago

☐ last year

☐ more than a year ago

Q16. Thinking aback to your childhood do you recall witnessing violence as a child?

☐Yes ☐No ☐Not Sure

Q17. Have you experienced any of the following health consequences due to violence?

Internal Injuries ☐Yes ☐No ☐
Not Sure
Emotional distress ☐Yes ☐No ☐
Not Sure
Miscarriages ☐Yes ☐No ☐
Not Sure
Cuts/scratches/burns ☐Yes ☐No ☐
Not Sure
Broken bones ☐Yes ☐No ☐
Not Sure
Other, please explain_____

Q18. Did you (ever) seek medical help for your injuries? Select all that apply.

- ☐ hospital emergency
- ☐ walk in clinic
- ☐ licensed doctor
- ☐ LPN (licensed practical nurse)
- ☐ Elder or traditional healer
- ☐ counsellor/psychologist
- ☐ Other, please explain _____

Q19. Do you remember who was present when you have experienced any of the following types of abuse and/or violence?

Physical ☐No One ☐Children ☐Family Members

☐Others ☐ I Don't remember

Emotional ☐No One ☐Children ☐Family Members

☐Others ☐ I Don't remember Sexual ☐No One

☐Children ☐Family Members ☐Others ☐ I Don't remember

Psychological/mental ☐No One ☐Children ☐Family Members

☐Others ☐ I Don't remember

Threats of Violence Physical ☐No One ☐Children ☐Family Members

☐Others ☐ I Don't remember Had Something Thrown at You ☐No One

☐Children ☐Family Members ☐Others ☐ I Don't remember

Hair pulled/slapped/hit/punched ☐No One ☐Children ☐Family Members

☐Others ☐ I Don't remember Choked or Burned ☐No One

☐Children ☐Family Members ☐Others ☐ I Don't remember

Other, please explain_____

Q20. Have you experienced violence while you were pregnant?

☐Yes ☐No ☐ I Don't Remember

Q21. Have you experienced violence from previous partners?

☐Yes ☐No ☐ I Don't Remember

Q22. Have you experienced violence from your current partner?

☐Yes ☐No ☐ I Don't Remember

Q23. How old is your current partner?

☐ Under 18 years

☐ 18-25 years

☐ 26-30 years

☐ 31-40 years

☐ 41-49 years

☐ 50 + years

Q24a. Does your partner identify as an Indigenous person?

☐No ☐Yes ☐ I don't know

Q24b. If yes, is your partner

☐Inuit ☐Metis ☐First Nations ☐Other

_____

Q25. Do you and your partner live together?

☐Yes ☐No ☐ On occasion

Q26. Have you accessed support services within your community?

☐Yes ☐No ☐ I don't know

Q27. Have you accessed a shelter/transitional home before?

☐Yes ☐No ☐ I don't know

Q28. Did you ever turn to any of the following services for help as a result of violence? Select all that apply.

☐ Shelter

☐ Transition house

☐ Crisis centre/ crisis line

☐ Women's centre

☐ Community/ family center

☐ Friends/family

☐ Police

☐ Other, please explain_____

Q29. Please tell me all of the ways this experience with violence has affected you? Do you feel …

☐ ashamed

☐ embarrassed

☐ guilty

☐ depressed

☐ anxiety

☐ fear

☐ loneliness

☐ angry

☐ worthless

☐ Other, please explain_____

Q30.We are now at the end of the interview, and I want to know if there anything else you would like to share with us – questions or comments?

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