

Community Wisdom: Creating a Comprehensive Approach to End Family Violence in the
Northwest Territories

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January 2020

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Executive Summary

This report is the third in a series of family violence research initiatives undertaken in the Northwest Territories (NWT) in 2019. A scoping review of the literature identified promising themes to reduce or end family violence. A jurisdictional scan identified further promising practices. In this phase, family violence is addressed, through a process of community partnership, with community members (Elders and youth) in seven sharing circles to answer two research questions: What do Indigenous and newcomers to Canada living in the NWT say about family violence and ways to end family violence in their communities? And, how do Indigenous and newcomers prioritize strategies/best practices identified in the published literature and gathered from the scoping review conducted in phase 1 of this study?

The methods used within this study were two: sharing circles (n=7) facilitated through semi-structured questions to learn about how communities conceptualize family violence; and, the use of a family violence metric tool (survey format) developed with the findings of the scoping review to identify community response to strategic directions identified in the published literature as best evidence and territorial contextual fit. The strategic directions were summarized in plain language for presentation to the sharing circle participants as follows:

- **Provide learning about family violence:** research recommended education for youth, families, victims and perpetrators of family violence to challenge stereotypes, identify and reduce gender based violence, and inform people about healthy family roles, particularly young people as they approach key developmental milestones and intimate relationships;
- **Make healthy families:** empower families and communities to build healthier skills in parenting, conflict resolution, and safety in families;

- **Share your story of family violence with service providers:** providers routinely ask/screen for family violence, and have the education and awareness to provide non-judgmental support and helpful options;
- **Go to a counsellor:** having access to a trained and supportive person who can help with emotional support, safety planning, healing from trauma, and transitions out of violence;
- **Have a safe helper:** this may include formal or informal support systems who do not judge or blame women experiencing intimate partner violence and who understand the complexities of leaving a violent relationship;
- **Getting help when there is violence in your family:** too often people have remained silent or hide what is going on at home limiting their access to help;
- **A court that works to help men and support women:** for example, specialized domestic violence courts to link perpetrators and victims with targeted support;
- **Having a safe place to live:** transitional or long-term housing that is accessible, affordable, and supports women who are leaving violent relationships;
- **Healing through culture:** multiple recommendations that supported use of Elders across a variety of program options, use of Indigenous ceremony, traditions and on-the-land wellness and healing activities;
- **Shaming abusers:** a discipline strategy used in former times by some Indigenous cultures and considered by some to be a way to discourage inappropriate violent behaviour;
- **Working better with child protection:** women in violent relationships find themselves in a double bind working to keep their children safe and fearing reprisals from child

protection- strategies are suggested to create more informed, supportive and collaborative relationships with child protection systems;

- **Helping men with anger:** programs or interventions to help men choose alternatives to violence, to heal from their hurt, and to create healthier responses;
- **Helping people with addictions:** substance use treatment options that are accessible and target both substance use and anger/violence; and
- **Service providers working together:** transforming and integrating systems to provide more comprehensive support across current siloed responses.

The sharing circles were conducted across the NWT. One sharing circle was conducted with newcomers to Canada and the remaining six sharing circles were with community members from Indigenous communities. The participants (n=61) included youth and Elders in the Indigenous communities and a group of adult women in the newcomer group. The participants were recruited into the sharing circle by a local culture broker. Most of the participants were female (77%). Participants ranged in age from 19 to 79 (two Elders did not specify their age) and in ethnicity: newcomers (n=10), Dene (n= 43), Inuvialuit (n=5) and Non-Indigenous (n=3). The sharing circles lasted from 66 minutes to 3 hours and 45 minutes. The sharing circles were held in a variety of locations.

Community participants explored their understanding of family violence, the particular and challenging nature of family violence in the NWT, and specific strategies to end the cycle of violence. Overarching themes include the root causes, longevity and intergenerational nature of violence (*lifetime of violence*) and the severity of violence (that is my *violent story*). These overarching themes were further explicated into four major headings addressing family violence: what it is, where it comes from, what are the impacts and why it continues. **“What it is”**

identified the realities and experiences of living a lifetime of violence under five sub-themes: gendered violence, intergenerational violence, cycle of violence, *tough life*, and emotional abuse. During their accounts of family violence, a picture of violence emerges where women are oppressed by partners, suffer physical, sexual, economic and spiritual abuse, and are living a tough life that ebbs and flows through cycles of violence. The tough life culminates from a place of normalization to a place of no more *bullshit* that activates change. **“Where it comes from”** addresses what the community participants envision as the root causes of violence. They described this under four sub-themes: arranged marriage, colonialism and residential schooling, anger at the church, and alcohol and substance abuse. **“What are the impacts”** identified the ways that family violence affected participants in this study. Six sub-themes illuminated the impacts as *harm you from the inside*, poor health, children witnessing violence, mothering, community exposure to violence and children being placed in foster care. From the theme, **“why it continues”**, eight sub-themes were elucidated. They were normal, hard to leave, non-interference, intergenerational and learned, alcohol use, limited or ineffective resources, lack of government action, and Church doctrine.

Hope for change is expressed by participants who believe we can *break the cycle* and *dream big* with hope for a future without family violence. Breaking the cycle and dream big were expressed through five sub-themes: being on the land, engaging the community, harnessing the strength of women, guided by Elders and planning for future generations.

Participants rated the strategies from the scoping review and all of them were endorsed except the strategy “shaming the abusers”. Most participants felt that this is not a helpful strategy and some participants felt that it may worsen the violence.

Sommaire

Le présent rapport est le troisième d'une série d'initiatives de recherche sur la violence familiale entreprises aux Territoires du Nord-Ouest (TNO) en 2019. L'analyse de la documentation a permis de dégager des idées prometteuses pour réduire la violence familiale ou y mettre fin, et un examen des démarches régionales a permis de dégager d'autres pratiques encourageantes. Au cours de cette phase, la violence familiale est abordée, dans le cadre d'un partenariat avec les membres de la collectivité (aînés et jeunes), dans sept cercles de partage pour répondre à deux questions de recherche : Que disent les autochtones et les nouveaux arrivants au Canada qui vivent aux TNO au sujet de la violence familiale et des moyens mis en œuvre pour y mettre fin dans leur collectivité? Dans quel ordre d'importance classent-ils les stratégies et les pratiques exemplaires recensées dans l'analyse de la documentation effectuée dans la phase 1 de la présente étude?

Deux méthodes ont été utilisées pour réaliser cette étude : des cercles de partage (n = 7) animés à l'aide de questions semi-structurées pour apprendre comment les collectivités conçoivent la violence familiale; et un outil de mesure de la violence familiale (un sondage) conçu à partir des résultats de l'analyse de la documentation pour étudier la réponse des collectivités aux orientations stratégiques cernées dans la documentation publiée comme meilleures preuves et meilleure adéquation au contexte territorial. Les orientations stratégiques ont été résumées comme suit, en langage clair, afin d'être présentées aux participants du cercle de partage :

- **Présenter de l'information sur la violence familiale** : La recherche recommande de sensibiliser les jeunes, les familles, les victimes et les auteurs de violence familiale pour lutter contre les stéréotypes, reconnaître et réduire la violence sexiste et

sensibiliser les résidents sur les rôles familiaux sains, en particulier les jeunes qui s'apprêtent à vivre des étapes clés de leur développement et à avoir des relations intimes.

- **Raffermir les liens familiaux :** Donner aux familles et aux collectivités les moyens de développer de meilleures compétences pour éduquer leurs enfants, résoudre des conflits et assurer la sécurité des familles.
- **Confier son expérience de violence familiale à des intervenants :** Les intervenants, formés et sensibilisés à fournir du soutien et à proposer des options utiles sans préjugés, abordent régulièrement le sujet de la violence familiale et font du dépistage.
- **Aller voir un conseiller :** Consulter un professionnel formé qui peut vous appuyer : soutien émotionnel, sécurité et planification, guérison des traumatismes et fin du cycle de la violence.
- **Pouvoir compter sur un aidant sûr :** Il peut s'agir de systèmes de soutien formels ou informels qui ne condamnent pas ou ne blâment pas les femmes victimes de la violence d'un partenaire intime, et qui comprennent la difficulté de mettre fin à une relation violente.
- **Obtenir de l'aide en cas de violence familiale :** Trop souvent, les gens taisent ce qui se passe à la maison, ce qui les empêche d'obtenir de l'aide.
- **Établir des tribunaux qui aident les hommes et soutiennent les femmes :** Des tribunaux spécialisés dans la violence familiale pourraient notamment jumeler les auteurs et les victimes de violence avec des aides ciblées.
- **Avoir accès à un logement sûr :** Un logement de transition ou à long terme qui soit accessible, abordable et qui favorise l'autonomie des femmes qui

quittent une relation violente.

- **Guérir par la culture** : Nombre de suggestions recommandent de faire participer les aînés à une variété de programmes, de cérémonies, de traditions et d'activités de bien-être et de guérison sur les terres ancestrales.
- **Dénoncer les agresseurs (faire honte aux agresseurs)** : Il s'agit d'une stratégie de discipline utilisée autrefois par certaines cultures autochtones et considérée par certains comme un moyen de décourager les comportements violents.
- **Mieux travailler avec les services de protection de l'enfance** : Les femmes dans des relations violentes se trouvent dans une double impasse; elles doivent assurer la sécurité de leurs enfants et craignent des représailles de la part des services de protection de l'enfance. On suggère des stratégies pour créer des relations éclairées, d'entraide et de collaboration avec les responsables des systèmes de protection de l'enfance.
- **Aider les hommes en colère** : Proposer des programmes ou des interventions pour amener les hommes à choisir d'autres solutions que la violence, à guérir de leurs traumatismes, et à s'extérioriser sainement.
- **Aider les personnes qui ont développé des dépendances** : Offrir des options de traitement des toxicomanies qui sont accessibles et qui ciblent à la fois la consommation de substances toxiques et la colère ou la violence.
- **Favoriser la collaboration entre les professionnels de la santé** : Transformer et intégrer les systèmes pour fournir un soutien plus complet au lieu du cloisonnement actuel.

Les cercles de partage ont été organisés dans l'ensemble des TNO. L'un d'eux a été organisé avec de nouveaux arrivants au Canada et les six autres l'ont été avec des membres de

communautés autochtones. Les participants (n = 61) des cercles de partage étaient des jeunes et des aînés (dans les collectivités autochtones), et un groupe de nouveaux arrivants au Canada était composé de femmes. Les participants ont été recrutés dans le cercle de partage par un animateur culturel local. La plupart des participants étaient des femmes (77 %); ils étaient âgés de 19 à 79 ans (deux aînés n'ont pas précisé leur âge) et étaient ventilés comme suit : Dénés (n = 43), Inuvialuits (n = 5), non-Autochtones (n = 3), et nouveaux arrivants (n = 10). Les cercles de partage ont duré de 66 minutes à 3 heures et 45 minutes, et ont eu lieu à différents endroits.

Les participants des collectivités ont exploré leur compréhension de la violence familiale, la nature particulière et difficile de la violence familiale aux TNO, et les stratégies spécifiques pour mettre fin au cycle de la violence. Parmi les thèmes généraux abordés, mentionnons les causes fondamentales de la violence, sa longévité, la nature intergénérationnelle de la violence (*une vie complète marquée par la violence*) et sa gravité (*voici mon histoire de violence*). Ces thèmes généraux ont été approfondis dans le cadre de quatre grandes discussions traitant de la violence familiale : « Qu'est-ce que la violence? », « D'où vient la violence? » « Qu'est-ce que la violence? » « Quels sont les effets de la violence? » et « Pourquoi la violence persiste-t-elle? ». La discussion sur le thème « **Qu'est-ce que la violence?** » a permis de cerner les réalités et les expériences d'une vie marquée par la violence en cinq sous-thèmes : la violence sexiste, la violence intergénérationnelle, le cycle de la violence, la *vie dure* et la violence psychologique.

Au cours de leurs récits sur la violence familiale, un tableau de la violence émerge où les femmes sont opprimées par leurs partenaires, souffrent d'agressions physiques, sexuelles, économiques et spirituelles, et vivent une vie dure qui se profile au travers du cycle de la violence. La vie dure culmine dans une certaine normalisation de la violence, avant d'en arriver à un stade où la victime *ne tolère plus sa situation*, et déclenche des changements. C'est au cours de la discussion sur le thème « **D'où vient la violence?** » que les membres de la collectivité

considèrent les causes fondamentales de la violence, et les classent en quatre sous-thèmes : mariages arrangés, colonialisme et pensionnats indiens, colère contre l'église et dépendances à l'alcool et aux drogues. La discussion sur le thème « **Quels sont les effets de la violence?** » a permis de cerner les façons dont la violence familiale a affecté les participants du cercle de partage. Six sous-thèmes ont mis en lumière les impacts de la violence : son *caractère insidieux*, la mauvaise santé, les enfants témoins de la violence, la difficulté d'être mère, l'exposition de la collectivité à la violence et le placement des enfants en famille d'accueil. Le thème « **Pourquoi la violence persiste-t-elle?** » a permis de relever huit sous-thèmes : la violence est considérée comme normale, quitter une relation violente est difficile, on ne se mêle pas de ce qui ne nous regarde pas (non-ingérence), la violence est un comportement appris intergénérationnel, la consommation d'alcool est associée à la violence, les ressources sont limitées ou inefficaces, le gouvernement n'intervient pas et l'Église maintient son influence.

Les participants expriment leur espoir de changement et croient que nous pouvons briser le cycle de la violence et rêver grand, avec l'espoir d'un avenir sans violence familiale. *Rompre le cycle* et *rêver grand* sont des idées exprimées à travers cinq sous-thèmes : être sur les terres ancestrales, faire participer la collectivité, exploiter la force des femmes, se laisser guider par les aînés et planifier pour les générations futures.

Les participants ont évalué les stratégies à partir de l'analyse de la documentation, et toutes ont été approuvées, à l'exception de la stratégie « Dénoncer les agresseurs (faire honte aux agresseurs) ». La plupart des participants ont estimé que cette stratégie n'était pas utile, et certains pensent qu'elle pourrait aggraver la violence.

Community Wisdom: Creating a Comprehensive Approach to End Family Violence in the Northwest Territories

Community partnership, involvement, and participation in solutions are needed to end family violence. In the past, strategies to address family violence have stemmed from frontline workers, program administrators and planners whom adopted strategies and/or initiatives from accepted southern practices. Too often, these solutions were not tailored to the NWT context, a geographical location that involves living in remote and northern communities where resources are limited (Faller et al., 2018; Moffitt, Fikowski, Mauricio & Mackenzie, 2013; Moffitt & Fikowski, 2017; Zorn, Wuerch, Faller & Hampton, 2017); a place where people have experienced intergenerational trauma (Barker et al., 2019; Shein, 2015) that stemmed from a history and legacy of residential schooling (Truth and Reconciliation Commission, 2015). In addition, there are a myriad of other environmental factors that fuel family violence. These include social determinants of health (unemployment, food and housing insecurity, loss of culture and spirituality, access to treatment and services); misogynistic (Brownridge et al., 2017), patriarchal (Hunnicut, 2009) and oppressive practices (Tsantefski, Wilde, Young & O'Leary, 2018) in everyday life; and the influences of addictions, substance abuse and mental illness on family cohesion and well-being. All of these factors illuminate the structural and systemic root causes of family violence.

Furthermore, family violence is recognized as a public health issue (Taylor, 2016) causing social suffering, poor health outcomes (including domestic homicides), and economic burden. It is timely to consider public health practices in terms of epidemiology, health promotion and prevention (primary, secondary and tertiary) initiatives to end the epidemic of violence. In particular, community partnership will enable sharing in decisions and

implementing strategies that the communities support and have validated as a direction that aligns with their wishes. Community partnership is the aim of this phase of the research to develop a comprehensive approach to family violence in the NWT.

Background

Family Violence in the Northwest Territories

Definition. Family violence for this project was described as behaviour, across the lifespan, from a person to a family member that is physically, sexually, psychologically, economically, or spiritually abusive, threatening, coercive, uses surveillance or in any other way controls and dominates the family member. This behaviour causes that family member to fear for the safety or wellbeing of themselves or another family member. This behaviour of a person causes a child to hear or witness or otherwise be exposed to the effect of the behaviour. We also include three main typologies of Intimate Partner Violence: intimate terrorism, violent resistance, and situational couple violence.

Family Violence Statistics. From the NWT fact sheets on police reported violent crime (Statistics Canada, 2016), the NWT rate of violent crime is seven times the national rate. In the NWT, intimate partner violence increased by 12 % in 2017 (Statistics Canada, 2018). Children are particularly vulnerable to intimate partner violence. Child exposure to family violence is the second most frequent reason for reports made to NWT child protection services for suspected child maltreatment (23%) or 861 reports in 2018-2019 (GNWT, 2019).

In a current Canadian study of domestic homicides, vulnerable populations for domestic homicide have been identified as rural, remote and northern populations, Indigenous, new immigrants and refugees and children (Canadian Domestic Homicide Prevention Initiative, n.d.;

Jaffe, Dawson & Campbell, 2013). Our territorial context meets this description of risk and vulnerability for domestic homicide. In the NWT, there have been 17 domestic homicides between 2008 to 2018 in the NWT (Jaffe & Dawson, 2019).

Ethical Approval

Ethical approval was received from the Research Ethics Committee at Aurora College (#20190402) and a research license from Aurora Research Institute.

Methodology

Design

This report covers phase three of a study on the Development of a Comprehensive Approach to Family Violence. The first two phases of the study included 1) a scoping review to identify evidence from the published literature, and 2) a jurisdictional review to describe current territorial, national and relevant international approaches to family violence. This third and final phase reaches out to communities to co-develop the territorial approach to family violence by addressing two overarching research questions.

Research Questions (Phase 3):

1. What do Indigenous and newcomers to Canada living in the NWT say about family violence and ways to end family violence in their communities?
2. How do Indigenous and new Immigrant people in the NWT prioritize strategies/best practices from the scoping review conducted in phase one of this study?

Sharing Circles

Sharing circles were conducted with seven community groups in the territory. Six of the circles (Tuktoyuktuk, Fort McPherson, Fort Good Hope, Behchoko, Dettah, and Fort Simpson) were Indigenous; a seventh circle was newcomers to Canada and the territory (new immigrant women) and was held in Yellowknife. The communities were selected from the north, central and southern regions of the territory to recognize the distinctness of cultural groups.

Sharing circles, as a method, are referred to in the published literature as a conversational and relational process that is more consistent with an Indigenous worldview than the more western method of focus groups (Kovach, 2010; Lavallée, 2009; Rothe, Ozegovic & Carroll, 2009). In the Indigenous sharing circles, lunch (soup and bannock) was served prior to beginning the session; the sessions began and ended with a prayer; tobacco or tea was offered and accepted as respectful practice at the beginning of the session in five communities (one community chose not to have either tea or tobacco stating it was “not their custom”); the semi-constructed interview questions were facilitated by the research team, and sometimes augmented or translated by the community culture broker (see the footnote below). At the end of the sharing circle, the participants were each thanked and were given a gift card to use at the local northern store.

Plain language findings of scoping review. The findings of the scoping review were translated to plain language and included 14 best practice strategies that were identified in the published literature and met contextual fit for the NWT (Appendix B). A Family Violence Best Practice Metric Tool was developed with a four-point scale to measure the participants’ satisfaction with the best practice. The four point scale from highest rating to lowest included: Love it, Like it, Don’t like it, Never do that.

Participants were each given the metric tool and asked to rate the 14 best practices. Then, they were given stickers to identify their top five picks.

Sample and Recruitment

Indigenous youth and Elders and newcomers were invited into the sharing circles by a community culture broker¹. Participants were recruited purposively from immigrant and Indigenous populations in keeping with the findings of a national collaborative research team on domestic homicide whereby the four most vulnerable groups are Indigenous people, new immigrants, people living in rural, remote and northern parts of Canada and children (Jaffe & Dawson, year). There were 61 participants in total with a range of five to 11 participants in the seven sharing circles. The sharing circles took place at a time and location agreed upon by the community culture broker and the research team. This was in local community meeting rooms: Locations varied from Friendship Centre to Youth Centre to a classroom, Council Chambers and in one instance, a home living room, considering issues of access and privacy unique to each community.

Data Collection and Analysis

Data collection was facilitated by two to three researchers in all communities with the exception of one community where only one researcher was available to travel to the community. Data was collected in two ways. First, a demographic form was completed that identified age, ethnicity, and distinction (Indigenous or Newcomer). Three questions were included on the tool: Have you experienced family violence? Have you witnessed family

¹ A community culture broker is defined by our research team as a community member of the Indigenous geographical community or the newcomer community positioned as an Elder (knowledge keeper) or in a position in the community that is an access point for local people (shelter worker, social worker, recognized member of community). This person was a member of the designated community and recruited individuals who were youth and adults and wished to address family violence.

violence in your community? Do you have knowledge that family violence occurs in your community? Second, semi-structured questions were asked in the sharing circles. An oral informed consent process was used. This included an explanation of the study including risks, benefits, the volunteer nature of their participation, and their option to withdraw from the study. The sharing circles lasted from 66 minutes to three hours and 45 minutes. The sharing circles were digitally recorded, the audio file was downloaded to a password protected research office laptop and then the file was erased from the recorder. The audio files were transcribed by the research team members. In this report, sharing circles are identified with a letter from A to G to protect the anonymity of participants and communities.

The demographics were analyzed by assigning a participant to an age range category and ethnic group (Dene, Inuit and Métis, Non-Indigenous) on an excel spread sheet. The data was then collated and displayed on figures within this document. This method allows for anonymity and yet provides the reader with an understanding of the sample of community people participating. The answers (yes or no) to the family violence questions were collated and shared in a table.

Transcripts were shared with each research team member and a thematic analysis was performed. The transcripts were analyzed independently and then together through a process as follows: the transcript was read completely to get a feel and sense of what the participants were sharing. Then, the file was read again pulling out codes, meaningful phrases and interpretations. The codes were then grouped into sub-themes and an overarching theme was derived for the group of sub-themes.

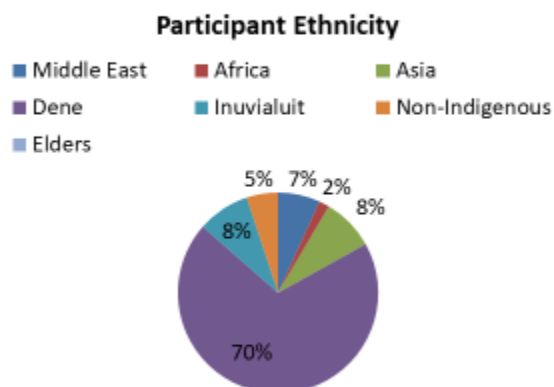
Findings

Demographics

Participants were from seven communities: group of newcomers² to Canada and six Indigenous communities. Figure One demonstrates their ethnicity. In the newcomer group, there were 10 participants: four were from the Middle East, one was from Africa, and five were from Asia. There were 48 Indigenous participants of which 43 were Dene and 5 were Inuvialuit. There were 3 non-Indigenous participants (counsellors). Two communities requested translators who provided spontaneous and periodic translation and clarification for first language speakers.

Figure 1: Participant Ethnicity

Community Participants



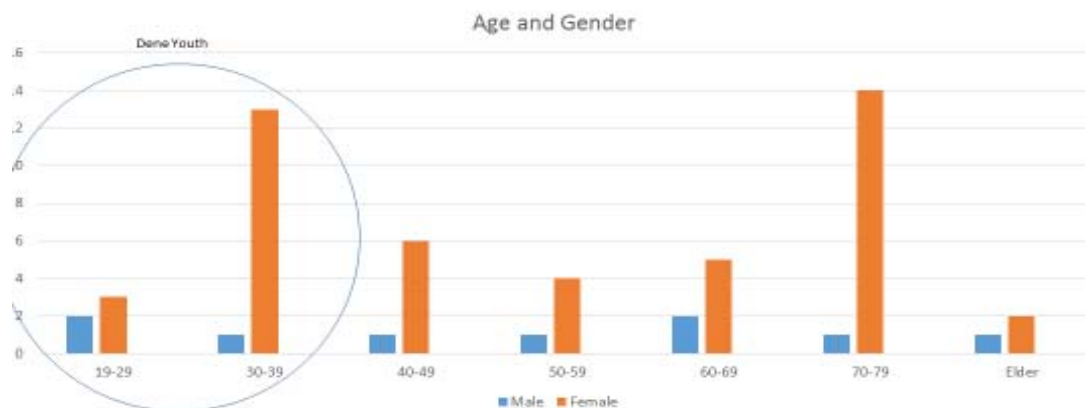
² We are using the term 'newcomers to Canada' to refer to territorial residents newly immigrated to Canada. We do not want this to be confused with the term 'settler'.

In Figure Two, participants were mostly female. This could be because the culture brokers were all female; it could be that there is higher female representation in violence; it may be the willingness to talk with strangers about a sensitive topic or that family violence is seen as a woman's issue. It could be about who was available at the time of the meeting. The researchers wondered if women spoke more freely in gender specific groups. Men's experiences of violence, as recounted in the group interviews, was definitely different from women's experiences.

The circle on the figure represents youth. Dene people defined youth is a person up to age 30. There were more Elders participating than youth. The intention was to bring Elders and youth together and this intention was shared with the culture brokers but group composition was dependent on who volunteered. The responses are based on years of experience. There is a difference in the way that age affected participation. For example, one youth had a conflict with another meeting occurring at the same time but made a point of coming to the sharing circle to share a story that she saw as a personal learning that could help other community members in their healing journey. This was augmented by detailed stories from Elders.

Two participants completed the demographic form with a translator and the translator wrote "Elder" by the age category. A third participant wrote 55+ rather than a specific age.

Figure 2: Participant Age and Gender



In Table One, the community participation consisted of five to 11 participants who were asked to respond to three categories in the demographic tool: I have experienced family violence; I have witnessed family violence; and, I know that violence is happening in the community. This gave us a picture of an individual's context with family violence and perhaps their motivation for attending a sharing circle about family violence. Some participants in the circles answered 100 percent for all three categories while others fell within a range of 10% to 91%. Every group had someone who answered yes to each category. There was a difference between the way the newcomer circle and the other circles responded to the categories. This may be because of the diverse representation of individuals within the immigrant group, issues of language and

interpretation of the categories and communication barriers. Response to the categories and the sharing circles demonstrates that the purpose was fulfilled.

Table1: Measures of Family Violence Experience, Exposure and Knowledge

Community Participants Expression of Violence

Family Violence Survey	SC 1 n=10	SC 2 n=11	SC 3 n=5	SC 4 n=10	SC 5 n=7	SC 6 n=11	SC 7 n=5	Total n=59*
Experienced it	10%	82%	60%	100%	57%	64%	80%	64%
Witnessed it	30%	91%	60%	100%	71%	73%	60%	71%
Know of it	60%	91%	100%	100%	71%	64%	100%	81%

- Predominantly women
- Elders and youth (≤ 30)

Sharing Circle Findings

Participants in the sharing circles shared stories under two major themes. The two themes, in their words, are *Lifetime of Violence* and *Breaking the Cycle*. These themes were in direct response to the research questions about their perceptions of family violence in their community and actions/strategies to end family violence.

Lifetime of Violence: That is My Violent Story

Participants in all six of the Indigenous communities, where sharing circles were conducted, agreed about the longevity of violence in their communities. These two quotes, a *Lifetime of Violence* and *That is my Violent Story*, were from two different participants. The first quote was from an Elder and the second quote was from a youth. Consistently, participants in the sharing circles reinforced that family violence is intimate partner violence. Participants did share that there are other forms of violence in the communities, for example, elder abuse, child sexual abuse, child neglect and child exposure to violence, but they predominantly discussed family violence as partner violence against women.

They described a *Lifetime of Violence* under four subthemes that centered on 1) what it is; 2) where it came from; 3) what are the impacts; and, 4) why it continues.

Figure 1: Conceptualizing family violence.

Conceptualizing Family Violence



What It Is

Community people in this study conceptualized family violence in their realities and experiences of living a lifetime of violence. Under this sub-theme are five sub-themes that offer an explanation of community violence. They include gendered violence, intergenerational violence, cycle of violence, *tough life*, and emotional abuse.

Gendered violence. This term transpired in the sharing circle as a normative understanding that violence is occurring more often with women and children than with men in both the newcomer and Indigenous sharing circle. This perception did not just come from a sharing circle that was predominantly women but it also came from one that was both men and women. One participant shared the dogma from the Church that supported this. She put it this way:

I thought about it a lot over the years as I was growing older. Because when we were young we're in school, and we're in residential school and we're taught by the Catholic church to honour they father and they mother. Honour your husband. You don't see something in there that says "honour your wife" (Participant Community B).

The lack of respect for women was felt by many participants. A participant stated, "*people drank and here and there you see husbands beating their wives and you just look like it's normal And so-you're the man's wife so you listen and if you don't, you get beaten up*". (Participant Community D). This speaks to a sense of obligation to behave in a certain way with your husband, the normalization of violence, and the effect of alcohol as the circumstance that escalated the behaviour.

A newcomer participant explained that in her culture women were expected to raise children and men were expected to put food upon the table, a patriarchal role. She went on to describe that he did this with power and control:

So he has the power, he has the right to do that, to ask everything, to ask his wife and the kids to follow him. But if, if he, he is not in a good temper, um, like, you know, angry um, or has a bad feeling outside then he come back and maybe do some bad thing to the, to his wife and... it is all around the world I think. And especially under the warring countries. So we have problem of underestimating women and the women are like less educated financially especially. So they, uh, the men mostly dominate (Participant Community A)

Some participants described violence as women's burden to bear, just because you are a woman, without autonomy and seen as a possession to do with you what he would like. For example, one participant told of her experience:

One of the times, his aunty came by and she seen me with black eyes and she was like "oh don't worry, its just going to last for awhile and you'll be okay" like. I'm looking at her and I'm like, she's like "just put up with it, its not going to last that long." Like I said, it's a learned behaviour. Some people they think like it is okay (Participant Community G).

This notion that violence is a learned behaviour was expressed by participants from other communities. Another participant from a different community describing family violence said:

...it runs in family. Well that's what for me it does. It's like what my mom says her parents, her mom, her dad. So, my mom and dad, and myself, I went through that

too... violence is learned, it's a learned behaviour from what I have experienced

(Participant Community G).

Within this description of gendered violence, intimate partner violence was highlighted most consistently but participants also acknowledged that elder abuse and children exposure to abuse is occurring. Participants all spoke about elder abuse, particularly financial abuse when the older adults' pension cheques arrived. One participant stated, *"There is a lot of elder abuse going on, to me it is more of a money situation. And it is sad to see that."* (Participant Community E). Elder abuse is happening in most of the communities and was discussed as occurring in families. One participant expanded on this to highlight the vulnerability of the elder with the following story:

And some of them are actually asked to leave their home because the party's going to start that day when the cheque comes in. And then you've got older adults who are who are quite vulnerable and they're on the street and wonder where they can be safe

(Participant Community B).

There were numerous stories of children being exposed and witness to violence. One participant said they hear *"shouting, threats, putting, risking the children's safety, is a really big one"* [form of violence]. Other participants talked about when they were growing up they spent long hours outside playing where they felt safe on the land and away from family violence in their homes. Sometimes there was a family member, like a grandmother, who had knowledge of their situation and she kept them safe. One participant told this story of playing outside to escape the violence and then staying with "granny":

Soon as my dad comes home, I always get my brother ready and say “let’s go, let’s go outside, let’s go play outside!” Same thing with [name of friend] Right away we meet [sobs] we play outside for hours. Hours... We seen my dad and my uncle hit my mom and my aunty and we play outside for hours and my granny come and look for us. We go to Granny’s house, we sleep there for two nights sometimes (Participant Community G).

Intergenerational violence. Participants described that violence sequences from grandparent to parent to child and continues through family members. It is long-lasting and known to the family. Some participants believe that family violence stems from lack of parenting skills that decimated through residential school oppression. One youth participant said

And I thought that part of, a lot of native youth, my age, who were having kids, they didn’t know how to parent, because they weren’t taught how to parent, cause their parents who went to residential school were never taught how to be successful parents, so that leads to violence, abuse and drug abuse, because they’ve seen their parents trying to forget the past. But what they think is fun [using drugs] is actually continuing that cycle. (Participant Community E)

Cycle of violence. Participants described the repetitive nature of family violence that they experience. Violent outbursts cycle around in ebbs and flows between better times to extreme unsafe times. One participant talked about the cycle in this way:

All this violence, all these abuses. Most of us went through. Most of us seen and most of us heard. I’ve so much times, like what [names another participant] brought up, called cops, social service, cops, social service...I grew with that. It’s still going, what’s happening, the cycle never stops. Still going, what’s happening, the cycle never stops.

Still going. It's not only her, there's her friends, her neighbours. Imagine their kids or somebody, they're drinking. Of course they're scared. (Participant Community B)

Tough life. Participants describe a tough life as one whereby they experience a great deal of heartache and pain. Their suffering is palpable and the stories are hard to listen to. A participant described it this way:

*A few years ago when I left my relationship with my first common-law of almost ten years. It's been ten years now since I left him, for a reason. Cause I don't want my kids to grow up the way I was grown up, I don't want. I just can't do that. I can't have my kids the ways I was grown up. It wasn't easy. It was a **tough life**. Especially for these residential survivors. And, 10 years ago when I left my first boyfriend I was with her [another participant in the room], me and her were at the shelter.* (Participant Community B)

Another participant shared similar thoughts and language to talk about her experience of family violence. She suggests that you can lock the door in an attempt to keep you safe but this is not a barrier to a violent person. She said, "*Lock the door, they kicked the door right down if they want to beat you up. I went through that. I know everything about all this. I went through a **tough life***". (Participant Community D)

Furthermore, participants described this tough life as a *severity of violence* and where violence occurs *all the time*. In terms of severity, a participant said, "*I put up with his bullshit all these years. I lived in violence. I lived in fear. I can't even go out and visit*" (Participant community D). *Bullshit* is a word used to describe a shift from silencing and normalizing the violence to activating change and speaking out about violence. As well *bullshit* is defined as

talking nonsense or being misleading. It appears that many people see family violence as an act that makes no sense and yet it is misleading because of the nature of the abuser as being one of control, manipulation and little power.

Emotional abuse. Participants talked about people hurting them with their words and the effect was that *“they harm you from the inside”* (Participant Community B). Words were used to control and make you feel less of a person so it harmed your heart and your core being as a person. A participant talked about this form of violence in this way:

They can hurt each other by words. Putting each other down. And sometimes you talk to them, you don't know how they are feeling, or you know, they harm you from the inside, So that's how I'm thinking, like sometimes you say bad stuff to them, or you know, that's how they're hurt. And we don't know how they're treated inside their heart, but that's how I'm thinking. Family violence hurts by words. (Participant Community B)

Where it Came From

Participants shared their thoughts about the root causes of violence from their experiences. It was discussed under four sub-themes: arranged marriage; colonialism and residential school, anger at the church, and alcohol and substance use.

Arranged marriage. Many older adults and Elders the circles, both from the immigrant group and the Indigenous group, spoke of arranged marriage and how it affected their lives. One participant said, *“I got married in an arranged marriage. So what happened is, I've been abused meantime, and then later on years when I got into the arranged marriage, I got physically abused, verbally, physically, right from the day”* (Participant Community B). In another community, a participant said:

There were forced marriage. Parents decided for their, for their boys and their girls. So around that time, it was still like parents making decisions that you were kinda forced. Thank goodness not like that today. (Participant Community D)

Colonialism and residential schooling. This was a shared sub-theme across all of the sharing circles. It was discussed through talks of historical trauma, loss of culture and language and oppression and racism. One participant shared “*I’ve been in [residential] school too in [names place]. Everything builds inside me. Sometimes that’s why sometime I get angry about it*” (Participant community B). A variety of emotions were described. Some participants described anger as this participant did and others described crying a lot. Still other participants reported that they drank to forget their painful feelings and the trauma.

Stories of residential schooling are detailed and sometimes contain multiple and consecutive stories embedded in the story. The abuse described is all unique to the individual but their stories cover physical abuse, emotional abuse, sexual assault, torture, separation of siblings, and older children at the school abusing younger children. Children were sent away from home to an institution as young as four years old. Sometimes, many children, living on the Mackenzie River system, were put on a boat and sent off to a school that was in another community along the river.

I stayed there [residential school] for seven years but I don’t recall the first two years. I kind of forgot my language. In the summertime, maybe I was down there one or two years and then finally the mission took us home to [name of community] and I couldn’t remember my mom. My sister brought me there. She said I am going to go down there and sell my ratskin. She said this woman is going to look after you. She is my mom but no I had never seen her before. She is going to look after you and then I will come back and

pick you up. They put me back in the boar and then it was getting late. I really started crying. My mom and my brother they were trying to make me cheer up...And later on there was violence in the school. Little bit by the girls. The Elder girls that were looking after you were really mean. The little one and I was on of them. How many times I was pushed out the door outside I wouldn't know. Standing outside shivering...One day the sister grabbed me by the arm [accused me of] stealing money. I don't know cents. I don't know nothing. And then she said that this girl reported that you stole her money. Where am I going to put that money? I have no pockets. I think the Sister just waited to put her hands on me. She spanked me so hard like I bleed my nose and I do not know myself anymore and when I woke up I was on a little short table. They use that to play on the table. I was on the table and she was wiping my face with wet towels, cold wet towels...that was why I was spanked and she knocked me right out, that sister. I was right out cold, was right out and she put water on my face and I came back to. Oh it was ever mean... (Participant Community F).

This residential school experience covered many years for this participant and she goes on to explain that she “*caught tuberculosis*” and was “*put in the hospital for two years*”. The room is quiet as she tells this story from one abusive event to another. We were listening attentively, trying to comprehend the awfulness that she endured. When she returned to her community from residential school, there were several step-dads in her life and they were all violent men whom became more aggressive when they were drinking. Her series of violent encounters culminated in her marriage to a man who was violent. At one point she says “I went through a hell of a time. I’ve seen so much violence. I think he [husband] was just trying to kill me but I was too tough”.

Anger at the Church. Throughout the conversations about family violence and where it came from are expressions of emotion (anger, confusion, hurt, pain) toward the Church, mostly as a result of residential school experiences. Some people find it hard to say as this applicant rephrased

Sometimes, that church, I mean, I'm sorry, I don't mean to say, I mean Catholic, you know, residential schooling...really drilled a lot of stuff in us, inside of us. And then later on the years, we realize "oh boy", you know...I'm doing for myself is trying to work at it, trying to teach my kids ...trying to undo whatever I forced on them [as a result of the drilling down and conditioning] (Participant Community B)

Another participant disclosed that she was sexually assaulted by a priest when she was in residential school. She stated, *"in residential school too I was sexually abused and that really does stay with you a long time. You are angry at the church"* (Participant Community F). This anger led to alcohol use and a suicide attempt. She said, *"I was suicidal and I had to be on depression pills and was on depression pills for the longest time"* (Participant Community F).

Some other participants talked about the language of the church as being one of sin, remorse and penance for particular wrong-doings that they committed in their lives and were asked to account for. This deficit language was about an external power and ritual rather than an internal spiritual awakening. One participant shared this belief:

...his Bible [her father's] came to me. Somebody knocked on my door. So, then that is when I left the Catholic religion. Because to me that was just what it was [a religion] not a relationship with God. I found that out. Everything bothers me. Still it bothers me...
(Participant Community F)

Alcohol and substance use. Some participants described drinking parties that evolved to forming relationships that were not healthy and led to aggression, jealousy, meanness, and family violence. They described an environment of alcohol use like this: *“There was, um, I drank, he drank, everybody drank. Weekend you party, that’s a normal thing them days. Way back in the 60s, we work five days and weekend we got to party”* (Participant Community D). One participant said that the result of all of the partying was, *“All of us women, we met our husbands through drinking. I don’t think we even loved our husbands when we married...that’s the way it was”* (Participant Community D).

Most participants acknowledged that substance use coincided with violence and conflict within families. This participant described the pattern of alcohol use and violence to which their grandmother regularly intervened:

I grew up with alcohol too. And um violence too...my Granny used to always get mad at my uncle and my dad...every time they fight, we go there. Oh my Granny knows when Friday night comes, she always comes and picks us up (Participant Community G).

What are the Impacts?

The impacts of family violence on individuals and communities were described by participants as *harm you from the inside*, poor health, children witnessing violence, mothering, community exposure to violence and children being placed in foster care.

Harm you from the inside. *Harm you from the inside* was the words of this participant who shared *“they can hurt each other by words, putting each other down. And sometimes you talk to them, you don’t know how you are feeling, or you know, they harm you from the inside...family violence hurts by words* (Participant Community B). Although *harm you from the*

inside were the words of one participant, they resounded from the words of many participants whom described being fearful, scared and internally hurt. This hurt stemmed from lowered self-esteem and shame because of the abusive treatment from an intimate person. The “*inside*” speaks to the very core of personhood. Another participant said to the group “*all these violences, all these abuses. Most of us went through, most of us seen and most of us heard*” (Participant Community B).

Harms were expressed by some participants in terms of self-harm, suicidal ideation and behaviours. One participant described denying the actions of her partner. She explained “*I really denied it and denied it. He didn’t hurt me. It was my fault. We understate it...*” (Participant Community F). She went on to describe significant the impact of the violence had become when she took a gun to kill herself but she could not find the shells. She said, “*I took a gun and I put it in. There was no shell in it. I was just trying it out. Where are the shells? I could not find it just then. I was going to shoot myself*” (Participant Community F). Realizing how harmful these actions were, she went to the drop in center for help. She said that *no shells* saved her.

Poor health. Other participants articulated the impacts of IPV on their health. They acknowledged that it has led to poorer health and specifically, their mental health. They were sophisticated in their understanding of how mental health impacts of IPV are connected to their overall health and wellbeing.

Participants described how trauma and being traumatized leads to poor health. They consider this an outcome of the violence they are experiencing or that was experienced by their parents/grandparents/ancestors. For example, a youth in one community recited when she was *going through a hard time*, she was told about *intergenerational trauma*. She began reflecting on early experiences of trauma, “*I guess one of our first traumas giving us grey blankets to give*

us diseases like smallpox and tuberculosis”, and ended her story by explaining, “So to this day family violence comes from the trauma that we Indigenous people suffered during an extensive timeline” (Participant Community F). So for this youth, poor health is an impact from trauma which is fueling family violence. Another participant said:

Health could be another reason too that could lead to family violence...it could be health, you know you're angry, you're angry at the health system. You know like it is something that could have been prevented. And then even that would trigger like angry, resenting...I'm just mad at the system...Because before I had my surgery done...my health just plunged. (Participant Community B)

This participant believes health is caught up with power and control which in turn, leads to more trauma and distrust of the system.

Children witnessing violence. Many of the participants spoke of witnessing violence or being treated violently or abusively when they were children. They described escaping the violence by playing outside, hiding in the house or in some cases, going to their granny's house. Many participants shared that the violence began when they were children and carried on into their adult lives. One participant told us:

My mother, she passed away. There was not a weekend that we had a peaceful sleep. There was so much violence. So many times we went under the bed behind a box. If we were down the river, then we would duck in the snow. We slept there until morning. I thought it was going to be over and done with and then he came back and there is still violence in my life. And I ended up getting married and the same thing. So much

violence with guns. To this day, I don't like them. I am scared of them, even the scent of them. (Participant Community F)

Mothering. Participants consistently demonstrated love and concern for their children as well as future generations of children, either their own or those of the community. Participants did their best to support and care for their children, protect their children and minimize or keep them away from the abuse and violence that they were exposed to. Often, this was to get them to a safe place. One participant described an ultimate sacrifice for her child to keep her safe.

I was afraid. I gave up my daughter. I only got one daughter. I gave my daughter to my uncle. I couldn't take her because I was scared I might touch her. Because I am a girl. I might do the same thing to my girls... On day my uncle asked me where are all your kids? I said I gave them all away. Why? Because this happened to me, that happened to me, and people told me, my friends told me they said, so I was scared to take them. Because you've been hurt, you don't want to hurt your kids. (Participant Community B)

Community exposure. Participants who volunteered in this study all spoke about family violence as being experienced and witnessed as a community. As community members, they see and hear the violence that is occurring and the dangerous impact of violence. One participant explained:

I witnessed a lot of violence in the community, friends that are beaten up. You see women with blackened eyes and in the 70s so much and young kids witness that and they think ok, and they grow up and that is why we have 40 alcohol [deaths] and two women's got killed and five people that got killed through alcohol. It is really hard. Like as a grandmother, I worry about my grandchildren. (Participant Community F)

Lateral violence arises from community exposure. As explained by one participant, she recognized generations of family members who were marginalized in her community. She identified how other community people called her, her parents, her children and then her grandchildren derogatory names that were mean-spirited, isolating and hurtful. This participant shared:

Today I fight for my brothers and sisters...I am not going to live that life I had to hide, my parents were drunks. They were never there for me...they [people in the community] touch you like that, they say you stink, you are garbage ...my son said mommy what is a [dirty word]? I went to my son's class and I talked to everyone there the RCMP, the teacher, the class...all these people got together as I raised my voice...I said my son does not have to live this way...I lived this way. Come to my house I do not want my son living the scars of society... I lived this way but they are not going to live this way.

(Participant Community C)

Foster care placements. Participants spoke about the fear of losing their children and the actual placement of children in foster homes. This impacts families gravely. A participant shared the effect on children when they are taken from their families:

They don't want to be taken away from their family. That's how they lose their tradition and their knowledge and their tradition, right? And if they come back they're like, what do you mean? What are you talking about? You know? They do all this [new participant] It's like they feel out of place [new participant]. Yeah [new participant]. They feel like they are lost, and they feel like they don't know who to turn to for all these things and they lost...but it's so sad, why they want to send those children when it's our family.

And they are over there. And that is how they lose their language and their culture

(Participant Community B).

Why it Continues?

Participants reflected on why family violence is continuing in their communities and provided a myriad of ideas about why violence is sustained. The ideas were that it is *normal*, *hard to leave*, non-interference, intergenerational and learned, alcohol use, limited or ineffective resources, lack of government action, and Church doctrine. The complexity and intersection of all of these sub-themes is what causes the violence to continue.

Normal. Participants described that violence is all around them. They often witness violence and sometimes their best resistance was to stay hidden away so that it is not noticed in the community. People know but little action is taken because as many participants in one community shared passionately and with frustration, *what can we do?* It feels overwhelming. A participant shared “*we understate it and that was the way I was taught*” (Participant Community F). Through this understating and hiding what is going on, there is an acceptance that it is occurring and this continues the hiding and thus, the normalizing of violence.

Hard to leave. Participants described having mixed feelings about leaving the violent relationship. They described the cycle of abuse and understood it but they wanted the coercion, manipulation, and violent outbursts within the cycle to go away; yet, leaving posed such uncertainty leaving what was known to them - their community and the people within it. Many of them made multiple attempts to leave. Some did leave and in leaving met other women from the community who provided support for each other when they returned. A participant commented:

Ten years ago when I left my first boyfriend-I was with her [pointing to another participant], me and her were at the shelter. We're both there, me, her, that's how we got started. We got to know each other. Until this day, we talk "how are you doing?" You know ? It is hard to leave abusive [relationships]. (Participant Community B)

Noninterference. Participants described how difficult it is to get involved in violence when you see it occurring in the community. They do not know what to do and if they do take action they are fearful of what the consequence of their action will be to them. A participant articulated the following narrative:

We see so much violence in our community. We just, when we're out there walking, for example, to my friend's house. They're arguing, and her boyfriend was about to hit her. Like, how do you approach them and, you know, when they're kind of halfway intoxicated and some of them are so intoxicated that you can't talk to them. But we see it everywhere. How could we approach them and say, you know, 'hey, they're young'. We have young kids everywhere and they see. (Participant Community B)

Alcohol use. As has been described above, participants described that violence erupts when people are under the influence of substance. They are not themselves and participants believe that you cannot reason with people who are intoxicated or you will get hurt. Participants described their concern with addictions in their communities, the lack of no treatment services available, and the increasing entrepreneurship of bootlegging that speaks to people's needs to address their addiction.

Limited or ineffective resources. Participants described that there is limited to no programming for men who use violence when serving time in corrections facilities and, particularly after they are released back into the community. They acknowledged there are

neither addictions treatment services nor programs for men whom perpetrate violence. A participant shared:

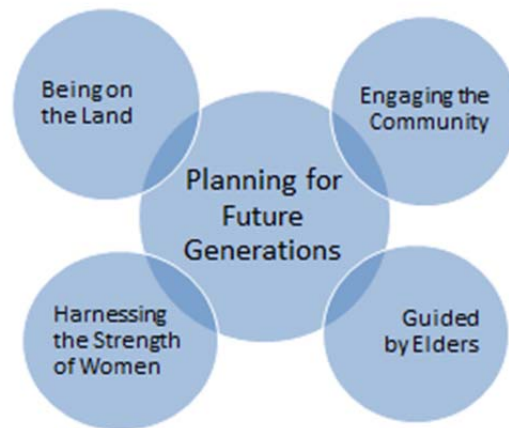
And it's non-stop. So you know, I mean you're fighting a losing battle, and these programs that they access are only available for one month, two months, maybe even three months. But that's it. After that, it's all undone. So that no matter how many programs they go through while in jail, it's usually easier to throw someone in jail then send them down to a treatment center. (Participant Community F)

Lack of government action. Participants described the violence as being so big and complex that everyone is overwhelmed with how to address it. They asked what it would take to end violence. When speaking about elected government officials, they suggested their MLAs are also feeling overwhelmed by the realities of violence in the NWT and in turn, with how to successfully address it at a community and a territorial level. Participants also suggested that MLAs might find it challenging to prioritize this issue as it might not reflect what their constituents see as important to their agenda. For both these reasons, participants described a lack of government action.

Breaking the Cycle: Dream Big

Participants described moving forward as breaking the cycle of family violence and doing so with hope and vision. As one participant said, “*dream big*”. Their solutions to family violence included being on the land, engaging in community, harnessing the strength of women and guidance by elders.

Figure 2: Breaking the Cycle: Dream Big



Being on the land. All participants spoke with reverence about the land. The land is a place of healing. They described the land as peaceful, quiet, and a place where wellness is promoted. They explained that when you are on the land you are “*free as a bird*” and where it is “*a way of life*”. You can just “*be*” in relation with the land and its inhabitants.

They want workshops to be held on the land. One participant stated, “*yes, like we can have workshops, different group activities. That would be good. And, to have an open fire and a drum dance*” (Participant Community F). They relate activities to cultural practices on the land that enhance/sustain cultural beliefs, identity, and traditions. There should be men’s groups as purported by a participant that when activities for men happen on the land and in their cultural setting their anger and bad feelings disappear:

Just like that, he felt good about himself. You know, he felt he was worth something instead of during his drinking. He put down, put down not only others but himself and the

land. The land has a purpose and the land takes away all his stuff that is in him. You go sit there in the peace, you feel it. Even just like this that those young people sit like this and talk and that helps. (Participant Community D)

When men are on probation, a community participant felt that was a good time to be on the land. She said, *“I think it’s really a good start if we could take those who the ones are on probation and take them out and do something with them. And that could go in your report, too”* (Participant Community D).

Sobriety is supported by being on the land. People do not use substances. The land is a place where healthy families grow. They do this by spending time together in camps; they are keeping busy and they are outside in the air; each family member has a role on the land and within the family. All of these activities are purposeful and the whole family and community share a sense of well-being.

Engaging the community. Participants suggested they can break the cycle of violence by getting involved, finding a supportive person to talk to, attending workshops and programs, and by practicing their faith.

Getting involved addressed the importance of the collective community and being connected to each other. They recognize that it is important to be a good neighbour and to put one’s self out there for each other. They talked about volunteering in the community. Through these activities, they will strengthen the fabric of the community.

Participants suggested that finding a supportive person to talk to is necessary to break the cycle. Some participants found formal counselling services helpful. As well, informal supports were noted as another way to help to share your story or seek solutions. In addition, participants

are guided by the advice of Elders. They suggest that people need to trust, share and ask for help in order to break the cycle.

Participants stated that workshops and programs are needed for men's groups, addictions treatment programs and programming in correction facilities. A participant said

And through the justice system, I think they need to have; they need to do more programs because one of my boys was in jail. He said it wasn't enough. And some of the boys just go to AA meetings and nothing else. I just go out so I could have my freedom. Get out of my cell for a while. So when you hear remarks like that, you know, you need to go to into the jail system and talk to the inmates too. (Participant Community F)

The workshops and programs will provide education for all community members (children, youth, and community people) and to newcomer immigrants to the territory. Indigenous participants said that it would be effective to highlight inspirational Dene people, like for example, Sharon and Shirley Firth (who represented Canada at international skiing competitions).

Women in the newcomer circle told us that they need to have education about Canadian law and particularly about the role of men and women in Canadian society. One participant shared the following story:

I heard a story here in Canada from a newcomer. They came from same, my place, and they stay here in Canada. After a few months, the man hit the woman, and she has damage on her face. And she went to the hospital, and they went to the court. And the judge ask him, he say "I don't know". Because in our religion and in our culture, it's normal for the man to hit the woman and nobody can judge him. Nobody show us or

explain to us what the rule is here in Canada...and the lawyer he stand with the man and now he is free. Because he say, no one, our sponsor or anyone from the government come to us when we came to Canada and explained for us how we can work with my husband or wife or my kids...and it's normal for us...I just say the people, they came to Canada, the newcomer, they should have program to explain the rules, how they work with the family. (Participant Community A)

Participants in the newcomer circle suggested that a cartoon booklet in plain language with visuals would be a good way to get the messages across to newcomers. One participant said:

Like maybe a small booklet with the cartoon, like that? So not always words. Like some picture, cartoon, and the simple explain to them. So this is wrong, this is right. So to compare that. So in Canada, what you don't do, what you should do. (Participant Community A)

Harnessing the strength of women. The majority of the participants were women and women in the communities recognized that they each have resilience and resistance to violence that is an internal resourcefulness. This internal resourcefulness shines a light on how they survive abuse and violence. In terms of women with children, there is a mothering aspect that is used to *protect the kids* and keep them safe. Participants shared that mothers have strategies they use to protect their children when being abused, like supporting children in *going to granny's*, like *playing outside*, and hiding when necessary. In addition, mothers use strategies to help break the intergenerational cycle of violence. A participant stated:

I have two boys, right? From what they have witnessed, how many times I was beaten up. Whatever. When your boys grow up to have partners, "Don't ever touch , don't ever

touch her, no matter what". To this day, they have never touched their partners and I have always made sure of that. For me, that's breaking your cycle. That violence, what you seen, don't practice it. (Participant Community F)

Participants were also resourceful with the services around them. They recognized strengths in the formal system to break the cycle of violence. Women talked about justice responses to family violence that they found helpful. A participant said, *"I think that when it stopped, when it slowly started stopping because they started going to court, right? They start getting charged, the men, for beating up their wife"* (Participant Community D). When we asked about the court system, another participant said, *"A court that works to help me and supports women"* (Participant Community B).

When they were asked about screening for IPV, participants raised important considerations if screening is to be used by front line service providers. A participant raised the following question, *"If they say yes [in response to asking a screening question], what are you going to do about it?"*(Participant Community D). Another participant said, *"So you better have something in place if you're going to ask that question at the health centre"* (Participant Community D). This suggests the importance of having a structured and effective response both from the service provider as well as the availability of services for women who positively screen for IPV. Both Indigenous and newcomer participants felt that the person who is counselling and helping them needs to be a professional, not just anyone in town. There is a lack of trust when it comes to maintaining anonymity and confidentiality. The newcomer sharing circle noted the importance of having a consistent provider which would improve the trust and safety in responding positively to an IPV screening question.

Guided by Elders. Participants told us that there is an important role for Elders in breaking the cycle. Because they are the traditional knowledge keepers “only the Elders” can lead the healing or be part of the healing within the Indigenous communities. They are seen as role models. A participant said:

For me, it is an honour to be in the presence of Elders, sharing their wisdom. And I think it would be great for the youth. And take that knowledge, that wisdom, that experience. It is also good for healing. We all experience things different but the experiences the Elders bring in and how the youth will take it and make it their own. (Participant Community F)

Similarly, the newcomer participants said the older generation is seen as the educators:

Because their aunts or the grandma, they go, they live in our home. And they, for me, I just remember when I was young, I listened for the grandma more than my...like when she say you cannot do that it's because she would be patient with me and explain everything. So I listened more [to her] than to my parents. (Participant Community A)

Community Feedback on the Scoping Review

In all the sharing circles, participants reviewed strategies that were highlighted in the scoping review and shared feedback in the interview process or by rating and then prioritizing the strategies. Table 2 identifies the findings.

Table 2: Community Response to Plain Language Scoping Review Findings

Strategy ³	Love it	Like it	Don't Like	Never Do	N/A
1	29	15	1	0	1
2	34	6	0	0	6
3	18	23	4	0	1
4	16	26	2	0	2
5	22	20	1	1	4
6	23	19	1	0	3
7	18	19	3	2	4
8	33	10	0	2	1
9	34	10	0	2	0
10	7	9	16	11	3
11	22	18	5	0	1
12	25	15	1	2	3
13	26	15	0	0	5
14	21	17	2	0	6

Every strategy was positively endorsed with the exception of number 10. This strategy, called “shaming abusers”, is a recommendation from Maori peoples in New Zealand (Memmott, 2010). 35% of focus group participants endorsed this strategy while 58% either did not like it or chose never to do it. One participant further responded in written comment: *“If we shame them, it may make it worse. Instead, it is best to show what they have been doing wrong and how it affects other people and guide them to a better path”* (Participant Community D). On the strategy helping men with anger, 54% of respondents loved this strategy while 33 % liked it. One participant who did not provide a response commented *“they won’t listen”*. The strategy, working together with child protection, while not as positive as the other endorsements, there are more don’t likes. It would be important to explore this further: Is this the stigma of being

³ The plain language strategies are found in Appendix B.

involved with child protection, or the double jeopardy described in the literature on the need to address this at a policy level? The strategy, share your stories of family violence with service providers, had similar response as child protection in that 9% of participants did not endorse this strategy. The newcomer group felt that there should be court mandated programs for men. For example, one participant stated:

Some [men] would say no. “No, I’m not going that”. I’m still going to stay even if they already found out guilty”. They’re not going to say “No, I’m not going to do that”. And they would say, “I’m not that kind of person” ...but what if it’s the, it would be like the court would say it’s mandatory that they have to do it, then that would be good (lines).

(Participant Community A)

Discussion

This study invited community people to be a part of the process of developing a comprehensive approach to family violence in the NWT. Through this process, they shared their experiences of family violence as *a lifetime of violence* and *that is my violent story*. Secondly, participants told us the way to move forward is *breaking the cycle* and *to dream big*. Participants conceptualized violence through four themes; 1) what it is, 2) where it comes from, 3) what are the impacts, and 4) why it continues. Through the interviews, it is recommended that considerations of culture are vital to ending violence. Many of the participants suggest an indigenous approach through healing on the land. Similarly, Payne, Olson and Parrish (2013) described the Pathway to Hope program in Alaska to end childhood abuse and promote healing. They suggest that frontline workers collaborate with local Elders and leaders to bring about change.

Cultural integration was a strong theme in both sharing circles and the literature identified through the Phase One scoping review. There was agreement amongst community participants about the importance of Elders as teachers, knowledge keepers, and ceremonial and spiritual guides. Participants agreed with the strategic direction of healing for men and trauma support for women. Shaming, one strategy suggested in the literature, was not supported by the community group participants. Instead, NWT communities wanted to focus on education, support, forgiveness, and healing.

This was the first study with newcomers to the territory but it may be important to consider the findings of another qualitative study that had both Indigenous and Newcomer participants. Berman, Alvernaz Mulchaly, Forchuk, Edmunds, Haldenby and Lopez (2009) describe that there is a commonality between homeless, Indigenous and Newcomer girls in Canada. Despite their uniqueness of culture, they do share *uprooting and displacement* in our society that enhances their oppression. When people relocate, they need to renew their sense of belonging and as suggested by the newcomers in a sharing circle, they need to engage in a new way which requires them to learn about the rules of Canadian society. Furthermore, according to Alaggia, Maiter and Jenny (2017), in a phenomenological study with Canadian helping professionals, there are five themes to consider when working with new immigrants: *enhancing client engagement and self-agency, advantages and drawbacks in use of interpreters, creative and intensive translation strategies, structural challenges and gender and cultural considerations* (Alaggia et al., 2017, p. 472). Since we have a varied group of participants from many different countries, their cultural isolation is enhanced. For some there are very few people from their country of origin. Some of Alaggia et al.'s (2017) strategies would have to be adapted to meet the needs of NWT newcomers. Interpreter services would be very limited but the idea of

our participants to bridge this gap through visual and plain language communication tools would be helpful.

Educational interventions were consistently referenced by the community sharing circle participants as a way forward to break the cycle of violence for the next generation of children, youth and families. The literature identifies several examples of well-researched prevention programs, curricula, poster and educational campaigns that target children, youth, family and community (Wuerch et al., 2019). However, caution must be applied when considering programs external to the community wisdom and local cultural strengths. Most community participants felt the key to breaking the cycle of violence was available through accessing Elders' wisdom, traditional teachings, and the healing properties of their land and culture. This community wish is echoed in the Zorn et al. (2017) recommendation that recognizes the unique properties of northern communities. Nixon et al. (2017) and Rasmus et al. (2014) promote the integration of Indigenous teachings into child/youth educational programs aimed at preventing violence.

Education for health professionals was also supported by the literature and by community participants. While there was general participant support for professionals to screen for family violence, community members felt strongly that service providers must be educated about family violence challenges, resources and pathways of support before inquiring about violence.

Enhancing justice responses to family violence was also endorsed by community participants, with some caveats for northern application. People believed that consequences and redirection were important to stopping intimate partner violence. Ideas that resonated from the literature include: charges laid, specialized court to help men and support women, or Domestic

Violence Court as described by Tutty and Babins-Wagner (2019), and more rigorous programming options for offenders in the justice system.

According to Burge, Ferrer, Foster, Becho and Talamantes (2017) in a longitudinal study about IPV conducted in the US, survivors of IPV whom are involved in the research process may be benefitting through this process as an intervention. This is a relevant point to consider with the way that this study was conducted. Burge et al. (2017) found that having conversations with survivors and thinking about personal situations in a reflective way is a strategy in itself to improve well-being through hopefulness, insight and improved coping. In the same way, this study offered a way for a group of community people to reflect on family violence and together suggest strategies to help end violence. One could argue that the Burge et al. (2017) study is longitudinal and this is a valid point but in terms of engagement for local northern researchers we have developed a relationship with many of the participants in previous studies on violence. This study continues the relationship and the dialogue with the community being part of the solution prior to a direction being set.

Conclusion

The collective wisdom of community participants enriches the first two phases of this research project. Participants echoed much of what was found through the scoping review of literature, but also deepened our understanding of the breadth and severity of family violence in the NWT. In particular, IPV against women has had lasting and significant effect on communities, families, and individual wellbeing. Sharing circle participants shared their rich insight into solutions, rated preferred strategies identified in the literature, and provided hope for an end to the cycle of violence. Promising approaches include the use of Elders in programming, the healing properties of the land, and the importance of education for the next generation of

young people in intimate relationships. Further research and program development would be helpful in the areas of building an integrated and supportive child protection/family violence response; support services to support screening for intimate partner violence; effective programs for men who use violence; and enhanced treatment for substance use.

The importance of this research is two-fold: community members were able to access plain language research recommendations from literature and other jurisdictions; and community members' voices will inform which strategies could be most useful and appropriate in the NWT. There are many implications moving forward to implement and enhance these findings.

Policy Implications

- Screening was endorsed as a solution to support community people to get help as long as when individuals disclose family violence, the frontline service provider who they disclose to, guides them to help; therefore, as universal screening is introduced in prenatal care and in emergency rooms across the territory, education about a clinical pathway for referral for victims of family violence must be implemented;
- Develop a clinical pathway for survivors of family violence that includes what to do when a person discloses family violence, how to provide empowered responses, who to contact for referral, what to report and where to report it.
- Healing programs are sought by community members: for men who use violence, for men in the correctional system, for substance use/addictions, for women and children who are healing from exposure to violence, and for parents/families/communities who are identifying healing pathways from colonization, residential school abuses and lateral violence;

Education Implications

- Newcomers identified the need for a visual knowledge translation guide to societal rules in Canada;
- Elders were identified in every community discussion as valuable teachers in many prevention and healing settings, such as teaching youth about coping with feelings, entering puberty and engaging in healthy intimate relationships; and teaching men and women parenting and relationship skills;
- Opportunities to learn about Indigenous cultural practices were seen as critically important to any programs addressing prevention and healing from violence;
- Enhance education and programming in the justice system (corrections and probation), particularly for men who use violence;
- Educate front line service providers, such as child protection workers and medical responders, about women's resistance to violence and their protective mothering strategies; and create more integrated and supportive responses.

Research Implications

- Use implementation (KT) science to evaluate the newcomer KT tool that is developed and implemented with newcomers;
- For the strategic directions that drew mixed responses from community members, further research could clarify pros and cons of strategies such as:
 - sharing family violence experiences with care providers,
 - court mandated treatment for abusers, and
 - working more collaboratively with the child protection system;

- Evaluate the effectiveness of programs that work in a preventative and collaborative manner with families at risk of violence, as an alternative or adjunct to child protection involvement, such as Healthy Family or other home outreach programs;
- Track the effectiveness of Domestic Violence Court (s);
- Return to the NWT communities where sharing circles were held to share the results of Phases 1-3 of this research project.

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Appendix A: Interview Questions

1. Can you tell us what you know about family violence?
Emotional/physical/sexual/economic/ spiritual/other
2. How is violence handled in your culture?
Reported? Talked about? Hidden? Responded to?
3. What could we (researchers) do to address family violence in your community?
Are there things in your community that work to stop family violence from happening?
4. What could government do to address family violence in your community?
What would you say to your MLA?
5. What do you think you could do to end family violence in your community?
For children? for adults? for the Elders? For pregnant women? For men?
6. What are traditional ways to create peaceful families and communities?
7. Is there anything else you think we need to know?

Appendix B: Plain Language Strategies

- | | | | | |
|--|---------|---------|---------------|---------------|
| 1. Provide learning about family violence | Love it | Like it | Don't like it | Never do that |
| 2. Make healthy families' | Love it | Like it | Don't like it | Never do that |
| 3. Share your story of family violence with service providers | Love it | Like it | Don't like it | Never do that |
| 4. Go to a counsellor | Love it | Like it | Don't like it | Never do that |
| 5. Have a safe helper | Love it | Like it | Don't like it | Never do that |
| 6. Getting help when there is violence in your family | Love it | Like it | Don't like it | Never do that |
| 7. A court that works to help men and support women | Love it | Like it | Don't like it | Never do that |
| 8. Having a safe place to live | Love it | Like it | Don't like it | Never do that |
| 9. Healing through culture (ceremony, on the land, traditions) | Love it | Like it | Don't like it | Never do that |
| 10. Shaming abusers | Love it | Like it | Don't like it | Never do that |
| 11. Working better with child protection | Love it | Like it | Don't like it | Never do that |
| 12. Helping men with anger | Love it | Like it | Don't like it | Never do that |
| 13. Helping people with addictions | Love it | Like it | Don't like it | Never do that |
| 14. Service providers working together | Love it | Like it | Don't like it | Never do that |