

Ontario Native Women's Association

Environmental Scan & Consultation Report

Submitted to:

Betty Kennedy
Executive Director, ONWA
380 Ray Boulevard,
Thunder Bay Ontario
P7B 4E6
(807) 623-3442
(807) 623-1104 fax

Principal Researcher:

Estelle Simard, MSW/RSW
Doctoral Candidate - Education

Submitted by:

Tannis Smith, MSW/RSW
Gaa Mino Bimaadiziwaad Counselling & Advocacy
5-59 N. Court St., Thunder Bay, ON P7A 4T6
tannisdarlene@gmail.com



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Executive Summary

The Ontario Native Women's Association has established the need for a holistic, culturally rooted, province-wide advocacy services that will support Aboriginal women to understand and act on their rights and their responsibilities when they have experienced violence and become involved with the child welfare system. Through an Indigenous research portfolio, ONWA has established scholarly foundations to support the future direction of the Ontario Native Women's Association advocacy program.

ONWA previously submitted a proposal to the Trillium Foundation, with the intention of establishing a unique advocacy program. This report is a result designed to influence services for Aboriginal women, their children, families, and communities by creating circles of care that foster cultural safe mental, physical, emotional, and spiritual needs of Aboriginal women requiring these important services. As a part of the five-year plan, ONWA's first year has been to establish a baseline consultation profile that reflects the unique needs of Aboriginal women who are involved with both the child welfare and violence against women sectors.

The environmental scan and consultations identify the need for an advocate specially designated to help Aboriginal women navigate through the complex systems they encounter when issues of domestic violence, violence against them, and child welfare are involved. These systems and services are designed to help but in reality are so complex and overburdened that Aboriginal women are often left disempowered and continue to have their voices unheard because they don't speak the 'language' of the system nor do they understand those systems 'language'.

As a part of the first year's initiative, ONWA has facilitated nine sites consultation throughout Ontario to assess the unique needs of service providers who work with Aboriginal women who are involved with the child welfare and violence against women sectors and Aboriginal women who experience these two systems. This consultation reflected the need for deep partnerships to form circles of care for women involved with the child welfare and violence against women sectors. The development of circles of care include - shelters, sexual assault programs, women's resource centres, child welfare agencies, justice personnel, social services, health, healing and wellness initiatives, training and employment, housing programs and education systems.

In addition to the consultation with service providers, ONWA met with a sample of the Aboriginal women who need to access these services and asked for their experience and insights into services and practices with the child welfare and violence against women services. The lived experience and critical reflection of the Aboriginal women involved with these services is presented by these participants, and is included as a valuable piece of information to drive the future direction of Circles of Care Five Year Proposal.

Advocacy will continue to guide and support Aboriginal women and through this empower the women to return to their roles as respected caregivers, teachers and healers, ensuring that Aboriginal children remain safe and thriving in the care of their own families.



This consultation report includes the following:

1. An Environmental Scan of Existing Literature
2. A literature review of child welfare and violence against women
3. A consultation report
 - a. Ontario service provider consultation
 - b. Ontario women accessing services consultation
4. Recommendations of future directions



Disclaimer

It is important to note, although participation and consultation has occurred with the agencies and First Nation communities across Ontario, this paper is not to be construed as a Treaty to Government consultation process, nor does it abrogate the responsibilities of Ministerial Government to engage local PTO's and its subsequent membership into the discussion.

The other disclaimer of this environmental scan is the obvious low numbers of client participation. Although the client participation is equal to thirty-two percent (32%) of overall participation, clients involved in these systems have barriers that are difficult to overcome which resulted in a few communities having low turn-out for client consultation.

Ontario Native Women's Association will continue to advocate for all Aboriginal women across the province of Ontario thereby completing its overall mandate.

ONWA is committed to providing services that strengthen communities and guarantee the preservation of Aboriginal culture, identity, art, language and heritage. Ending violence against Aboriginal women and their families and ensuring equal access to justice, education, health services, environmental stewardship and economic development, sits at the cornerstone of the organization. ONWA promotes social and cultural well-being for all Aboriginal women and their families, so that all women, regardless of tribal heritage may live their best life. <http://www.onwa-tbay.ca/mandate.htm>

Acknowledgements

Ontario's Social Service Agencies

The Ontario Native Women's Association would like to express its gratitude to the organizations and individuals that provided input into this process. In order to secure the anonymity of the participants a collective listing is provided of all the stakeholders whom participated in the project.

1. Native Organizations
 - Friendship Centres
 - Children's programs
 - Urban and First Nations health, social services, education and child welfare services
2. Child & Family Services
 - There are 49 child welfare agencies in the province of Ontario. Children's Aid Societies located near the nine consultation sites were invited to participate in the consultation process.
 - Child Welfare Prevention programs located near the nine consultation sites were also invited to participate in the consultation process.
3. Domestic Violence Services
4. Domestic Violence Coordinating Committees, Crisis Lines, Safe Houses, Shelters, Assaulted Women's and Victim's Helplines and Sexual Assault Centres



5. Children and Family Programs
 - ✓ Healthy Babies Healthy Children, Brighter Futures, CAP-C, CPNP, Best Start, day care centres
6. The Justice System
 - ✓ Police, Legal aid, courts, Aboriginal Community Justice Programs, Victim Witness programs
7. Health and Social Services
8. Ontario Works
9. Training and Employment
10. Aboriginal Skills & Employment Training Strategy programs
11. Housing
 - ✓ Transitional housing, Aboriginal housing initiatives, and local community housing programs
12. Education
 - ✓ Schools, Boards of Education, Early Childhood Education including day cares, Head Start programs and Best Start centres.

Host Locals and Organizations for Consultation

The Ontario Native Women's Association would like to say Miigwech to the Host Locals and Organizations for their quality in event planning, meal coordination, and their excellence in facilitation with their local service providers.

Northern Region

Kenora Anishinaabe Kweg - Kenora, Ontario

Sunset Women's Aboriginal Circle - Sioux Lookout, Ontario

Western Region

ONWA Head Office - Thunder Bay, Ontario

Longlac Reserve #58 - Longlac, Ontario

Eastern Region

Sudbury Native Women's Association - Sudbury, Ontario

Timmins Anishnabequek - Timmons, Ontario

Southern Region

Niagara Chapter Native Women - Fort Erie, Ontario

Odawa Native Friendship Centre - Ottawa, Ontario

Deshkan Ziibi Native Women's Group - London, Ontario



Child Welfare and Violence against Aboriginal Women

Aboriginal women have worth and are an important part in the rebuilding of community systems and structures. They carry within them the resiliency and strength to move forward through any situations with courage and dignity. This brief literature review is a composite reflection of the historical accounts that led to the inequalities in services by the perpetuation of the feminization of poverty. This literature review also highlights cultural restoration as a mechanism to best practice.

Child Welfare and Aboriginal Women

Aboriginal women in contemporary society continue to be overrepresented compared to their non-aboriginal counterpart in all aspects of the helping field. Research shows that, compared to the more privileged sectors of society, society's disadvantaged groups-such as single mothers and ethno-racial minorities-are disproportionately represented among those receiving social work intervention (Yee, Dubmri). If you are an Aboriginal single mother who has experienced family violence you are more likely to have a child welfare intervention that leads to the loss of your children. Analyse of the first cycle of the CIS-1998 data revealed that child welfare reports about First Nations children were more likely to be substantiated and be placed in out of home care (FNCSC 2006). Child welfare interventions that are a result of family violence continue to be one of the top reasons for referral, intake, and ultimately Aboriginal children coming into care of the system. In First Nations child maltreatment investigations exposure to domestic violence was the second most frequent substantiated category of maltreatment (FNCSC 2006).

Aboriginal mothers who experience family violence and have their children end up in the care of a children's aid society often face insurmountable barriers and are exposed to systems that have little to no understanding of the realities of Aboriginal families. In their 2009/10 report the OACAS stated that the vision for Aboriginal children and families is a province where they are treated with equity, respect, and justice (OACAS 2010). If this was a reality for Aboriginal families that have involvement with the child welfare system in Ontario then Aboriginal children in care wouldn't represent 40% of the overall number of children in care when Aboriginal people only represent 2% of the population in Ontario. Aboriginal families do not have a voice in the systems that are in place to help and heal at least in principle. Advocates believe that all Aboriginal communities should receive their fair share of funding and the resources promised to them in their treaty agreements (OACAS 2010). The current Ontario Advocates are promoting and advocating for systemic change and yet the lack of cultural safety on the ground or in grass roots services for the families continues to perpetuate children coming into and being lost to the protection system.

The statistics continue to climb with the overrepresentation of Aboriginal children in care because services do not match need. The advocates also advocate for funding to provide adequate and appropriate services-as defined by Aboriginal people (OACAS 2010). Funding for adequate services needs to include culturally safe services from Aboriginal peoples who understand the system within which they are advocating for micro, mezzo, and macro change. In an interview with John Beaucage on Aboriginal Foster Care and the "Millennium Scoop" that among his findings, Beaucage found that



aboriginal children are nearly 8 times more likely than other Canadian children to be separated from their families and put into institutions. He is calling this phenomenon the "millennium scoop", which refers to the shameful period in Canadian history when native children were forcefully taken en masse from their families and often adopted by non-aboriginal families. It was a clear assimilation program carried out by the Canadian government, and fell within the legacy of the residential schools.

Currently the policy context for child welfare services for Ontario Aboriginal children is set out in the Child and Family Service Act-the same act that applies to all other Ontario Children (Aboriginal Child Welfare in Ontario-A Discussion Paper-2011). Although this act has gone through many changes in an attempt to better meet the needs of the Aboriginal population it continues to undermine and disempower Aboriginal women caught in domestic abuse and violence. Each call made to police in incidents of family violence is reported to the child welfare authority. Often these referrals to child welfare authorities lead to the removal of children who are then placed in statutory care.

The Jumping through the Hoops report (Bennet, 2009) investigates Aboriginal mothers' experience with the child welfare system (p.79). Many of the mothers involved in a 2005 study conducted by Ka Ni Kanichihk, a Winnipeg based Native organization, reported the following contributors that instigate lack of trust and other serious issues in child welfare involvement:

"It was unclear to them as to why their children had been removed. Most of the removals were court-ordered and very few mothers were given the option of voluntarily placing their children in care while they dealt with their underlying issues. The manner in which their children were apprehended was traumatic. The child abuse investigations were inadequate and missed important information. Mothers reported frustration with worker's 'changing expectations' or with the perceived lack of attention given by workers 'to mothers' concerns. Numerous staff turnovers, resulting in children remaining in care for longer periods. Many social workers were young, making it difficult to relate to them." (p.80)

This report clearly demonstrates the need for Aboriginal specific advocates to help Aboriginal women navigate systems they are unfamiliar with, systems that have no real frame of reference for their lived experience as Aboriginal women, systems that were created as colonial mechanisms that continue to disintegrate the Aboriginal family.

Mothers expressed fear of having their children apprehended if they were to seek help from child and family services; they experienced many inconsistencies related to visitation rights, anxiety that their children would be further abused in foster care, and expectations of required programming that seemed to be ever-changing (Bennet, p.86). One mother noted that,

"I had to jump through hoops...going through parenting programs...I don't even know how many programs...I went for treatment...I got so many certificates it's unreal" (p.86)

Another Aboriginal mother described feeling worn out from trying to satisfy the workers' demands,

"I've been through so much programs in the last three months. Sometimes I barely ate. I've even



barely slept. I went from 8, 9 o'clock in the morning right to 9:30 at night. Sometimes all day long from three programs a day. Then I get up and have to go to another one. But I did it! I'm glad I did it. And I told my worker I'm just so programmed out" (p.86)

These Aboriginal mothers vocalized many other issues such as having inadequate legal representation, being advised to uphold child welfare plans and court orders as the lawyers took a submissive stance on their behalf: they were unaware of their legal rights, and felt deceived into thinking their children would be returned quicker which, ultimately, wasn't the case (p.80). None of the mothers were aware of the alternative dispute resolution mechanisms such as mediation or family group conferencing nor were they advised of these options by child welfare workers or by the lawyers assigned to represent them (pp 89-90)

The risks posed to Aboriginal children were often the result of structural decisions made by those outside of their communities (Blackstock, Trocme', 2005). Aboriginal women and children involved in the child welfare system are at higher risk of staying in the system due to systemic racism, lack of cultural sensitivity, and continued locus of control being in the hands of systems that are set up to oppress. Even though there is a myriad of services available to Aboriginal woman the barriers that keep them from accessing services continue.

The Governments Role in Creating Inequalities

The Canadian government has an important role in ending violence against Aboriginal women however; it has fallen short many times over (Hodes, 2006). The problem rests in Canada determining the nation's economic, social, and cultural priorities of which Aboriginal women and children are often discounted (Lakemen, 2004). Further, the Canadian government and its Ministries have not made the strategy of ending violence against Aboriginal women a priority through their programs, services, or departments. This has established systematic implications for Aboriginal women who are seeking services which are designed to support them. Often, women will experience the cultural insensitivity of seasoned personnel who are trained in the pedagogy of the indifference created by the Government of Canada. Violence against women is found in the politics of marginalization and elimination, and it continues to be deeply rooted in the patriarchy of colonialism and racism. The history of these politics is one such marker for understanding historic and current violence against women issues.

Historic Interventions

Voting

Aboriginal women of Canada are faced with the violence that continues to erode the women's personal sovereignty as well as the collective sovereignty of Native Nations (Robertson, 2012). Violence against Aboriginal women is historically rooted for Canada in the Indian Act of 1867. At this time, Aboriginal women were excluded from their roles as leaders within their communities. To become a part of the Canadian system, women and men for that matter, needed to disenfranchise themselves from their status, their rights, their family and their First Nation community first. If they chose to disenfranchise themselves, they were allowed to vote in the Canadian government system. Many Aboriginal people of Canada, chose not to be a part of the Canadian voting system, and kept their rights as Aboriginal people. It was not until the 1960s when Aboriginal people could begin to empower themselves through participation in Canada's political system, by voting.

Women of Canada were allowed to vote in the Canadian government in 1867 but the caveat was they



had to own land. It was not until 1917 when Canadian women were allowed to vote and it was not until the 1920's when Canadian women were allowed to hold spots in public office. Conversely, Aboriginal women were not allowed to vote until the 1960s and they were not allowed to participate in the First Nation's community governance until 1951. This included taking an active role as chief or council for the First Nation community. As a result of the colonization associated with the Indian Act of 1867, thousands of Aboriginal women lost their status when marrying men without status; thereby creating further disconnects from the instinctual leadership qualities inherent with women, leadership, and community. When women lost their status because of marriage, women were not allowed to participate in their home community and often asked by Indian agents or through them their Chiefs and Councils to leave the First Nation community.

Ontario Liquor Board

A history of the interventions started with Valverde (2004) and the attempt to establish a connection between the Ontario Liquor Board (OLB) and potential domestic violence interventions. Valverde (2004) discussed the interdiction list as one mechanism to control domestic violence. The interdiction list was also called the "black list" or the "Indian list", and is known as "the official list of chronic and troublesome alcoholics forbidden to buy or possess alcohol ... and some measure of protection against extreme drunkenness and (gendered) violence" (Valverde, 2004, p. 568). This list was an active list from the 1930s to 1990 (Valverde, 2004). It was administratively run by the Ontario Liquor Board, and was a mechanism for complaints to be received about drunkenness and violence against women. Once the board reviewed the complaint the person was put on the interdiction list, and was not able to buy liquor from a liquor control board or bar. Administrators, family doctors, children's aid societies, police, and family members could put people on the list (Valverde, 2004). In Valverde's study (2004), women had a voice for intervention, but the problems and residual effects were identified as retaliation and women were at times ostracized from family or community for making complaints to the OLB. Alcoholism did not and does not cause abuse to happen, however, it has the potential to escalate the family violence situation as Valverde (2004) pointed out.

Welfare "The Social Control for Women"

The history of welfare and welfare control is another major factor in the marginalization of women who are victims of domestic violence. Stockpiling on top of the issue of marginalization is the racism that exists for women who access welfare. Society, in general, has a pre-mediated understanding of welfare and its recipients that has led to a stereotype that promotes the negative reflections of its recipients (Lakemen, 2004). However, welfare has formally existed for as long as the 1930s, when "everyone was eligible to a minimal share in the community and in the common wealth" (Lakemen, 2004, p. 61). However, this has not typically been entirely accurate. For example, it was not until the 1970s when a woman was eligible for welfare assistance if her husband or partner was abusing her (Lakemen, 2004). Before that date, many women fled to transition houses (Lakemen, 2004). This was equally more difficult for the Aboriginal women who lived on-reserve as welfare's equivalent was food or cloth vouchers. Furthermore, Aboriginal women who were abused by their husbands often fled to the woods or went to extended families until it was safe to return.

Welfare policies have changed over the years; however, one thing is for sure, it has been a shrinking transfer payment with no benchmark to end its cutbacks (Lakemen, 2004). This is due to competing



interests across the government for funding of various initiatives but more importantly the government not defining its own standards related to welfare.

Provincial welfare policies across Canada have been criticized for failing to meet basic needs, the courts have consistently deemed economic and social rights as beyond their institutional capacity and there are no freestanding rights on equality, health care, or social assistance (Hodes, 2006, p. 195).

According to Hodes (2006) and Lakemen (2004), there is a deep connection between poverty and exposure to male violence. The impact of welfare policies rests with the Aboriginal women. Hodes (2006) further stated that as the government continues to restructure, it will deepen “women’s poverty, create conditions where women are at greater risks of exposure to all forms of violence, most notably sexual violence and domestic violence” (p. 196). Welfare policies continue to perpetuate a cycle of abuse for women, because of the systematic implications of its policies. Often times, women cannot afford to leave and stay in the relationship due to economic abuse; however, they face the same economic abuse when income is clawed back because it is seen as auxiliary dollars. Welfare at its finest is inadequate but conversely, can provide an option for women who are experience violence.

Predictable access to welfare was a power used by more than the destitute. It was a power in the hands of all women: the knowledge that we could (in a very modest amount) pay for food and shelter for ourselves and our kids by right. It was a power used to fend off attackers and to take advantage of opportunities. It was a basis on which to build one’s self-respect (Lakemen, 2004, p. 61).

According to Hodes (2006), 50 percent of women who were receiving welfare payments were the victim of domestic violence. Although Canada is a member of the International Convention on Economic, Social, and Cultural Rights (ICESCR) and the Convention on the Elimination of all forms of discrimination against women (CEDAW), they have yet to set the standards to end poverty.

Status of Aboriginal women

Canada’s political system has created legislative gaps between the federal and provincial systems (Harper, 2006). With this system, many federal programs were transferred to provincial governments; however, in regards to First Nation management much of the responsibility lays with the federal government. The problems of jurisdiction have led to issues of funding, housing, education, and the mainstreaming of all services for “all” people including First Nations. This problem has evolved into inequalities of resources and services.

Aboriginal women are at a disadvantage and this has been a systematic process across all levels of government. Inequalities existed for women from the start of the Indian Act of 1867. Aboriginal women suffer from high rates of violence in all forms. “Racialized violence targeting Aboriginal women is especially disturbing because they are passed down inter-generationally” (Harper, 2006, p. 34). Russell (2009) reported that 70% of women do not report on their violent partner while in transition homes. Russell (2009) also stated “Aboriginal women in Canada report rates of violence, including domestic violence and sexual assault, 3.5 times higher than non-Aboriginal women [...], and 5 times more likely than other Canadian women of the same age to die of violence” (p. 28). In addition, Harper



(2006) discussed the victimization of Aboriginal women to include disappearances and murder. This of course has substantial impacts on the family, because the family is directly linked to the experiences of the abuse, disappearance, or murder of their loved one.

The status quo continues to place Aboriginal women at a much greater risk of social and economic marginalization, laying fertile grounds for higher risks of victimization from all types of crimes – but most likely physical and sexual crimes at the forefront” (Harper, 2006, p. 35).

Aboriginal women have tremendous more inequalities than Aboriginal men. Harper (2006) discussed the nature of educational attainment for Aboriginal women and stated 40% of Aboriginal women have not graduated after the age of 25. Aboriginal women have lower economic status, lower annual incomes, lower livelihood options, lower education, higher involvement with the sex trade (Harper, 2006). Further, women are directly involved with CASs across Canada, as 40% of the total children in care across Canada is Aboriginal even though Aboriginals make up less than 1.5% of Canada’s total population. Even though women need the help they are fearful of losing their children once they ask for help (Meyer, 2010). In spite of the fear, if a women’s child is witness to the abuse, the women is more likely to access services, and “this is a positive observation as it shows victim’s protective attitudes towards more vulnerable parties in the cycle of violence” (Meyers, 2010, p. 724).

Relationships with justice systems, advocates and the legal systems are low, as violence against women is not typically the priority of police forces across Canada (Harper, 2006). “Amnesty International’s Report concluded that Canadian authorities and most police forces do not protect Aboriginal women from violent attacks (including murder) but, instead, tend to disregard these violations when they occur and are reported (Harper, 2006, p. 35). Because of the systematic oppression, there is a collective truth of the marginalization and devalued attitudes towards Aboriginal women in domestic violence situations.

Aboriginal women have a history of forced patriarchal worldviews, colonialism, and marginalization that has influenced the development across the generations. This rationale has led to the collective political and societal mindset that has allowed for the objectification and assault on Aboriginal women with the absence of police control. Aboriginal women are not protected through the systems that are meant to help them. They experience the abuse in the home front and once they leave they experience the abuse of the system. The review will address the government’s role in the marginalization of Aboriginal women and how this has linked to the feminization of poverty across the systems designed to help.



Feminization of Poverty

The history of women and their abuse experiences has been documented and recorded in the literature, and has formed many feminist frameworks. Feminism although important to Violence against Women sectors, is not the sole answer or perspective for Aboriginal women of Canada. Often times there is a rift between feminism and Aboriginal women's collective experience because Aboriginal women experience abuse at a level that is systematically linked to colonization and marginalization of Aboriginal women. Aboriginal women have suffered at the hands of "feminization of poverty, which promotes the need for structural changes to increase education and employment opportunities, increase social assistance rates, and provide safe housing options to help women and children who are living in poverty escape abuse" (Hanton, 2010, p. 56).

Rural women continue to have limited access to resources and services. They have issues with income, education, and family.

It has been widely reported that isolation, the presence of weapons in the home, the prevalence of more traditional patriarchal values, lack of transportation and community resources and problems with access to telephones and cell phones services make it more difficult for rural women and their children to get the help they require when experiencing abuse (Hanton, 2010, p. 55).

Rural women are experiencing abuse in isolation. They have inadequate communication networks, and abuse tends to be more silent in rural communities (Hanton, 2010). Isolation combined with bad weather creates equally dangerous situations for women who attempt to leave the abuser. Often times, the community response is difficult to find, because women do not know how to access the services (Hanton, 2010). What is equally problematic is when they do leave; Aboriginal women are faced with their socio-cultural context being dislodged. In smaller rural communities there is a conspiracy of silence active (Hanton, 2010). "We share a collective responsibility to break the silence about women abuse, and protect women and children from violence, even if this means that someone may experience social fall out as a result of their involvement" (Hanton, 2010, p. 57). Hanton (2010) further reported if community sanctions regarding family violence are high, then the level of family violence within a community is low but if the community sanctions regarding family violence are low, then the level of family violence within a community is high.

Many Aboriginal women do not know where to go or what their rights are when they do find "helping services" (Hanton, 2010). Aboriginal women continue to deal with the chaos and unpredictability related to their partners drinking (Hanton, 2010). Much like Valverde's (2004) earlier discussions of interventions, Hanton (2010) also stated alcoholism does not cause the violence rather, it increases the level and volatility of the violence.



The Interface for Child Welfare and Violence against Women

Aboriginal women of Canada are faced with complex and systematic issues when reaching for help through the services designed to “support” them. These women are in the most vulnerable position when it comes to violence. Lakemen (2004) pointed out the burden of poverty women face in collaboration with the violence. Some Aboriginal women are surviving against the abuse; however the system is still built against them doing so.

Violence against women cuts across all social constructions of class and culture but a women’s subject position at the intersection of gender, race, ability, age, ethnicity, sexual orientation, education and economic status, and her experience and / or dislocation increase vulnerability to violence and can inform the type and severity of the violence experienced (Holdes, 2006, p. 196).

Compounding these systematic issues is the collective mindset which propagates the beliefs about Aboriginal women and violence. Postmus and Ortega (2005) discussed the “attitudes and beliefs of child welfare supervisors about the overlap between domestic violence and child abuse are influenced by personal experiences, professional longevity, and training” (p. 483). This research was predicated on the history of the United States class action law suits on child welfare and domestic violence (Postmus and Ortega, 2005). In the United States class action lawsuit, child protection workers were told by the courts, “government may not penalize a mother, not otherwise unfit, who is battered by her partner, by separating her from her children; nor may children be separated from the mother, in effect visiting upon them the sins of their mother’s batterer” (p. 483). This led way to research being conducted on what the attitudes and beliefs of child welfare supervisor in regard to child welfare and domestic violence interventions. Further, it led to the recommendations of child welfare supervisors as the leaders to be trained in best practices for interventions but ultimately led to child welfare systems to re-evaluate their interventions with domestic violence (Postmus & Ortega, 2005).

Disparity in economic conditions breeds precarious circumstances for Aboriginal women. For example, without access to adequate services such as emergency shelters necessary to flee violent relationships, many Aboriginal women remain in the abusive environment or turn to prostitution as a means of supporting themselves (stolen sisters) and thus, further exploitation.

The National Association of Friendship Centres (NAFC) policy position paper (2010) asserts that:

“Violence against Canadian Aboriginal women is viewed as an extreme violation of Human Rights. Canadian Aboriginal women between the ages of 25-44 are five times more likely than other women of the same age to die as a result of violence. Racism and discrimination underpin the violence; however, it is amplified by legislative discrimination within Canada’s Indian Act and from the intergenerational impacts of colonialism and the Indian Residential Schools. Aboriginal people continue to suffer a loss of self-worth, identity, parenting and relationship skills; resulting in higher incidences of removal of their children by the Crown, incarceration and poverty” (p.5)

In Canada, witness to domestic violence is the second leading cause of abuse or neglect in child protection cases (child welfare, bwss, p.3); however, child welfare services have failed to subscribe to



interventions aimed at preserving the integrity of the family system, particularly Aboriginal.

The Child and Family Services of London and Middlesex in Ontario, providing services to several First Nations communities, collected descriptive data of open cases in 1995 and 2001 which indicates that a majority of Aboriginal families involved with their agency experience family violence, specifically spousal abuse perpetrated against the mother and child exposure to these incidences (First Nations seen at Middlesex, etc. p.5). Furthermore, open child protection cases where family violence is a factor has increased from 48% in 1995 to 66.7% in 2001 (p.4).

Ontario has the opportunity to address child welfare advocacy from all levels of services – policy, regulations, standards, and practice. Blackstock (2009) discusses the importance for the government to look at the long history of services that are not working for Aboriginal people of Canada. Blackstock (2009) and Simard (2009) discuss the importance of cultural ontology and cultural restoration in the development of services when working with Aboriginal people. Addressing services in a culturally restorative manner offers anti-oppressive approaches throughout the services structure thereby creating cultural safe venues (Blackstock, 2009; Simard, 2009).

Cindy Blackstock (2011) has promoted the breath of life theory (BOL) as a model of Aboriginal child welfare intervention. The breath of life theory is built on the assumption of Aboriginal worldview, perception, thought, and intervention. Building on relational worldview theory, Blackstock (2011) has researched meaningful manners of engaging women involved in child welfare interventions in a culturally safe manner.

The implications of the theory are potentially significant. In the field of child welfare, if this new theory is proven correct, it would suggest that child welfare interventions should focus on restoring balance among the relational worldview principles instead of over-focusing on treating the way that the imbalance manifests at the level of individual children (Blackstock, 2011, p. 13).

Simard (2009) discussed the importance culturally restorative practices in her Masters' research entitled *Culturally Restorative Child Welfare Practice – A Special Emphasis on Cultural Attachment theory*. In Simard (2009) the research portrayed best practice as defined through 20 years of direct child welfare service work at Weechi-it-te-win Family Services ~ an Ontario based Native child welfare agency. In addition to this work, Simard and Blight (2011) discussed important strategies to build the cultural structures for clients accessing helping services, government programs, or educational institutions. This pivotal work brought voice to cultural structures as key interventions to works with Aboriginal peoples.

Both researchers have highlighted Aboriginal approaches to child welfare interventions and works with Aboriginal people. In addition, both researchers have promoted Aboriginal best interest, as Aboriginal people innately know what type of services best works for them.



Scan of Services

	Thunder Bay	Hamilton/Niagara	Longlac/Geraldton	Ottawa	Sioux Lookout	Kenora	Timmins	Sudbury	London
Crisis Lines	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health Access Centre	✓			✓	✓	✓			
Housing	✓	✓	✓	✓	✓	✓	✓	✓	✓
Police Services	✓	✓	✓	✓	✓	✓	✓	✓	✓
Children's Aid Society	✓	✓	✓	✓	✓	✓	✓	✓	✓
Aboriginal Child Welfare Agencies	✓		✓		✓	✓	✓		✓
Legal Services	✓	✓	✓	✓	✓	✓	✓	✓	✓
Ontario Native Women's Association	✓	✓	✓	✓	✓	✓	✓	✓	✓
Native Friendship Centre	✓	✓	✓	✓	✓	✓	✓	✓	✓
Metis Nation of Ontario	✓	✓		✓		✓	✓	✓	
Advocacy Services	✓	✓		✓					
Women's Shelters	✓	✓	✓	✓	✓	✓	✓	✓	✓
Youth Programs	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medical Lodging	✓			✓	✓				
Aboriginal HIV/AIDS	✓	✓						✓	
Counseling Centres	✓	✓	✓	✓	✓	✓	✓	✓	✓
Employment and Training	✓	✓	✓	✓	✓	✓	✓	✓	✓

Table 1.1

The nine consultation sites across Ontario have an array of services in each city/town that provide programming and support to Aboriginal families. There are only three cities that have advocates who specifically provide child welfare advocacy. Thunder Bay has a private advocacy agency that service Aboriginal families involved with child welfare but are limited in the number of clients they are able to serve. Hamilton/Niagara and Ottawa have Ministry funded child welfare advocacy programs. Although each agency provides programming and support to families, they do not have staff specifically dedicated to providing advocacy for families involved with child welfare and domestic violence.



Consultation Methodology

Understanding the unique needs of the Aboriginal women across Ontario is an important part of this consultation process. Academic literature has begun to establish a rationale for advocacy programs across Ontario; however, sound research conducted through this study has established the much-needed auxiliary support for this initiative. The research has provided information to build a foundation of change that builds on solid recommendations put forth by Ontario's stakeholders and service providers. The research has provided the discussion of human relationships and the levels of competencies that exist to develop meaningful relationships with Aboriginal women who are in domestic violence situations and who are involved with the child welfare system.

Population and Sample

The sample consisted of nine communities throughout Ontario. Nine sites were chosen to participate in this study based on their demographics (# of Aboriginal people living in the area and #'s of children in care), the need for services identified by Aboriginal women's groups, and the capacity of the community to support an advocacy program. The consultation sites were: Thunder Bay, Hamilton/Niagara, Longlac/Geraldton, Ottawa, Sioux Lookout, Kenora, Timmins, Sudbury, and London. The ONWA Locals, service providers and families involved with violence against women and child welfare within these jurisdictions were invited to participate in this study. Participant feedback was secured to ensure anonymity of the stakeholders' involved in the consultation process.

Numbers of Participants at Consultations

Thunder Bay	20 Service Providers	
	1 Client	
Hamilton/Niagara	5 Service Providers	
	11 Clients	
Longlac/Geraldton	8 Service Providers	
	8 Clients	
Ottawa	8 Service Providers	
	2 Clients	
Sioux Lookout	15 Service Providers	
	7 Clients	
Kenora	4 Service Providers	
	5 Clients	
Timmins	6 Service Providers	
	4 Clients	
Sudbury	18 Service Providers	
	0 Clients	
London	9 Service Providers	
	8 Clients	

Service Providers Total = 93

Client Total = 46

Service Provider 68%

Client 32%



Service Provider Participation Profile

- ✓ 9 out of 9 ONWA locals
- ✓ 6 out of 9 Friendship Centers
- ✓ 7 out of 9 Shelters or Women's Centers
- ✓ 3 out of 9 Children's Aid Societies
- ✓ 2 Pre-mandated Child welfare Agencies
- ✓ 1 University
- ✓ 13 Aboriginal organizations
- ✓ 2 Health Access Centres or Hospitals
- ✓ 2 Ontario Works
- ✓ 2 Metis organizations
- ✓ 6 First Nations
- ✓ 1 First Nation Policing
- ✓ 2 Housing Centres
- ✓ 3 Mental Health Programs
- ✓ 3 Treatment and Support Services
- ✓ 1 Community Living Centre.

Unduplicated Total Services Organizations Participation = 16

Total Service Organization involved in Study = 63

Not all service providers participated in the study; however the study has evolved into a complete profile of the services women encounter with both the Violence against Women Centers and the Child Welfare agencies of Ontario. Further, this study captures the collective lived experiences of Ontario's Aboriginal women and their service provider's as stakeholders.

The above mentioned identify the services available and were systematically chosen because of their representation of external services that can be accessed and have programming specifically for Aboriginal women. Services include mental health and addictions, justice, Healthy Babies Healthy Children programs, NNADAP, child welfare, prevention services, housing, general welfare, traditional healing, education and training, parenting, family violence, women's shelters, language translation, psychological services, day cares, and medical and emergency room practitioners. All of these services have a common theme for Aboriginal woman as identified by Aboriginal women in the consultations. Aboriginal women felt bullied, judged, the services had long waitlists, and they felt over programmed. The need for a singular approach to this complex service provision is apparent based upon the external environmental scan completed in this initiative.

Research Design

The research design is an exploratory qualitative design which is utilized to capture an understanding of a phenomenon of interest – service providers and Aboriginal women's perspectives of the service support necessary to End Violence against Aboriginal women. Specifically the two services of interest were specific to the violence against women sector and the child welfare sector. The research has



incorporated an Indigenous qualitative research methodology. An Indigenous conceptual methodology and design is essential to this research because it is fundamentally built on a decolonization framework (Kovach, 2010). As a result, the design will be exploratory. The exploratory design is appropriate because it will further explain how Service providers and Aboriginal women view the services that are meant to help them and from this we can build appropriate models of helping.

Within a qualitative methodology, storytelling of the lived experience is noted throughout the literature. At times this has been called narrative research and has branched as a specific technique to narrative therapy. Further, narrative research is defined within the schools of social work, psychology, and helping professions. Storytelling is interpretative research in action and takes on a feminist approach (Koch, 1998). Storytelling is listening to the lived experiences of the participants and determining through data analysis the thematic of the research. The approach of storytelling is much more than just taking the words down of the participant, as it includes the research eliciting support during the interview process. This support comes through therapeutic acknowledgement of the lived experience and was focused on the utilization of sacred cultural opening and closing, as well as sacred medicines like smudge to help with the Aboriginal women's healing process.

Research Questions

Two groupings were created a) service providers and b) Aboriginal women and families involved in the child welfare system. Separate questions were discussed for each grouping.

Service providers were asked the following questions:

- ✓ What have you come to understand about Aboriginal women, violence, and child welfare?
 - What is needed?
- ✓ What are the existing partnerships that exist in this territory to end violence against Aboriginal women?
- ✓ What types of baseline data and research has your organization developed on violence against Aboriginal women and child welfare?
- ✓ What education and training opportunities has your organization provided to support the learning of the staff, in working towards ending violence against Aboriginal women?
- ✓ What are the top five issues that Aboriginal women face when involved with domestic violence and child welfare?

Client/Family was asked the following questions:

- ✓ What are your experiences with the child welfare and domestic violence systems?
- ✓ What do you recommend for service providers in these systems?
- ✓ How can ONWA help you and your family with these systems?

Data Collection

The group was divided into two groups – a) the service providers and b) the Aboriginal women and families who utilized both the violence against women and child welfare services. The research was



completed as a group process with clients in the morning sessions and service providers in the afternoon sessions, and within a circle formation. Sacred opening with smudge was offered, and in some instances healing songs were sung as a part of the opening. Information was written on a flip chart paper for the participant to see, and acknowledge if the lived experience was recorded properly. Another important factor of the data collection strategy was the proper documentation and handling of the qualitative survey instrument. All data was scribed on the flip charts in collaboration with the participants. After the data was recorded at all nine sites, the data was transcribed to word format. As the data was being collected it was important to “create files that have chronological record of the researcher’s observations in the project” (Rubin & Babbie, 1997). It was important for the researcher to have proper notations, dates, times, creating of original and master files, and copies for cutting up the notations (Rubin et al., 1997). The organization of the data collection prepared the researcher for data analysis.

Data Analysis

Rubin et al., (1997) discuss the analysis of the data collected in various projects as the process of looking for “universal truths, norms of behavior, patterns of interaction and events that are generally common to the area of study, and will determine what is important to observe and how to formulate conclusions on the basis of those conclusions” (p. 397). In reviewing that data, Rubin and Babbie suggest the importance of looking at frequencies, magnitudes, structures, processes, causes, and consequences (p. 395). Castle (2003) suggested in descriptive analysis it is important to “provide accurate portrayals or account of the characteristics of a particular individual, event, or group in real-life situations, to discover new meaning, determine the frequency with which it occurs, and classifying information”. Willis (2007) stated in storytelling research;

that meaning exists only in context and that qualitative interviewing does not uncover pre-existing truths. Instead it is a social process that constructs meaning through interaction. This approach does not attempt to present the truth of the matter as objective description does. Instead, it is an effort to represent in detail the perspectives of participants in the process or setting being studied (p. 297).

As a result, this process was essential to this data analysis, as it provided the lived experience necessary to the development of the thematic of experiences of service providers and Aboriginal women and families who encounter the violence against women and child welfare services throughout Ontario.

The following data is presented as the lived experience of these important stakeholders. It is written from their language and narrative, moreover it is presented as sound information to change the current paradigm.

Results: Service Providers

Question 1:

What have you come to understand about Aboriginal women, violence, and child



welfare? What is needed?

Culturally based services

- ✓ Women want to know who they are from a cultural context. They want programs that teach them the life giving qualities of their culture. They are requesting to learn their language. They want to go back to the sacred lodges and the sweat lodges for the power of healing. They want access to the sweat lodges and they are asking service providers to give them access. They want to learn from their elders the resiliency that runs through their veins, and they want workers who will see this within them. The women are asking for tobacco offerings and for workers to go with them to the lakes, the rivers, the forest or beaches to put it down and ask the Creator for help. The women want to connect to you as service providers but need the service providers to be at that level where they can hear it. They need the options to learn what it means to be ogitchitaakwe ... a women leader.

Historical Trauma

- ✓ Service providers identified the multi-generational cycle of abuse that exists for women who utilize the child welfare and domestic violence shelters. Violence has become a norm for some Aboriginal women and as a result do not know anything different. Inter-generational trauma and grief are etched into the perspectives of women who encounter child welfare agencies or violence against women centers. These helping centers have become “a part of the cycle of abuse” from the women’s perspective. A long time ago there was no services for women who were in domestic violence situations, and in some parts of Ontario there still continues to be no culturally appropriate services for women in these same domestic violence and child welfare situations.
- ✓ Looking at the history of the family will determine the types of services that are required – the higher the multi-generational trauma, the more care, concern, and culturally relevant services are needed. Often times, mothers will run to their First Nation communities thinking that it will be a solution to the problem, only to recognize they still need support but are now more isolated. Women need to be shown there is a light at the end of the tunnel, that there is hope for themselves, their children, their families, and their communities. Further, they need to know that when they come home to their communities, that the lateral violence perpetuated by workers will end. Families need representation through the process of child welfare, and we need to secure that for them.
- ✓ A history of patriarchal dominance has impacted women greatly. Life lessons have been shown through abuse and ridicule as objectified by our service systems. Women are continuing to fight against the system meant to help and yet face the inward docile requirements of managing through these systems. There is a difference between what is expected of abusive partners and the mothers involved with child welfare. For example, in one situation you need to complete



anger management and the women have an exceptionally long service plan of many different programs and tasks before they can get their children back.

Systems

- ✓ Women do not trust the system that is meant to help them. There is fear and helplessness within the women that are approaching these service systems. Fears from the historical abuse they have encountered but also fear of the system they are about to experience. Families have been identified as having low self-esteem; their voices are not strong enough. This has resulted in a perpetual cycle of child welfare and violence against women center clientele. Women believe they are not heard within the helping systems and as a result have not voiced their concerns. Women need to have access to the information so they can change ... often times this means as a family.
- ✓ Literacy can become an issue, as a result, as workers you need to spend time with them and help them understand the dynamics of the systems they are about to encounter.
- ✓ Women need to understand the cycle of abuse and the Aboriginal healing strategies that can result through defining its opposite. For example, what is the opposite to violence, to spiritual abuse, to emotional abuse, to verbal abuse, and how can we as service providers build these options for women. Another example included culturally relevant parenting programs.

Family

- ✓ Mothers do not always leave their spouse. Together they learn about trauma, its impacts, and heal as a family together. Mothers and fathers want to be in their children's lives, but need to be educated in terms of colonial impacts, effects, and alternatives to these issues. Often times, healing for families continues across the lifespan, as a result, what are the community standards that need to be in place when working with women and their families. What is required for a family instead of the illusion of a perfect family that is idealized by the child welfare agencies?
- ✓ Women are scared for their children when they enter child welfare agencies. Questions of cross cultural placement and timelines associated with mandatory healing requirements compound this issue. Women need to contend with foster parents and the spoiled relationship already established often by the social worker. Threats by foster parents on parents have been noted in this consultation. Some foster homes are no better than their own biological home said one service provider. The cross cultural relationship is heightened by racism, one service provider stated "in our area it really sickens me, since the economic downturn, a lot of people have started fostering, some parents that were so racist in the past (especially in minor hockey and other community events) have a lot of negative attitudes and stigma against Aboriginal people". This fear of racism subjected on the children in care is a perspective voiced by the service providers on behalf of the women.
- ✓ At the same time, women have a deep commitment to the Aboriginal men who are in their field



of influence – partners, brothers, uncles, dads, grandfathers and sons. Women want their men to succeed. They know the legacy and the racism a man feels in this colonial system. They know how difficult it is for a man to get a job in today’s society. Women have acknowledged the importance of supporting the development of men’s programs. Aboriginal men’s programs need to be run and facilitated by Aboriginal men. This will stop the power imbalance that already exists. Further, it will provide the opportunity for men to learn their role as father, as provider, as uncle, and grandfather. Men need to feel good about themselves and programs need to be designed to include fatherhood.

The Relationship

- ✓ Service providers generally do not work together in terms of service provisions. Often times they have conflicting approaches to working with the family units. Competing funding agreements, confidentiality and privacy concerns, statistics, and jurisdiction all constitutes a rationale for not working together. Often times us as service providers do not have baseline data on what the profiles look like in terms of the Aboriginal service provision. As service providers if we do not connect with each other, and as a result, the parents will fall through the cracks in our systems.
- ✓ Service providers have identified a lack of Elder participation through the continuum of services for Aboriginal women who experience both the child welfare and violence against women services. It was collectively shared that there needs to be elders who can share their experience and wisdom, to prevent issues of violence against women.
- ✓ Service providers who are engaged with the family do not have “powers” to make decisions as the child welfare workers are seen as having all the power in the decision making process. It is also unlikely that child welfare agencies utilize a multi-disciplinary approach when working with families.
- ✓ Service providers need to engage First Nation communities and families in supporting women whom are in crisis. Parents and families feel shame for their own issues; however, this is exasperated in times of working with child welfare and violence against women sectors. As a result, workers must foster a relationship that builds the worth of a person in light of the historical context that exists. Workers need to understand the extra-ordinary experience of residential school and subsequent reserve life. Workers need to understand that 200 years of colonial impacts on women and families has eroded healthy self-esteem of families.
- ✓ Service providers need to be able to distinguish between compliancy and giving up due to historical effects of depression and the like. Parents tend to give up when there is no support; it is the workers job to help overcome barriers such as shyness. Women need a hand extended to them and when it is not there it is easy for others such as predators that will open their door that much more easily to a vulnerable young Aboriginal woman.

Continuum of Care – The System’s requirements

- ✓ Advocacy and protection throughout the systems was identified as a major need for the women



of Ontario who experience child welfare and violence against women services and agencies. Advocates need to be involved throughout the child welfare process. Advocates need to be personable and truly there for the client.

- ✓ There is the need to have holistic Aboriginal healing centers for families. Service providers have identified the need to have services provided by Aboriginal women for Aboriginal women. These services would include healing, advocacy, support, education on rights, and education on violence prevention.
- ✓ Violence against women centres need to acknowledge the uniqueness of an Aboriginal women's culture and should incorporate some types of programming to this sector of the population. Make the center a culturally safe milieu where the client will want to share their story and learn how to live a different way.
- ✓ Addiction services are needed for families involved with the child welfare and violence against women sectors. It is important to have a multi-disciplinary approach to opiate addiction. Child welfare agencies should not promote methadone as the only option. For example, some child welfare agencies streamline methadone as a preferred treatment on the Aboriginal women, when they have alternative ways of developing a good life through traditional healing centers. These centers utilize traditional sweats and ceremonies to help the parents through the addiction and help to deal with the historical effect of colonialism. Some service providers recommended more family treatment centers throughout Ontario.
- ✓ Service providers identified the need for a continuum of housing services for women. Housing services needs to have policies that allows for the opportunities for children to return home. Often times, if a family becomes involved in child welfare services and their children go into foster care they will lose their housing and may not qualify for the housing required. Housing needs to allow for the timeframes of the re-unification processes.
- ✓ Service providers need to make better connections with other service providers. For example, some service providers have talked about working in isolation from each other and do not know what services are available as an option for the women clientele. Conversely, in some parts of Ontario, mothers are streamlined – police intervention, domestic violence shelters, court systems, and child welfare seem to work in collaboration without culturally relevant or safe practices.
- ✓ Service providers need to be educated in Indigenous ways of knowing and have a strong understanding of colonial impacts on service provision with Aboriginal women. They need an Indigenous skill set to make services work for Aboriginal women.
- ✓ Drugs, alcohol, and addictions go hand in hand with abuse. Services need to address all these issues. There also needs to be victim response programs that support the family in immediate



crisis situations. This exists only in certain First Nation communities and is not typically a mobile response unit in urban centers.

- ✓ Families are looking for support with their own community family support workers. These workers need to be sincere, and willing to work with the family as a whole. They need to provide options for the family so they can heal together.
- ✓ As service providers we need to ask ourselves how we are doing and reflect of areas of improvement and strengths. We need to ask the Aboriginal women and families for feedback on our services. Evaluation is an important part of our service process. Some service providers have self-identified as not spending as much time as they should on the actual “helping” part of their jobs.
- ✓ Service providers noted that when young mothers are having children in hospitals they are automatically being referred to child welfare agencies due to their age/race. This is true, even if mothers do not have addiction issues. As a result, there is a great need for nurses and social workers within hospitals to be educated in working with Aboriginal women. Prevention programs that promote healthy pregnancy and new born care programs need to be developed to support the young mothers before children are born. This will also prevent unnecessary child welfare interventions in which the infant is removed from the parent.
- ✓ In regards to Ontario Works programs, alternative options need to be in place for women who are involved with the child welfare system. Currently, mothers can lose their ability to maintain housing, and provide necessary meals and snacks for access visits if their children go into foster care as the children are removed from their OW assistance.
- ✓ Educational systems are completing the duty to report without understanding the poverty that exists within Aboriginal families. As a result, protection cases begin with the absence of educational programs such as food programs – breakfast programs, etc.
- ✓ Workers need to talk with the parents about the process of assessments that are completed on the mothers. For example, when parental capacity assessments are completed there needs to be a discussion on what this process is about, and workers need to ensure cultural context is given to the person completing the assessments. Some mothers have developmental disabilities and need additional supports. Child welfare workers and workers in the violence against women sector need to collaborate more with the community living sector.
- ✓ Service providers need to look at their intake process and eligibility requirements. How helpful are they? Have we worked with client stakeholders to determine if the eligibility requirements are open or are they closed? Have we as an agency determined if the services are accessible to all, and if so how culturally safe are they to the clients whom access them? Some communities are difficult to get out of because of the remoteness, and at times the centers for violence against women are difficult to access as well due to transportation issues.
- ✓ Legal workers need to be identified for women and need to remain consistent. High turnover rates in court settings were noted in different parts of Ontario.



Child Welfare

- ✓ Child welfare agencies have not protected the rights of Aboriginal women and have not been working at restoring a cycle of healing. Child welfare agencies have perpetuated an act of violence against women by not working collaboratively with the client or other service providers. Several service providers have identified “bullying” as a standard of service practice with Aboriginal women, often using ultimatums as the modus operandi for service practice. Service providers have stated some child welfare workers have said to their clients “do this or else you will lose your children”. As a result, it is a general belief of those whom participated in the study that child welfare agencies continue to break up the Aboriginal families across Ontario, instead of working with the women in the domestic violence situation.
- ✓ Aboriginal women need advocates with them so they understand what their rights are in relation to their children. Often times when there is an advocate involved with the family, the child welfare worker will not be as authoritarian or harsh with the Aboriginal woman. When women talk to their workers they have stressed that they feel intimidated by the child welfare workers. Aboriginal women who go to child welfare agencies with an advocate are treated more respectfully and workers tend to be more open to making an alternative plan. Service providers have noticed humility comes with present of other workers, and this is needed when working with the Aboriginal women population.
- ✓ Child welfare workers, including Aboriginal agencies, need to understand the Indigenous skill set necessary for working with Aboriginal clients. They need to have a practice that is not within the dominant worldview but includes more of a bi-cultural option. The mainstream child welfare agencies need to establish relationships with the educational sector to secure a decolonized approach when working with Aboriginal women. To assume Aboriginal agencies are working within an Indigenous practice paradigm is a fallacy, because they have to operate within the Ministry’s protection paradigm. This has resulted in a continual abuse of power, which continues to erode the Aboriginal family unit. Often times, the child welfare workers will use intimidations, coercion, and isolation as tactics when working with Aboriginal women. This of course is another form of abuse but is perpetrated by the system.
- ✓ Child welfare and violence against women clientele need a therapeutic option as opposed to a penalized system of care. Some First Nation communities have extremely high caseloads of children in care and as a result, have had to take strong stance with child welfare agencies. In some cases, children’s aid societies have been band council resolutioned off their reserve. Still in some cases, First Nation communities have created movements like “Taking our Children Back” as a strategy to repatriate the children in care. Child welfare agencies need to establish protocols with First Nation communities and let them participate in the design of treatment for their community and its members.
- ✓ Child welfare agencies need to work more effectively with their surrounding First Nation communities. Workers have identified a lack of connection to the child welfare agency in spite



of the fact there could have been collaborative services for the child and family. Child welfare agencies need to be aware that some foster families will sabotage the parental rights and as a result, the child welfare agency needs to talk about concerns directly to the parents instead of collusion building within the child welfare setting. This is not to minimize the importance of foster families as foster families have been recommended to participate in the reunification of the family unit. Re-unification training and transitional support should be a mandatory requirement for all foster families who care for Aboriginal children.

- ✓ One concern that was brought up by service providers is the issue of performances of Aboriginal child welfare agencies across Ontario. Aboriginal agencies are not always the solution, there needs to be some sort of checks and balances to hold the agencies accountable to their stakeholder groups. Further, service providers have voiced the concern over nepotism within Aboriginal child welfare settings. For example, “some families have their children taken away, some in the exact same situation don’t, certain families are exempted from the rules, and other families see this, need for more consistency and fairness”.
- ✓ Customary Care is an important part of development for child welfare agencies. It is important to have established customary care options as designed through mutual consent with the area First Nation communities. Further, the child welfare agency should consider long term customary care as a placement option with all the customary codes established as a primary service option. Caregivers under customary care need to be respected and treated with kindness.
- ✓ It is important to note, that children in care, often before the age of 18 are signing themselves out of care and returning home. Once they return home they are seeking out the essentials of life, who they are, where they come from, who their family is, etc. As a result, often times it is the family and the community whom are re-building the inner core of the Aboriginal child.
- ✓ Poverty is a key driver to child welfare investigation and interventions; as a result, there is the need to focus on prevention in child welfare settings. If there is no crib do not threaten to take the child away, help the family buy a crib. Parents want to see their children; they want access, and do not always have the funds to travel to see them. Help parents have access to their children, with travel grants or take them to see their children. If a family is struggling with food, start prevention programs like food banks, food stamps, or give them vouchers for baby food, milk, or general groceries. It is suggested that workers don’t look in the bare cupboards with judgment, but help the parents fill it with food.
- ✓ Understand the cultural norms for parenting are different. Oftentimes parents use moss bags, tikinagans, swings, as alternatives to cribs. Through collaboration with your neighboring First Nation community you can determine what cultural norms are.
- ✓ Self-identification is an important part of the intake process. As an Aboriginal you have more rights but at the front end it is not a standardized question for child welfare agencies.



- ✓ Child welfare tools exasperate the ineffective practice with Aboriginal women. These tools are SAFE and PRIDE, and the kinship services continuum. For example, Kinship services do not provide adequate financial support and extremely limited supports for families. Further, time limits for children in care before being made crown wards should not be cumulative, as there is not enough time for the family to heal.
- ✓ Children need to remain at the center. Children are waiting for their parents to get better and be “re-claimed” by their parents. If this is the end goal, then as service providers we need to make this happen through the services within our organization.

General

- ✓ In relation to women, violence, and child welfare, there is still a great deal of shame and silence. Inner turmoil has been the collective experience of women who encounter these service agencies. The women do not know what their rights are, or how child welfare services will impact themselves, their children, or their families.
- ✓ Upon review of the discussions, it was apparent many of the service providers voiced the need for an Aboriginal child welfare law that promoted holistic services based in Indigenous ways.
- ✓ Changes need to be made at a provincial level in collaboration with our First Nation communities. Our roles as principal stakeholders need to be acknowledged, and the child welfare process needs to evolve into a reconciliatory process.

Question 2:

What are the existing partnerships that exist in this territory to end violence against Aboriginal women?

Strengthening Connections

There were many different programs but it was clear there was the isolation of services across the province. Each program has attempted to create and establish a referral process but most have not entered into a formal protocol where there is an agreed upon vision for ending violence against women. It is clear there is a protocol for child protection services with the violence against women centers called the CAS/VAW protocol agreement; however, the vision is not to stop the violence but to ensure the safety of the children who witness or have experience the violence.

All nine sites had child welfare agencies and violence against women sectors signed into the CAS/VAW protocol, with no other service sectors participating in the VAW protocol. The mission of all 8 of the 9 sites was limited to these two service sectors, in spite of any other services existing throughout this area. Although, this is not a composite reflection of all Ontario’s CAS/VAW protocol agreements, it would suggest further inquiry.

In two of the nine sites, there was a circle of care network created. The site locations had the



participation of the CAS/VAW as well as other service providers within their jurisdiction. These site locations did have an active advocate program and will be highlighted as exemplars.

In all of the 9 sites there is a range of services that can promote a circle of care network for women, children, and families who experience violence

Exemplars

There are many different programs throughout Ontario; however, at the nine sites throughout Ontario, there are two exemplars with unique “circle of care” networks at the site location.

Niagara Area has evolved into the exemplar in terms of Ending Violence against Women partnerships:

Committee to End Violence against Women: consists of membership with Niagara Regional Native Centre, Fort Erie Friendship Centre, and Niagara Chapter Native Women (NCNW). Local CAS/FAC Niagara, formed a committee to End Violence against Women, and constructed an integrated framework, with protocols and structure to determine who does what across services. The NCNW lead the initiative and they brought in other service stakeholders to ensure services continued. Since then the Committee to End Violence against Women has entered into protocols with the Niagara Regional Policy, Legal Aid Clinic, Three Fires Diversion program, and Sister in Spirit Vigil. Given there is still work to be done, this initiative has shown how the ONWA locals can promote change within the service structures across Ontario.

The Aboriginal Child Advocate Program is a unique, one of a kind, joint initiative between the Niagara Chapter-Native Woman Inc., Family and Children’s Services Niagara, Niagara Native Restorative Circle funded by the Ontario Ministry of Child and Youth Services. This project has worked to provide advocacy services to families involved with the child welfare system.

Objectives of the program are:

- To increase the number of First Nations placement options i.e., Kinship, Customary Care and Native Foster Homes;
- To increase cultural awareness for FACS staff and to improve the delivery of culturally appropriate services;
- To promote liaison services for children and youth who are in the care of Family and Children’s Services Niagara (FACS) with Aboriginal communities to promote cultural integrity, collaboration and connection for children and their families

The Ottawa Area has worked collaboratively to build a reconciliatory process with the child welfare families who fall within domestic violence spectrum of services. Planning to address violence from a holistic circle of care perspective, inclusive of women and children is a focus to this project.

The Circle of Care Network is led by the Ottawa CAS in their West Pod. Ottawa CAS is highlighted as an exemplar because of the work that has gone into its development. Ottawa CAS will identify if the child and family is Aboriginal at the beginning of the process. Specific



programs such as the West Pod program manage Aboriginal families. The whole pod (team) has specific education and training on Aboriginal culture, workers who are more interested in working with FN families end up working in this pod. Workers will get enhanced experiential cultural learning opportunities because there is a different way of responding. Family intervention and planning are discussed with service providers and decisions are made on how to intervene with a family or how to engage services with families. Culturally safe programming is designed throughout the delivery of service. Ottawa CAS has service protocols with all Ottawa based service providers in the delivery of services to end violence against women. This program is a pilot program which began in 2009 and is funded through the Ministry of Child and Youth Services.

Program Specific Insights and Needs

- ✓ Advocacy programs need to be established in areas with a high volume of domestic violence and a high volume of Aboriginal people involved with child welfare.
- ✓ Programs and services need to collaborate and not work within isolation of each other.
- ✓ CAS/VAW protocols need to be inclusive of all services within the catchment area. For example, local police, ONWA locals, friendship centers, treatment centers, legal aid, court systems, domestic violence diversion programs such as I am a Kind Man Programs, First Nation programs, Elders, etc.
- ✓ National campaigns that discuss the baseline profile of Aboriginal women in domestic violence situation with the inclusion of child welfare baseline data.
- ✓ There needs to be more Aboriginal family treatment centers to deal with historical trauma, its effects, domestic violence implications on the family, and culturally restorative processes to healing.
- ✓ Service providers recommended the Gladue principle be applied for child welfare workers working with Aboriginal women in domestic violence situations. The Gladue principle applies to criminal situations, and suggests to judges the need for special accommodations for Aboriginal people encountering this system. Service providers are stating the need to have the same principle but have it applied to child welfare settings especially with clients who are involved in domestic violence situations.
- ✓ Programs and services have been expanded in house, in isolation and without collaboration with other services or programs in various catchment areas. No protocols or collaboration of services are the norm across Ontario, especially with a collective vision to end violence against women.
- ✓ Eligibility for services varies across the province. For example, in terms of housing, in one part of Ontario you cannot live with a partner who has assaulted you, even if they have gone through treatment. In other parts of the province you can live with your partner, throughout the process



of healing as a family. The strong stance of housing and Child Welfare has in parts of Ontario, led to clients not being able to maintain their home for the children to return post-intervention. Another example of eligibility exists in the violence against women shelters. In some areas of the province due to high cases loads, you need to have visible bruising on your body before you are able to enter the center. This is a condition of eligibility for service.

- ✓ Violence against women sectors are required to report to child welfare agencies when a women leaves the center with her children if there is risk for the child and they deem the children unsafe. However, often times this is without context. For example, the important question about why Aboriginal women leave centers has not been asked. Service providers have identified the need to establish if Violence against Women centers are culturally safe and relevant for Aboriginal women. How do they provide services and develop a therapeutic milieu that is culturally relevant to the Aboriginal women? Has there been an evaluation of Violence against Women centers' in terms of accountability to the Aboriginal women stakeholder?
- ✓ One of the biggest barriers to the development of collaborative services is leadership. No one specific leader has been identified in the creation of a circle of care specific to Ending Violence against Women. Service agencies are isolated in their specific service, and have not engaged in thinking collaboratively in their services delivery. The Ministry of Child and Youth Services has created an option for collaboration through their "community links" in differential response; however, many CAS across Ontario have under-developed this section with domestic violence initiatives.
- ✓ Training is essential in culturally responsive development of circles of care. Participatory action research approaches are essential and must be a part of the development for Ending Violence against Women Circles of Care.
- ✓ Inclusion of Aboriginal stakeholders in the jurisdiction of CAS/VAW is needed when creating circles of care. The ONWA locals can be the linkages that support this development.

Question 3:

What types of baseline data and research has your organization developed on violence against Aboriginal women and child welfare?

Utilizing information to make informed decisions is an important part of service delivery and social policy analysis process. Data collection is essential for any organization. Data collections are processes of preparing and collecting data for an improvement in organization process or to collect data to create new process. Using data to collect an accurate picture of the presenting problems is essential to good social work practice; however, in Ontario there is no central data collected on these types of issues.

Data collection provides information on the following areas:

- ✓ Data collection provides a snapshot of the overall picture of services across the Ministries at any given point in time.
- ✓ Data collection ensures a longitudinal account of the overall outcomes, service volume profile, and general accountability for services across all sectors.



- ✓ Data collection ensures that senior level executives are kept in the loop as to what's happening in the arena of Domestic Violence Profiles and Aboriginal women.
- ✓ Data collection allows organizations to profile and benchmark their services. This is where you would set what is important to the organizations success. This is also where organizations will work with stakeholder groups to define what outcomes are important to the delivery of services within any organization. For example, in child welfare ultimately these organizations should be working themselves out of a job, as Aboriginal families and communities prepare to manage their own mechanisms of child care and helping.
- ✓ Data collection allows the organization to definitively measure change necessary in creating a circle of care within jurisdictions.

What is clear within this consultation is there is no centralized data bank that houses information on the profile of Aboriginal people. Child welfare profiles specific to the Aboriginal profile are near non-existent. Some CASs across Ontario did not provide information or want to share information on their Aboriginal profile. This was due to the perceived high anxiety related to the complexities associated with First Nation control over child welfare agency and their possible service takeovers by First Nation stakeholders. In some situations there was just no way to establish or to collect the data at the intake process, as a significant portion of the child welfare agencies do not ask if the child and family have or eligible to have status. As a result, there is a gap in establishing a baseline profile of the Aboriginal children in care in Ontario.

VAW services collect statistics on how many different people access their service but in some cases they do not collect data on how many are Aboriginal or how many they refer to CASs across Ontario. The policing services collects information on domestic assaults but does not distinguish between Aboriginal and non-Aboriginal domestic disturbances. Further, they are not required to provide data to stakeholders such as the ONWA locals on the profile of domestic violence and women assaults.

General statistics or data collected on the following is absent or limited:

- ✓ Aboriginal children in care,
- ✓ Aboriginal children in care due to domestic violence,
- ✓ Length of time in care,
- ✓ Strategies used as intervention options,
- ✓ Recidivism of domestic violence,
- ✓ Data on men's non-violence programs and interventions
- ✓ Participation in various organizations that provide services within the domestic violence / child welfare differential response sector.

These are just some of the ideas generated through the consultation. Further, secondary issues have are noted as needing to be included in base line data collection. For example, needs assessments for culturally responsive service delivery has not been completed in the VAW/CAS sector. Other general areas discussed that are required are: sexual assault data, murders due to domestic violence data, suicide or suicidal attempt data related to domestic violence, addiction profiles, and accountability of intervention services ~ does the intervention work and what can we improve upon.



Question 4:

What education and training opportunities has your organization provided to support the learning of the staff, in working towards ending violence against Aboriginal women?

There are different in house training options that are developed to empower the learning of staff when working with the Aboriginal women and children population who experiences the child welfare and violence against women's programs.

Training programs that Service Providers have participated in have been through the following venues:

- ✓ In house training
- ✓ Specialized training through educational seminars and workshops
- ✓ Safeguards
- ✓ OACAS child welfare training
- ✓ ANCFSAO Native provisions training
- ✓ Cultural immersion

A composite list of training that Service Providers feel they require has been established:

- ✓ Violence Against Women
- ✓ Working with Domestic Violence
- ✓ Working with Sexual Assaults
- ✓ Ethics
- ✓ Case management
- ✓ Cultural Awareness Training: Aboriginal history, clans, 60s scoop, residential school impacts
- ✓ Crisis Intervention
- ✓ Reconciliation
- ✓ Lateral violence
- ✓ Anger Management
- ✓ Proposal writing
- ✓ Cultural Immersion: language and modes of healing through ceremony.

Question 5:

What are the top five issues that Aboriginal women face when involved with domestic violence and child welfare?

Although, we tried to keep the issues to a minimum of five, there were a number of issues that were discussed through the consultation process. As a result, the following list is a composite listing of issues women are facing when involved with domestic violence and child welfare.



- ✓ A long history of colonization has led to the breakdown of the family unit. This was a specific goal of the government during the assimilation and acculturation movement called the residential school era. Women and men are faced with this legacy, and it has resulted in dysfunctional family systems. As a result, women are faced with the dysfunction and abuse, but they are also faced with systems that are not acknowledging this history as a mechanism to heal the family. Women need systems to know, acknowledge, and find culturally safe drivers to your service organizations. Make the system more culturally safe and relevant to the experience of the Aboriginal women.
- ✓ Not all Aboriginal women will leave their spouse, even if they are in abusive situations. There are many different qualifiers to working with these family units, but the most common one is increasing a women's protective network. Simard (2009) discussed the protective network principle:



The Natural Protective Network Principle, Simard (2009)

In this model, you identify what resources are available to the mother, child, and husband by accessing resources within the family, extended family, community (FN and non-FN) and the Treaty area resources. Strengthening the family through various resources is an important strategy and has been recorded in the literature.

- ✓ Research and Indigenous inquiry have led way to profiles for women dealing with sexual assaults and domestic violence, Cecilia Fire Thunders' model is another approach. Cecilia Fire Thunder is from Pine Ridge, South Dakota. She inspires to young women to reach for leadership and pursue the path of self-esteem and self-dignity. From consideration as sacred and as centrally important to the nations, Indian women have too often been denigrated and abused. This is the conclusion of the "Family Violence and American Indians/Alaska Natives: A Report to the Indian Health Service Office of Women's Health," a compendium produced in October 2002, by Dr. Laura Williams, et. al.

Sexual assault against Indian women is more than double that among blacks and three times that of whites.

Forty-six percent of violence and 70 percent of crime is alcohol related.

Acquaintances (38 percent) and strangers (46 percent) have the highest rates as perpetrators against Indian women.



Family and intimates account for around 10 percent.
In domestic violence, poverty and alcohol are the major factors.

Her community development work centralized in developing programs for women that are based in historical understand and cultural context to healing. Through activism and the promotion of community based services, she has created systematic change for domestic violence initiatives within her communities.

Another example is Sandra Pierce Goudlings's domestic violence with Native communities. In her dissertation process she interviewed key Native people who reside in the Minneapolis area. In her findings, it was suggested family treatment to be an option when working with Aboriginal families. This was due to the historical trauma as a result of the boarding school era. A number of treatment strategies were centered in the client's cultural worldview. Often time this meant the incorporation of cultural strategies as the main impetus in dealing with domestic violence. Another Indigenous scholar who discussed treatments strategies for dealing with domestic violence is Maria Yellow Horse Brave Heart. Yellow Horse Brave Heart discussed a decolonization process in which a participant would learn from psycho-educational programming. This program was based in historical trauma, context, cultural restoration, and re-connecting to one's culture. The values that exist within the culture provide the change necessary to End Violence against Women. For service providers, it is important for you to come and understand the history, how it impacts you, and learn effective culturally based strategies for working with Aboriginal women and children.

- ✓ For women, it is important for workers not to judge them for their situations in life. Do not hold the past against the woman, establish an effective relationship from the start, and work with them in a manner that honors the spirit within them.
- ✓ Understand for Aboriginal women, you cannot lump them all into a "violence against women" client base. Although there are similarities between abuse and abusive behaviour, the key difference rests in treatment modalities and milieu. An Aboriginal women, needs to be culturally safe as well as physically safe. Service organizations must account for this and do so in a manner that promotes and strengths the spirit of a woman.
- ✓ Ontario Works needs to work with the Ontario Native Women's Association to determine best practices in working with Aboriginal women involved in child welfare situations. For example, determining the best strategy to maintain a home, an income, or how to prepare for no income or income lapse when children are removed.
- ✓ Aboriginal women need to have support and information. They need advocates who will support their process. They need to know what their rights are, and how to talk with service providers such as child welfare workers. They need to understand how the system works and how it does not work for Aboriginal women. Aboriginal women might be perceived as docile and uncooperative, but his may be more our inadequacy to engage and understand their unique needs.
 - As a result, Aboriginal women need workers to be more engaging and informative. Further, they need advocates to support that development. Make your system work for Aboriginal people; teach them how to navigate through your system much more easily.



- ✓ Aboriginal women do not always need psycho-social or parental assessments. They need help and someone who will believe in them. At times, these assessments are culturally biased, and do not record or account for historical effects as a factor to the presenting problems. If you assess something wrong from the first place, your mode of therapy will be wrong in the end. It makes sense to listen to Indigenous scholars who are prepared and willing to help norm assessments that work for and not against Aboriginal women.
 - Aboriginal children do not always need psycho-educational or psycho-social assessments. They are culturally biased. There are cultural alternatives for Aboriginal children, but you need to seek it out on their behalf. Do not overmedicate the Aboriginal child.
 - Methadone for babies should not be an option, find a better way to help them if they are born addicted.
- ✓ Aboriginal women are losing their children to CAS soon after the birth of their child at the hospitals. Education and Aboriginal liaisons are important in hospital settings to ensure the proper referrals are made.
- ✓ Staff change over at CASs is another big issue identified for women. An intake worker needs to ask if the clients are eligible for status or have status at the front end. It is more effective to have a senior team who can work together to make the process easier for Aboriginal families.

Several issues of staff turnover have been identified throughout the consultation:

- Not the same contact person
 - Not able to make decisions effectively if you don't know the client and if you haven't read the file.
 - Plan for a sustained relationship with the area First Nations
 - Frontline intake is often an entry position job in CASs, so they workers tend to move out of these positions as other positions come open.
 - Plan for vacations and leaves; try team approaches or collaborative counseling when working with Aboriginal stakeholders.
- ✓ All service providers believed it is important to have cross cultural education and specialized training if the service providers intend to work with Aboriginal people. This training must be in collaboration with the area First Nations around the service organization.
 - ✓ Aboriginal women need to know where to go for help. Local publicity campaigns and access to services is important. Composite referral packages with service descriptions are a necessity for the Aboriginal women. It was suggested to have an Aboriginal women's Violence against Women hotline. This hotline would provide crisis response services, debriefing, and referral services.
 - ✓ Aboriginal women need mentors. They need connections to elders, Aboriginal women in leadership, alcoholics anonymous, narcotics anonymous, VAW mentors, or CAS mentors to provide insights into how the system works. Women need to connect with other women. They need to have mentors to support their progress.



- ✓ Aboriginal women need service providers to call them back when they call. It does not have to be immediate but it should not be longer than a week, a couple weeks, or a month. Some workers have identified women as feeling abandoned and not supported when their phone calls are not returned. Aboriginal women understand the extraordinary pressure of working in child welfare, but also they need you to understand the deep rotting pain of not being with one's children. Help them get their children back home to where they belong.
- ✓ In regards to aftercare, it is important to support the families when they are transitioning to a re-unification process, but that should only be for a few months. Women do not want CAS in their lives forever, they need to be independent, and they need to grow. If a workers works within circle of care process, the workers would have established connection to other workers who can support the family even further. When the time is right, let the women and their families go ~ they do not need you forever.
- ✓ Another area identified is the housing crisis. Housing needs to be affordable and accessible. Housing authorities need to establish policies that support women during their involvement with child welfare and domestic violence centers. Women are asking for housing authorities to look at best practices when women are involved with the two sectors, starting with the initial question "what can we do to make this situation better?"
- ✓ All services need to work towards a "circle of care network" specific to the mission of Ending Violence against Women. Make changes, take action, work together, and maintain the initiative by establishing it as a core value to your organization. Help repair the history by creating solid cultural strategies. Do this by working with the First Nation communities and the Elders. Learn about making services work in a more culturally responsive way.
- ✓ Include programs that empower women to economically self-sufficient. Work programs, career education, counseling, and development. Help empower the skills that will build on competency and strengths. Provide day care subsidizes so that parents can work, and participate in the circle of care network to provide these as options. These programs must be culturally grounded and are able to form lasting and sustainable relationships with Aboriginal women.
- ✓ Finally, the relationship with the Aboriginal women is the most important one. Foster a milieu that promotes engagement. Work with the women, you might be their lifeline. Aboriginal women are faced with severe hardships and need support, be kind and work with them.

Results: Client Perspectives

As a part of the consultation process, storytelling circles were conducted with Aboriginal women and families throughout the nine sites. Much of the comments expressed by the service providers section are similar to the experience expressed by the Aboriginal women and families. The following questions and answers provided some insights into the lived experience of Aboriginal women involved with child welfare and violence against women services.

Question 1:

What are your experiences with the child welfare and domestic violence systems?



- ✓ Aboriginal women come from abusive backgrounds.
- ✓ There is a history of trauma within the parent's family of origin. Often a history of residential schools exists within the individual seeking services or their family: the decedents, the daughter or grand-daughter seeking services.
- ✓ Many women are involved in domestic violence situations and have a history of trauma. This trauma should not be a reason to keep children away from parents but there is the need for therapeutic work with elders or therapists.
- ✓ Aboriginal women are fleeing from abusive relationships only to be met with hostile environments.
- ✓ Aboriginal women have been shamed and blamed for their abusive relationship.
- ✓ Aboriginal women do not have many options for the helping profession, and when the services do not work, they will go on the streets. The streets are very violent for women; there are stalkers, rapists, and people who will take advantage of the vulnerable situation of the woman.
- ✓ Aboriginal women feel comfortable with Aboriginal organizations. They have asked Ministries to empower Native prevention agencies to deliver the service.
- ✓ Aboriginal women are waiting too long to get services, as a result, it is important to re-think services to make them more available, accessible, or collaborative with other resources in the catchment area. Be proactive and think about transportation issues, and provide solutions to the women who need this support.
- ✓ Aboriginal women want to have access to cultural services and access to traditional healing lodges or treatment. They want to talk to their elders about healing and healthy families. They want their Indian names, clans, and their identity. They are fighting through the internalized oppression of their communities and seeking to find who they are as an Aboriginal woman. They do not want to fight with workers about cultural services; they want the option as a culturally safe and relevant service.

Question 2:

What do you recommend for service providers in these systems?

- ✓ Aboriginal women want workers to understand the concept a "man's world" ~ aka. paternalistic society. They want the grandmothers to help them, and for the systems to understand how it affects them. Culturally relevant gender based analysis was recommended as a mechanism to understand if your policies are working for Aboriginal women. At a bare minimum, the women have asked service providers to evaluate how they are working with them by asking the women



if the service provider can do the service more efficiently.

- ✓ Aboriginal women have suggested that if you do not know how to work with them ask for help and ask for training. Work on establishing a relationship with the women and their families, see them as human beings with dignity and worth, and not the legacy of stereotypes associated with Aboriginal women. It is believed and suggested that a client's progress is directly linked to type of relationship established with the Aboriginal women.
- ✓ Aboriginal women believe CAS workers need to think through the vision of your goals you establish for them. For example, transportation issues, housing issues, access issues, treatment issues and timelines for children in care. Aboriginal women want CAS workers to start to think of the end goal as children being with mothers in safe environments. How do we get there, and how can services be more accessible.
- ✓ When you are working with second-generation child welfare clients, you need to work from the perspective of reconciliation. Many different women and men involved as a second or third generation child welfare clients have experienced abuse (inclusive of cultural identity losses) associated with cross-cultural placements. As a result, women have asked you to take care when working with this sector and use reconciliation as a part of the healing process.
- ✓ Women have asked CAS workers to NOT go for crown ward ship with no access as a first option. Customary care options, as a first choice is more appropriate. Work with the community to develop customary care codes and establish what the organizations philosophy will be in areas of customary code development.
- ✓ Aboriginal women are saying they feel intimidated by CAS workers. They believed CAS workers are not listening to them, and are not available to help them in any meaningful way.
- ✓ Aboriginal women do not want to jump through insatiable hoops to get their children back. As a result, they request that as service providers you do not keep adding and adding to their service plans.
- ✓ When an Aboriginal woman is abused by the system, it creates a dynamic of helplessness for the Aboriginal women. Often women will "spin out of control" and this contributes to the rationale for using. Aboriginal women know when they are treated with kindness and when they are not, so as a result-be kind.
- ✓ Women want CAS workers to ensure the foster families do not sabotage the parent child relationship. This is abusive and needs to stop.
- ✓ Parents' extended family systems (grandparents) need to be part of the protective layers for the children. Ask grandparents to foster, and treat grandparents with kindness and respect.



- ✓ If an Aboriginal woman or her family is angry, work with it. Most importantly do not hold the children hostage in the child welfare system because of your personal feelings about angry people. It is important to keep connections to family and to communities throughout the process, often this is not a standard of practice.
- ✓ Aboriginal women have talked about issues of jurisdiction (on reserve and off reserve services), moreover, have asked for both service areas to work together. Federal and provincial services need to be collaborative and not difficult to access in spite of where you live.
- ✓ Work at re-engaging families, post-child welfare involvement. If a child has remained in care for a number of years, and they leave care, work to help the family re-engage with each other.
- ✓ Aboriginal women want you to help them with poverty issues. Be strategic and look at sustainable goals to achieve this.
- ✓ Aboriginal women want you to work with the men, help them as they are part of the family unit and they suffer from the residential school experience as well. Work at family treatment, especially if the partner is willing to make the changes. Help them to become strong men with purpose.

Question 3:

How can ONWA help you and your family with these systems?

A resounding theme has been established throughout this consultation process, and it is for the Ontario Native Women's Association to continue to advocate for the needs of the women. ONWAs locals must get active and talk with CASs and VAWs in their area, and see if services are working for Aboriginal women. Teach service providers to work with Aboriginal women in a good way. Teach them to work together, and ONWA locals need to take the rightful role within leadership to move this agenda.

Discussion and Interpretation of Results

Through this research process, we have validated the need for continued advocacy services for Aboriginal women. Many of the young women are leaving violent situations only to find themselves encountering a system through which they do not always know how to navigate. There are a number of services in Ontario for the Ending of Violence against Women but they do not address the unique needs of the Aboriginal woman. This means structurally the service system needs:

- 1) Services specific to the cultural context of the Aboriginal women and her family
- 2) Training for service providers who offer compulsory services to the Aboriginal women
- 3) Wraparound services where service providers support families and develop protocols with other agencies and refer within and between their agencies
- 4) ONWA to develop an Advocacy Centre in each site and hire and train Advocates in culturally safe advocacy in child welfare and domestic violence systems including the justice system
- 5) ONWA and other service provider agencies to be a participant and a signatory on the CAS/VAW



protocols

- 6) Aboriginal Healing Centres to be developed which would provide cultural teachings, access to elders, services for men, services for women, addiction assessment and treatment
- 7) First Nation community engagement is paramount for families involved with the child welfare system
- 8) Data Collection by child welfare agencies specific to Aboriginal families is essential to responding to the gross overrepresentation of Aboriginal children in the child welfare system
- 9) Transitional Housing for young women and families involved with the child welfare and domestic violence systems is of utmost importance



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Appendix One

Ontario Native Women's Association

The Ontario Native Women's Association (ONWA) is a not for profit organization that empowers and supports Aboriginal women and their families in the province of Ontario. Affiliated with the Native Women's Association of Canada (NWAC), ONWA encourages the participation of Aboriginal women in the development of Federal, Provincial, Municipal/ Local government policies that impact their lives and ensure issues affecting Aboriginal women and their families are heard at key government tables.

ONWA is committed to providing services that strengthen communities and guarantees the preservation of Aboriginal culture, identity, art, language and heritage. Ending violence against Aboriginal women and their families and ensuring equal access to justice, education, health, environmental stewardship and economic development, sits at the cornerstone of the organization. ONWA insists on social and cultural well-being for all Aboriginal women and their families, so that all women, regardless of tribal heritage may live their best lives.

ONWA is a provincial association that delivers programs and services to Aboriginal women regardless of their status or locality. ONWA's head office is located in Thunder Bay, Ontario and programs are available throughout the province via satellite offices located in Kenora, Dryden, Sioux Lookout, Greenstone, Ottawa, Napanee and Hamilton.

ONWA's programs and services include:

- ✓ **Aboriginal Diabetes Education Project**
- ✓ **Aboriginal Healing and Wellness Strategy**
 - Aboriginal Healthy Babies Healthy Children
 - Community Health Outreach/Wellness Programs
 - Mental Health Demonstration Project
- ✓ **Aboriginal Justice Program**
 - Establishing Victim Services in Northwestern Ontario for Aboriginal Women and Their Families
 - Campaign to End Trafficking of Aboriginal Women
 - Ending Sexual Assault, Abuse and Violence Against Aboriginal Women
 - Ah-wa-neyn Nin "Who Am I?"
- ✓ **Building Aboriginal Women's Leadership**
- ✓ **Employment and Training**
 - Aboriginal Skills & Employment Training Strategy (ASETS)
- ✓ **Nihdawin "My house – a place where I live"**
- ✓ **Policy and Research**
 - Health
 - Housing
 - Aboriginal Healing and Wellness Strategy
 - Aboriginal Skills & Employment Training
- ✓ **Problem Gambling Awareness & Prevention Program**

ONWA is a provincial network of Aboriginal women consisting of 40 employees, 16 Board Members,



4 Grandmothers, 69 Locals and numerous partner organizations and agencies - all working together to achieve equity and justice for Aboriginal women and their families

ONWA Locals:

Northern Region

Kenora Anishinaabe Kweg - Kenora, Ontario
 Mindemoyag Women's Group, Inc. - Dryden, Ontario
 Sandy Lake Women's Group - Sandy Lake, Ontario
 Sunset Women's Aboriginal Circle - Sioux Lookout, Ontario
 Wabigoon Native Women's Group - Wabigoon, Ontario

Western Region

Thunder Bay Anishnabequek - Thunder Bay, Ontario
 Megezhee Anishnabe - Thunder Bay, Ontario
 Animaki Anishnabe - Thunder Bay, Ontario
 Fort William Ojibway Nation Anishnabequek - Fort William First Nation
 Biidaajiwun, Inc - Thunder Bay, Ontario
 Jiwitagen En Quewek - Thunder Bay, Ontario
 Sky Eagle Women - Thunder Bay, Ontario
 Circle of Anishnabeque - Thunder Bay, Ontario
 Waawiiya Biimadiziwin - Thunder Bay, Ontario
 North Shore Ikwewag - Thunder Bay, Ontario
 Begetikong Anishnabe quek - Heron Bay, Ontario
 Aroland Anishnabequek - Aroland, Ontario
 Long Lac Anishnabequek - Long Lac, Ontario
 Gin Oo Gaming - Long Lac, Ontario
 Constance Lake Oji Cree Anishnabequek - Constance Lake, Ontario
 Paw Gwa Sheeng Ladies Group - Pays Plat, Ontario
 Red Thunder Women Marathon Chapter - Marathon, Ontario
 MacDiarmid Anishnabequek - MacDiarmid, Ontario
 Rocky Bay Anishnabequek - MacDiarmid, Ontario

Eastern Region

Waibejawong Anishnabequek - Little Current, Ontario
 Two Bears Cultural Survival Group - M'chigeeng, Ontario
 Dokis Bay Anishnabequek - Curve Lake First Nation
 Wikwemikong Anishnabekwe - Wikwemikong First Nation
 Blind River Anishnabequek - Sault Ste Marie, Ontario
 Manitoulin Native Women's Coalition - Wikwemikong First Nation
 Mamowedow - Smooth Rock Falls, Ontario
 New Post Women's Local - Cochrane, Ontario
 Bawating Anishinaabekwewok - Sault Ste Marie, Ontario



Rainbow Women - Sault Ste Marie, Ontario
 Northern Superior Native Women's Association - Sault Ste Marie, Ontario
 All our Relations - Michipicoten River Village, Ontario
 N'swakamok Sudbury - Wikwemikong First Nation
 Anishnawbek Nokomisc - Garden River First Nation
 Anishnabequek of the North Shore - Garden River First Nation
 Sudbury Native Women's Association - Sudbury, Ontario
 Anishnabe Kwe Association - White River, Ontario
 Timmins Anishnabequek - Timmins, Ontario
 Kapuskasing Native Women's Group - Kapuskasing, Ontario
 Whitefish River First Nation Women's Local - Whitefish River First Nation
 Kee She Chiwan Ishquaywuk - Kashechwan, Ontario
 Mikimoikwak - Matchewan, Ontario
 Temiskaming Native Women's Support Group - Kirkland Lake, Ontario

Southern Region

Mohawk Chapter of St. Regis - St. Regis, Ontario
 Mohawks of the Bay of Quinte - Shannonville, Ontario
 Lovesick Lake Native Women's Association - Buckhorn, Ontario
 Metis Women's Circle - Hamilton, Ontario
 Niagara Chapter Native Women - Fort Erie, Ontario
 Native Women's Group of Port McNicoll - Port McNicoll, Ontario
 Konti'shaste - St. Catherines, Ontario
 Pugook Mooka'am - Napanee, Ontario
 Algonquins of Pikwakanagan - Golden Lake Ontario
 Highland Aboriginal Women's Group - Griffith, Ontario
 Curve Lake First Nation Anishnabequek - Curve Lake First Nation
 Aboriginal Women's Support Group - Ottawa, Ontario
 Wingask Kwek - Penetanguishene, Ontario
 Pro. Aboriginal Women Society of Toronto - Toronto, Ontario
 Newmarket & Area Native Women's Group - Newmarket, Ontario
 Georgian Bay Native Women's Association - Midland, Ontario
 Native Women's Association of Windsor - Windsor, Ontario
 Hamilton Wentworth Chapter of Native Women - Hamilton, Ontario
 Glenburnie Anishnabekwek - Baltimore, Ontario
 Fort Erie Aboriginal Family Circle Inc. - Fort Erie, Ontario
 Deshkan Ziibi Native Women's Group - London, Ontario



Appendix Two

Annotated Bibliography of Resources

The Ontario Native Women's Association has a number of resources to support the development of this research initiative. In review of the documents, the researcher has chosen to highlight the following as works relevant to the study. Some of the information presented within this section is not led by Aboriginal researchers, nor is there Aboriginal participation or collaboration on these initiatives. However, they do provide key information on violence against women and child welfare organization's insights. This profile is shared with the acknowledgement that as Aboriginal people continue to build the research framework, this list of resources will continue to grow.

Bay Consulting Group (November 2, 2010) Prepared for; the Commission to promote Sustainable Child Welfare. Final Report: A Description of the Child Welfare System Landscape in Ontario.

This is a description of child welfare across Ontario, and provides the background for future policy development for the Commission to promote Sustainable Child Welfare. This report includes a synopsis of the current state, recent trends, and variability and similarities among children's aid societies in order to inform its work going forward.

Blackstock, Cross, George, Brown, Formosa: (2010) Reconciliation in Child Welfare; Touchstones of Hope for Indigenous children, youth and families. Circle of Care Resource Guide.

This is a resource that establishes how a community can create a circle of care within their jurisdiction. It lays the foundation for success by establishing exactly how it can be done through four phase of reconciliation – truth telling, acknowledging, restoring, and relating. This process is an ADR process between CASs, area service providers, and the First Nation communities and their First Nation stakeholders accessing these services.

Canadian Human Rights Commission ((2010) Your Guide to Understanding the Canadian Human Rights Act. Ottawa, Ontario ISBN978-1-100-16788-6

This guide is designed to help service providers and people who access services identify what a human rights violation are, the law behind it, what is available to help in this situation, and how to access these services. It also discusses the process of a complaint and what can be done about retaliation. Human rights ON RESERVE are a new phenomenon cover under the human rights act of Canada and came into effect in 2011.

Child Welfare Information Gateway (June 2011) Family Reunification: What the Evidence Shows Washington, D.C.; U.S. Department of Health and Human Services, Children`s Bureau.

Family reunification is the process of returning children in temporary out of home care to their families of origin. The information package created by the Child Welfare Information Gateway provides key insights into reunification processes, worker requirements, and system requirements to ensure the continuity and safety of the child and family.

Cunningham, A, MA (Crim), & Baker, LL PhD, (2007) Little Eyes, Little Ears-How violence against a mother shapes children as they grow. Centre for Children & Families in the Justice System (London Family Court Clinic Inc). ISBN 978-1-895953-32-9

This is a detailed information package for parents and service providers. It discusses family



violence and abuse, and its impacts on children. It also provides facts and figures about abuse that is perpetrated on a woman, or her children. Further it discusses the impacts of family violence on the children. And it provides service providers of options for working with women who become involved in child welfare settings.

First Nations Child & Family Caring Society of Canada & Children's Aid Society of Ottawa (2012) Exemplifying the Sacredness of Relationality: An Evaluation of the Partnerships between the First Nation, and Métis Service Providers and the Children's Aid Society of Ottawa.

This is a qualitative research report designed to evaluate the relationship between the CAS Ottawa and the surrounding First Nation communities. In this study they have determined what a partnership could consist of and what both CAS and FN communities can collaboratively work together in order to make services work with Aboriginal stakeholders. This evaluative report is one partnership throughout Ontario, but provides as foundation for future works with other CASs across Ontario.

Government of Canada, National Clearinghouse on Family Violence /Family Violence Prevention Unit (2008) Aboriginal Women and Family Violence. ISBN 978-0-662-47678-8

This study was specific to family violence in Aboriginal families. The report is based on the attitudes and opinions of Aboriginal women, and the professionals who work with them, on the issues of family violence or partner assaults. This study provides information on the incidence of violence against Aboriginal women, impacts on the family system, existing resources analysis, and implications.

Hon. Hedy Fry, MP Chair Standing Committee on Status of Women (March 2011) Interim Report Call into the Night: An Overview of Violence against Aboriginal Women. House of Commons, Canada

The standing committee on the Status of Women Canada, completed a consultation to discuss what the prevalence and situation of violence against Aboriginal women. In this committee report, the silence is broken and light is brought on the issues of violence against Aboriginal women. In this study, the committee determined what the drivers to violence are, and what is the systematic involvement that contributes to violence against Aboriginal women, and what can be done to intervene.

Jaffe, P, & Zerwer, M, & Poisson, S Access Denied; The Barriers of Violence & Poverty for Abused Women and their Aboriginal children After Separation

This is a study that looked at domestic violence and Aboriginal women, specifically 2 years after they left their violent partner. In this study, the violence after the relationship was over was discussed. This information provides facts and solutions for CAS and court workers involved with women in domestic violence situations. In highlighting the needs of women in crisis, they have provided understanding of the unique needs of Aboriginal women and the services that must be provided.

Legal Aid Ontario (March 2008) Helpful Tips for Lawyers Representing Clients in Proceedings under the Child and Family Services Act

This is a resource package for lawyers who are representing clients in the area of family law in Child Protection matters. It is a useful package for parents or advocates in understanding what the legal process is in relation to child welfare. This package discusses the CFSA, the first



appearance at court, the client interview, the interim stage – ADR process, the findings and disposition hearings, trial preparation checklist, and status review.

Niagara Aboriginal Children’s Planning Council (2010) In Our Own Voices

A number of stakeholders under the leadership of the Niagara Chapter Native Women’s Inc, led a GAP assessment. The goals were to identify services accesses and not accesses, identify people who do not have access to services, determine the best model of establishing an Aboriginal hub, and identify the beginning process for language and cultural retention programs in this region. This resource highlights what the findings were and how best an Aboriginal hub of services could be created.

NCNW Native Chapter –Native Women’s Incorporated (August 2010) Feeling the Pulse of Aboriginal Children in Contact with Children’s Aid Society the Niagara Region ISBN 0-9868792

The Niagara Chapter of Native Women has brought their purpose to the forefront. As Native women they have collectively sat down and discussed what their vision, mission, and fundamental purpose is to the service organizations in their jurisdiction. They have identified through research what is necessary in holistic child welfare practice, and have defined outcomes to establish this process. This report highlights a process for such development with service organization.

Ontario Federation of Indian Friendship Centres, Ministry of Children and Youth Services, Ontario Native Women’s Association, Métis Nation of Ontario, Independent First Nations (May 2011) Summit IV to end Violence Against Aboriginal Women – Protecting our Children from Violence; Our Sacred Responsibility

This is the official report from the summit to end violence against Aboriginal women. This summit discussed the sacred responsibility in caring for the children. The report is inclusive of ideas put forth by over 150 participants from across Ontario and share in key discussions in the development of the strategic plan to end violence against Aboriginal women.

Ontario Federation of Indian Friendship Centres (2011) Aboriginal Sexual Violence Action Plan

This is a booklet that defines the OFIFC policy on Aboriginal sexual violence action plan. It is built on the profile of Aboriginal women and sexual assault profiles, working assumptions about Aboriginal women and sexual violence, and sets out a strategic plan to deal with the sexual violence across Canada. The strategic directions are grounded in research, legislation, policy, programs, education, community development, and leadership.

Ontario Native Women’s Association (December 1989) Breaking Free; A Proposal for Change to Aboriginal Family Violence, Thunder Bay, Ontario

This is one of the original documents to the ONWA service structure because it defines their purpose in Ending Violence Against Aboriginal Women (VAAW). This report discussed the prevalence of VAAW, severity, services, and best practices. Further this document began to look at the Canadian Justice System and Aboriginal people. In its early work, it led the foundations for future discussions and approaches to healing from violence.

Ontario Native Women’s Association (2008). Stop Hating Start Respecting - Aboriginal Hate Crimes Resource Manual

In 2008, Ontario Native Women’s Association initiated a working group entitled *Addressing Hate*



Crimes in Ontario, Community Working Group. This group started to develop an information package on what a hate crime is and how an individual can access services. Within this handbook, many examples of hate crimes were discussed in detail and began with the process of colonization as defined through the Indian Act process. In addition, more recent definitions of hate crimes were discussed and compared with the human rights act. All information was presented in a manner that promoted justice for people who are victims of crimes.

Ontario Native Women's Association and the Ontario Federation of Indian Friendship Centres (September 2007) A Strategic Framework to End Violence against Aboriginal Women.

In 2007, the OFIFC and ONWA discussed the future of the framework to end violence against Aboriginal women. In this initiative, there were eight strategic directions determined. Each strategic direction was designed to have attainable goals and established specific actions to ensure the success of the strategy.

Riggs, J Catalyst Research and Communications (February 2011) Working with First Nations, Inuit and Métis Families who have experienced family Violence.

This research project has been completed in collaboration with various stakeholders across Ontario and is a guide designed to support child welfare workers. It does this by increasing personal understanding of worldviews, addressing skills development needs when working with Aboriginal people and their communities, and helps to address the workers responsibility in advocacy efforts.

Tikinagan Child and Family Services (July 2008) Mamow Obiki-ahwahsoowin Research Project: Executive Summary, July 18, 2008

This is a research project that discusses how customary care has developed within the Tikinagan Child and Family Services. This program is names Mamow Obiki-ahwahsoowin and translates to the community taking care of the children. It is a theoretical framework to counter the obstacles encountered with the regulations put forth by the Ministry of Child and Youth Services. It addresses the cultural needs of the child and has done so in a research based format.

