Over the past decade, research on intimate partner stalking has expanded; however, there are still many gaps within the literature that need to be addressed. RESOLVE researchers Kimberley Zorn (Ph.D. Candidate Clinical Psychology) and Dr. Mary Hampton (Research Coordinator RESOLVE, SK), aligned with Karen McGillivray (Director of Domestic Violence Unit Family Service Regina) to conduct a qualitative study to examine the impacts of partner stalking on women targets within the Regina, Saskatchewan area. This community–based research was funded by a Prairieaction Foundation CARE grant and built on a previous study designed to inform police, justice, and front-line service providers about the impacts of stalking. This study expanded on previous findings by collecting stories from six women who had been the targets of stalking from former partners. These stories were then compiled to create a cohesive narrative of women’s experiences.

Intimate Partner Stalking... continued on Page 6
Since 2012, Shift: The Project to End Domestic Violence (Faculty of Social Work, University of Calgary), in partnership with the Government of Alberta’s Ministry of Human Services, CAMH’s Centre for Prevention Science, and Western University, has implemented a multi-pronged strategy to cultivate healthy relationship skills in young people in order to prevent dating violence throughout Alberta. The strategy, entitled the Alberta Healthy Youth Relationships Strategy, focuses on seven key areas.

Area 1: Cultivating healthy relationship skills in youth via evidence-based programming in schools and community-based programs

Shift has worked to offer Fourth R: Strategies for Healthy Youth Relationships for Alberta youth in grades 7-9. The Fourth R teaches these youth the skills they need to build healthy relationships, with the goal to reducing common adolescent risk behaviors, including dating violence, bullying, and substance use. From 2012–2015, over 650 teachers in Alberta were trained in the Fourth R, and had the opportunity to reach over 34,000 youth. At the community level, Shift provides training for the Healthy Relationships Plus program (HRPP), a small–groups version of the Fourth R that includes an enhanced mental–health focus. From 2013-2015, over 450 Albertans were trained in the HRPP and had the opportunity to reach over 6800 youth.

Area 2: Developing evidence-based healthy relationship resources for parents

Fourth R resources for parents include parent webinars, parent–adolescent homework assignments, and in–person parent presentations. Parent webinars are available at youthrelationships.org/parent–webinars#alberta.

Area 3: Supporting the development of a strategic and coordinated approach to violence prevention programming for children and youth from K–12 at the local level

Shift investigated what violence prevention programs were offered for K–12 students by community–based organizations in Calgary in order to help coordinate and scale–up best and promising practices. Shift also provides training for PREVNet’s Healthy Relationships Training Module (HRTM), which trains adults who work with youth on the importance of healthy relationships.

Area 4: Providing ongoing training to a cohort of key leaders from across Alberta so that they have the knowledge and skills to lead their communities in promoting and building healthy youth relationship skills

Shift trains individuals throughout Alberta to become trainers in the Fourth R, HRPP, and HRTM. Ongoing training and support is provided to these individuals, who in turn provide training and support to their communities.

Area 5: Providing province–wide support and expertise to schools and communities via a Healthy Youth Director

We are lucky to have Dr. Suzanne Zwarych, who is instrumental in supporting schools and communities in implementing healthy relationship programming. Suzanne will retire in June 2015; we are currently searching for a new Director.

Area 6: Supporting post–secondary institutions with course curricula to equip educators to cultivate safe schools

Lana Wells, in partnership with Dr. Darren Lund, Dr. Tonya Callaghan, Lynn Corcoran and Kim Campbell, developed and implemented a new post–graduate certificate program, Advancing Healthy & Socially Just Schools & Communities, through the Werklund School of Education at the University of Calgary. This year–long program started in July 2015.

Area 7: Advocating for an evidence–based approach to healthy relationship programming in school jurisdictions throughout Alberta

Shift continues to promote healthy relationships approaches at a provincial level. This includes advocating for embedding social–emotional learning standards into Alberta’s new education curriculum, which would allow all youth in the province to learn key skills that will reduce violence.

For more information on the strategy or specific projects contact Lana Wells at lmwells@ucalgary.ca.
Manitoba Update: A Fond Farewell to a Founding Member of RESOLVE

by Jane Ursel

After over two decades of membership on various RESOLVE committees, Christine Ateah is undertaking a new and demanding role as the Vice–Dean (Education) in the Faculty of Health Sciences. Christine was a founding Steering Committee member of our Centre back in the 90’s, when we were Manitoba based. When RESOLVE was formed she continued on the Steering Committee and added to her contribution as a member of our Publication Committee from 1999–2015, serving as the Chair of the committee from 2002–2005. In addition, she was the Academic Representative on our Regional Council for over a decade. Her commitment to RESOLVE also included active research participation on a number of our studies. Christine played a key role on our longitudinal study—the Healing Journey—contributing to the design of the parenting questionnaire and publishing findings. She has been active each year at our Research Days, where she has presented many findings from her work. In 2004, Christine and Janet Mirwaldt edited Within Our Reach: Preventing Abuse Across the Life Span, part of the Resolve book series. Despite her extensive support and active participation on committees and research projects, we were not her full-time job. As a Professor of Nursing at the University of Manitoba, she has educated many cohorts of nursing students, and has impressed those students with the importance of abuse prevention through positive parenting. As a Master Trainer in Positive Discipline she has brought her skills to nursing faculties and parenting programs around the world conducting workshops in China, Nepal, the Philippines, Papua New Guinea, Australia, and Indonesia, as well as in many towns and cities in Canada.

We have been so privileged to work with Christine; she is an insightful, supportive, and extremely productive colleague. We will miss her wisdom and her wonderful sense of humour at our meetings. We wish her well in her role as the Vice–Dean in the Faculty of Health Sciences.

Introducing Our Steering Committee Members

Introducing a New Steering Committee Member: Kendra Nixon

by Jane Ursel

Kendra Nixon is an Associate Professor in the Faculty of Social Work at the University of Manitoba. While Kendra is a new member of our Steering Committee, she is not new to RESOLVE. Kendra began in 1999 as the Community Research Development Coordinator of RESOLVE Alberta while she was a Social Work graduate student at the University of Calgary. Since then, Kendra has been active as a project coordinator and research associate on a number of RESOLVE projects. She has been particularly active on the Healing Journey research team and has published from the study with Christine Ateah and other colleagues. Kendra joined the University of Manitoba in 2008, and comes with a wealth of experience. She worked at a crisis shelter and as a child protection worker in southwestern Ontario in the 90’s, and she has been a board member of the Canadian Child Abuse Association since 1999. Currently, Kendra is Chair of the Board for the North End Women’s Resource Centre in Winnipeg.
Saskatchewan Update: Response to Violence Program – Saskatoon Health Region

by Dawn Rain, Coordinator, Response to Violence and Problem Gambling Program, Saskatoon City Hospital

The Response to Violence program (RTV) encompasses two program areas—the Sex Offender Treatment Program and the Alternatives to Violence Program.

Alternatives to Violence staff provide a treatment program for men and women referred to them through the Domestic Violence Court Treatment Option. Approximately 87% of the referrals are mandated clients from the Crown’s office, Domestic Violence Court and those who are sentenced. This program also has people who voluntarily want support to make changes in their life in regards to violence. Programming includes an intake assessment, education group, and a treatment group. Programs last 16-26 weeks. There is one education group and five treatment groups every week. Community partners involved in this program include the police, RCMP, Crown Prosecutor, defense counsel, probation officers, Saskatoon Indian and Métis Friendship Centre, and Domestic Violence Coordinator.

The Sex Offender Treatment Program offers services for adults in the Saskatoon Health Region who have committed sex offenses, or are concerned about a risk to offend, and can safely be treated in a community–based program. Approximately 55% of the referrals to this program are sentenced clients and the rest are voluntary.

The program is open to anyone willing to participate and follow the curriculum and who does not have any current or outstanding court charges for sexual offenses. Services include direct treatment, consultation, and education. Direct services include Clinical assessment, individual counselling, and treatment groups. Services Include an Education Group offered twice a year with 8–10 men. This 14–week group is conducted in partnership with probation officers and is followed by the Treatment Group. The focus is on building awareness, responsibility, individual accountability, and healthy coping. A Maintenance Group focuses on consultation/education and support services for all others and/or support to individuals in treatment. Referrals for this program are predominately mandated by Corrections and Public Safety Probation.

How are individuals deemed suitable? Once they are deemed eligible for the treatment option and a guilty plea is entered, suitability for treatment assessment is conducted by Community Corrections. They determine the offender’s readiness and capacity to benefit from treatment programming and assist in identifying the most suitable treatment program. The assessment process includes consultation with Mental Health and Addiction staff. Voluntary individuals must also be identified as suitable for the program. They must be ready to accept responsibility and have capacity to attend programming.

Some groups are co–facilitated with Probation Services, and two with Saskatoon Indian and Métis Friendship Centre. This team runs groups 50 weeks of the year. In 2014, there were 551 enrollments to the Response to Violence team. In 2015/16 to date, there have been 439 enrollments. Post–test assessments indicate significant reduction in negative attitudes and behaviours. Measures regarding relationships also demonstrate positive change. Other measures support a reduction in gender–role conflicts.

Research consistently shows that the completion of a treatment program is a key factor in the effectiveness in reducing the rate of recidivism or re-offending among participants. The programs run by our team in Saskatoon contribute to the reduction of rates of recidivism. Team members work passionately and diligently to reduce violence to women, men, and children. Each and every day they come to work to help change the lives of many. I am very proud of the team and grateful to be part of a successful, determined and talented group of people. ❧
The Provincial Family Violence Treatment Program (PFVTP) is a community treatment initiative for domestic violence perpetrators, with a priority on court mandated offenders. This program is funded by Alberta Health through Alberta Health Services. Currently in 18 communities and delivered by 23 agencies and numerous local partners, treatment program configuration is dependent upon local community capacity and collaboration. An integral component of this program required by the PFVTP Standards is the partner safety check. Like the treatment component, the partner safety check process varies from community to community.

To inform the updating of the PFVTP Standards, a scan of the literature revealed limited information in regard to partner safety check standards, specifically within the context of offender treatment. An exception is the work of Tutty, Knight, and Warrell (2011), which examined partner safety check processes under Homefront in Calgary.

To gain greater detail of the successes and challenges of partner safety checks, an in-person review in each PFVTP participating community was undertaken in Fall 2015. With face-to-face and telephone interviews, provincial consultants gathered lessons and insights to inform the upcoming PFVTP Standards revision.

Local partner safety processes were completed in 15 of our 18 communities by in-person visits or phone contact at the time of writing. Direct program partners are those who are employed by, contracted with, or directly refer clients to the treatment program. These are the treatment agencies, Community Corrections, AHS Addiction and Mental Health, and partner safety agencies.

Many community consultations were broader and included members of local domestic violence networks. For example, in some communities the women’s shelter may not be a contracted partner of the program, but consultation obtained an understanding of all partner safety activities and available resources. We hope these consultations will provide an understanding of the larger partner safety context in which the PFVTP partner safety check exists.

Although it is no surprise that communities of different sizes have access to more or less services, even communities with a limited number of resources find ways to collaborate to ensure partner safety. Some communities have created wider domestic violence teams that are involved with offenders and partners early in the justice process—some even at incident—regardless of whether charges are laid. Some services continue to the end of court order and beyond, although all partner safety services remain voluntary.

The most mentioned challenge for the PFVTP partner safety check component has been to obtain current contact information for partners, particularly due to the length of time between incident and treatment. Consistent with previous research findings, partners have often moved or changed numbers. In communities with domestic violence teams, however, this seems to be less problematic as the team often already has ongoing pre-treatment contact with the partner.

Despite these partner safety checks challenges, agencies see value in the timing of the contact. In many communities it appears that the majority of domestic violence services are available earlier rather than later relative to the incident. Having the partner safety check occur at the time of treatment provides another opportunity to check that the partner remains safe and to link that partner back into services if necessary.

All participating communities were contacted by mid-January and a summary of the information gathered, including recommendations for the PFVTP Standards revision, should be available March 2016.

Reference
Data collection and analyses were guided by narrative inquiry methodology. Narrative inquiry encourages participants to tell their stories from their own perspectives and in their own words. This method allows participants to share, from beginning to end, what they have experienced. Results from narrative inquiry analyses revealed a number of important themes shared by participants. Results presented here are only a brief summary. Participants noticed red flags early on in their relationships, such as frequent controlling behaviours at the hands of their partners. Partners began monitoring their phone calls, asking frequent questions about where they were going, what they were doing and who they were spending time with, and ultimately worked to isolate these women from friends and family. Controlling behaviours seen within the first months turned to more aggressive and often violent outbursts. For example, women reported substantial psychological, emotional, physical or sexual abuse at the hands of their partners. At some point, participants within this sample made a decision to leave the relationship. Many women believed that leaving the relationship would bring an end to the abuse they experienced. Unfortunately, leaving marked a new horrifying chapter of endless psychological abuse, including new types of controlling, obsessive, and abusive behaviours through the form of stalking.

For most women, stalking behaviours they experienced included being repeatedly followed; receiving texts or calls hundreds to thousands of times a day; having notes or gifts left at her home or place of work; having the stalker driving by her home; and showing up unexpectedly at her home. For many participants the stalking behaviours escalated from phone calls to showing up at her home, constant drive–bys of her house or work, threatening family members, friends or colleagues, vandalizing property, and threats of physical violence. A few participants reported experiencing more severe criminal acts, such as break–and–enters or physical/sexual assaults perpetrated by their stalkers. This relentless harassment created an environment where women did not feel safe, and reported being in a constant state of fear. Women explained that the psychological and emotional abuse experienced as a target of stalking is constant and relentless.

All women within this sample sought help from the police and justice system in an attempt to stop the behaviours of the stalker. Unfortunately, seeking protection from the legal system did little to stop the ongoing abuse. With regard to police contact, women explained that having officers who listened and tried to understand their experiences helped them to feel safe and comfortable in reporting incidents and seeking formal supports. They also emphasized the importance of taking women seriously when they come forward to report instances of stalking. A number of themes related to women’s experiences with the justice system emerged from the data. For instance, prolonged trial dates, low conviction rates, and constant breaches associated with no contact orders added to feelings of disappointment and exacerbated fears associated with personal safety and protection. In addition, women reported that many charges were dropped or plead down to a lesser offence, which added to their frustration and dissatisfaction with the justice system. Women reportedly felt that the stalking behaviours would only end if the perpetrator died, moved onto another victim, or killed them. Participants expressed feelings of helplessness and hopelessness as a result of the many failed attempts within the legal system and believed that there should be more protection in place for targets of stalking within our community.

Although the true impact of this study will not be known until further dissemination has occurred, we feel as though this research is extremely pertinent and needed within our community. Our goal now is to disseminate findings to community agencies and police responders in the hope that we can increase awareness about the life–altering and devastating effects of partner stalking and the lack of resources and services available for women within our community.
Announcements, Conferences and Events

Winter 2016 - Family Service Saskatoon presents healthy relationship programs. For more information refer to familyservice.sk.ca/wp-content/uploads/2016/01/2016-Winter-brochure.pdf, email info@familyservice.sk, or call 306-244-0127.

February 24 & April 13, 2016 - Pink Day aims to raise awareness about bullying issues and what people can do to create safe and respectful environments. Presented by the Canadian Red Cross. For more information refer to www.redcross.ca/in-your-community/manitoba/manitoba-events--campaigns-and-fundraising/every-day-is-pink-day-in-manitoba and campaigns.redcross.ca/PinkDaySK.

March 8, 2016 - International Women’s Day Breakfast: Celebrating 100 Years of Manitoba Women’s Right to Vote, 7:30–9 a.m., in the Hotel Fort Garry Provencher Room. Co–hosted by the Canadian Labour Congress, the Manitoba Federation of Labour, and the Winnipeg Labour Council. Guest speakers include Barb Byers, Secretary–Treasurer, Canadian Labour Congress, and Kelly–Ann Stevenson, President, Council of Women Winnipeg. For more information refer to www.ournellie.com/events/international-womens-day-breakfast, or call 204–947–1400 for tickets.

May 13, 2016 - Responses Matter: Responses to Interpersonal Violence Network Meeting and Conference in Montreal, Quebec. Presented by Responses to Interpersonal Violence Network. Aspects such as social, systemic, and organizational responses to victims and policy will be discussed. The approaches victims themselves have identified as helpful to their recovery will also be addressed. For more information email janie_d_c@hotmail.com.

May 17–18, 2016 - PATHS Conference in Regina, Saskatchewan. A provincial conference on ending violence against women and building violence–free communities. For more information refer to pathssk.org/events/conference-2016.

Kendra Nixon... continued from Page 3

Her research focuses on institutional responses to interpersonal violence (IPV), including the child welfare and criminal justice systems. Most recently she has been researching how the child protection system responds to IPV and mothering within the context of partner violence. In addition to joining our Steering Committee, Kendra has agreed to sit on the Regional Council as the academic representative. We are very pleased to have Kendra get more involved in RESOLVE committee work, as she has a deep knowledge of the issue of family violence and of the history of RESOLVE.
Walking With All Our Relations: A Journey to Reconciliation via Orange Shirt Day
by Jessica Loeppky, Donna Martin, Elaine Mordoch, Kendra Rieger, Heather Waloshuk, Maria Cortes–Toro, and Hannah Curtis
– College of Nursing, Faculty of Health Sciences, University of Manitoba

The third annual Orange Shirt Day, an event to give recognition to the experiences of former students of Indian Residential Schools, took place across the country on September 30, 2015. Inspiration for wearing orange shirts and honoring this legacy came from a story shared by residential school survivor, Phyllis Webstad, whose grandmother purchased an orange blouse for her to wear; she was stripped of the orange blouse upon arrival at the school.

Members of University of Manitoba’s Nursing Students Association wished to publicly honor survivors and acquired funding from the College of Nursing Endowment Fund to host Every Child Matters—Orange Shirt Day. The event was planned under the guidance of Margaret Lavallee, Elder–in–Residence, Centre for Aboriginal Health Education, NSA representatives, a graduate student, and several faculty members. Over 150 participants donned orange shirts designed with the logo, Every Child Matters, and embarked on an awareness walk to the National Research Centre for Truth and Reconciliation (NRCTR). Students presented a signed pledge to the NCTR that promised to provide culturally safe care to future Indigenous patients and families. Participants also reflected on critical questions presented on graffiti walls prepared by Indigenous artists Elaine McIntosh and Nadine McDougall. Acknowledging this tragic aspect of Canada’s history is key in the journey towards reconciliation.