

"Building the smallest democracies at the heart of society."
The United Nations: The International Year of the Family, 1994

Agreement# 40063171

Saskatchewan Domestic Violence Courts: *Where Justice and Programming Meet*



by Frankie Jordan

Saskatchewan has three domestic violence therapeutic courts—Battlefords Domestic Violence Treatment Options Court, established in 2003; Saskatoon Domestic Violence Court, established in 2005; and Regina Domestic Violence Court, established in 2008. These courts provide an early intervention option to offenders that allows sentencing to be delayed until after they have completed domestic violence prevention programming. Offenders must take responsibility for their actions and enter a guilty plea prior to entering the program. The therapeutic program approach emphasizes healing and provides an alternative to traditional court processes.

As stated in the National Judicial Institute paper *Judging for the 21st Century: A Problem-Solving Approach*, the underlying focus of this therapeutic approach to justice:

...addresses the "complex, often overlapping, and sometimes intractable social and personal issues" – such as addiction, poverty, impaired emotional or anger-management skills, low literacy, mental illness, or abuse – that underlie human causes of crime and criminal behaviour. By focusing on the cause of criminal behaviour, a therapeutic jurisprudence approach addresses the "revolving door" system that recycles repeat offenders through the criminal justice system.

If I hadn't gone through this program I'm scared of the person I could have...continued to be...it was a life changing moment for me and although I regret the circumstances that made me get into the program, I don't regret doing it. I would do it again, ten times out of ten.

Program graduate

The success of all three courts can be directly attributed to the collaborative partnerships between health, social services, justice and

community agencies that offer victims enhanced support and services and provide offenders with programs that increase their knowledge and skills to address and prevent criminal behaviour.

Although each of the three courts was developed to meet a need in their respective communities using existing resources, the following principles, policies, and practices are common across the courts:

- Domestic violence is a learned behaviour that can be changed.
- Offenders must accept responsibility for their criminal actions while being supported to change attitudes and behaviour through group therapy.
- Supports and services for victims must be easily accessible throughout the court process, if they choose.
- Requests for changes to protective conditions must

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Female Genital Mutilation/Circumcision/Surgery/Cutting? ...an unending dilemma Part 1



by Sally Ogoe

Like many researchers and academics who have presented research on traditional cultural practices, I understand that these practices are intertwined in the history of the people, their experiences and beliefs, and even the academic spaces we occupy. Culture is not only the way of life of a people. Culture has something to teach us, whether it is to create the space where we reexamine the impact of culture on the lives of those it affects, or grounds for developing relevant analysis to transform society.

As part of my Masters' program I took a class that presented an interesting perspective on issues of human rights versus cultural practices. The course included readings and lively discussion on the topic of female genital mutilation (FGM). I found it exciting that a cultural practice that previously was not discussed is an issue which is receiving increased public attention. This procedure is performed in African, Middle Eastern, and Asian countries, and in western societies where supporters of the tradition have migrated. Discussions from that class, and my Masters' thesis which focused on this custom in African countries, showed me the importance of the language that is used when talking about cultural practices and of understanding why some groups still engage in this tradition.

The debate on female genital mutilation/circumcision/surgery/cutting, as this practice is differently called, includes terminology. For some practicing groups, this procedure is nothing more than circumcision or cutting, similar to the 'harmless' procedure that is done for boys. Others are more tolerant of the term *surgery* because it is viewed as a necessary medical procedure for females. For African groups that engage in this practice, referring to their tradition as 'mutilation' is deemed not only disrespectful, but also one of the many ways in which western society looks down on Africans and determines what is or is not appropriate for this group. There is a need for sensitivity and objectivity when addressing this topic and a need to understand the power politics that serve as barriers for

discussion and change.

According to World Health Organization (WHO, 2016), FGM is the partial or total removal of the external female genitalia for no medical justification. The organization has identified four main types of genital mutilation with varying degrees of extremity of the incision of the female genitalia. In some countries very young females are subjected to this rite of passage while in other countries it is performed on adult females just before marriage. It is difficult to develop a positive view of FGM when there is an extensive amount of information on the negative mental, physical, and emotional health implications reported by medical practitioners and human rights violation arguments against it.

Existing legislation policing FGM is based on reports that international bodies such as WHO, United

Nations, World Medical Association, and International Federation of Gynecology and Obstetrics have presented. Despite legislation, some practicing groups are not willing to collaborate with law enforcement authorities to eradicate this practice. African groups that engage in FGM and including females see these laws as creating spaces of fear, exclusion, and challenges for them in a highly patriarchal society. Even with awareness and education efforts and legislation that argues for protection against practices that are detrimental to female health and well being, criminalization has not been able to completely eradicate this cultural practice in any African, Middle Eastern, or Asian country.

As noted by De La Rey (in Gqola, 2014, p. 14), "diversity needs to stimulate us to debate more vigorously". The goal of bringing FGM into the spotlight is not to condemn or look down on practicing groups, but rather to create a platform where there is authenticity in the arguments that call for the abolishment of this practice. In Part 2 of this article I will discuss reasons why some Africans still perpetuate this cultural practice, and how it may be eradicated.



Sally Ogoe

Manitoba Update: RESOLVE Congratulates 2016 Boivin Bursary Recipients



by Jane Ursel

Three outstanding students who are committed to research and working in the field of domestic violence have received Boivin Bursaries this year.



Jahna Hardy

The first recipient is **Jahna Hardy**, who lives and works in the Interlake district of rural Manitoba, and begins graduate work in the Faculty of Social Work this fall. She is a foster parent with Child and Family Services, and her experience has led to an interest in

child welfare policies in cases of domestic violence. Jahna states that *"In my work within the field of social work I have provided counselling to many clients who have been removed from their families of origin as a result of family violence."* While she acknowledges that these *"policies are in place to ensure the wellbeing of the child"*, she questions whether *"this process of immediate apprehension can have more of a negative effect than keeping a child in a home that has exposure to violence? Is attachment a strong enough protective factor to implement intensive home support (workers, workshops, counselling, etc.) in order to keep children unified with their parents/caregivers while repairing the harm associated with witnessing violence?"* Jahna is pursuing an area of study of growing importance in the field of social work and the Boivin Bursary Committee and RESOLVE are pleased to support such critical studies.

The second recipient is **Richelle Ready**, who is also in the Faculty of Social Work. Richelle can add the Boivin Bursary to an earlier award from the University of Manitoba to support ground-breaking research on the



Richelle Ready

criminal justice response to reports of sexual assault in Winnipeg. She will collect and code two years of sexual assault data from the Winnipeg police and follow it through the justice system. Working with RESOLVE, Klinik (sexual assault program), the Winnipeg Police Service, and the Prosecution Branch of Manitoba Justice, Richelle will document the rate and the factors associated with successful prosecution of cases or the attrition of sexual assault cases. The goal of this study is to provide information to victims so that they can make informed decisions about reporting their assault to the police. Richelle is well qualified for this sensitive work, as she has extensive research experience collecting and coding data from the Winnipeg Family Violence Court.



Olivia Peters

The third recipient, **Olivia Peters**, is an honours student in the Department of Sociology. Olivia is working as a research assistant at RESOLVE on the Canadian Domestic Homicide Prevention Initiative for Vulnerable Populations.

This national study focuses on four vulnerable populations—children exposed to domestic violence, immigrant and refugee populations, people in rural and remote regions and Aboriginal populations. Working with our partner, the Native Women's Association of Canada, the Manitoba research team Olivia works with has the mandate for research on Indigenous populations. She is wrapping up an annotated bibliography in this field of research for the national team. Olivia identifies an interest in Indigenous people who have been both offenders and victims of interpersonal violence. For her honours thesis she would like to explore effects of intergenerational trauma and the potential of culturally specific programming to promote healthy relationships and community integration. ❀

Saskatchewan Update



Introducing Our Steering Committee Members

Dawn Rain

My name is Dawn Rain and I work as the Clinical Coordinator in the Response to Violence team in Saskatoon, Saskatchewan. I began in the counselling field shortly after completing my undergraduate Social Work degree. While attending university I was a member of the Canadian Forces Reserve Force and Regular Force, which took me all over Canada and culminated with a tour in Bosnia. While overseas, the impact of various types of violence, addictions, trauma and mental health was apparent. When I look back now, this marks the pursuit and interest in the field of violence, as well as addiction.

My first social work job was in the addiction field in a half-time addiction/half-time problem gambling counselor position. I saw people who experienced numerous issues and asked myself how I could best help foster change given the complexities of the issues. Intimate partner violence and addictions seemed to go hand-in-hand. Conferences and training were continually sought to enhance my clinical skills. I then took my Master's Social Work program, which provided the theory, knowledge, tools, and skills to help people with their more complex needs.

Afterward, I worked with children, and there became privy to the impact of intimate partner abuse on children. Children experience short and long term emotional, behavioral, and developmental problems, including post-traumatic stress disorder. In some cases of physical and sexual abuse, the children had considerable problems with behavior, negative-peer involvement, depression, anxiety, violence to others, developmental delays, irregular school attendance and inappropriate sexual behavior.

I returned to the addictions field as supervisor of the problem gambling team. My work was closely involved

with the Response to Violence Team, from where I became involved in presenting addiction information in the alternative to violence groups. I learned, developed skills, and become more acutely aware of the impact of intimate partner violence.



From there I became certified as a mental health practitioner for Equine Assisted Psychotherapy through Equine Assisted Growth and Learning Association (EAGALA). During this training facilitators shared their experiences and successes with men who were charged with domestic violence, and their treatment with the help of horses. I began to think that this was my calling, but when would the opportunity present itself?

From there I began the process to become a certified sex addiction counselor. You may ask how this relates to intimate partner violence: Imagine finding out your partner is having sex outside the relationship, or sending naked pictures online, or going to massage parlors. Yet again another connection to intimate partner violence was fostered.

Finally, a position became available and I joined the Response to Violence Team. Every day I have an opportunity to directly impact those who identify with intimate partner violence and affect positive change. I am able to use my training in addictions and equine assisted psychotherapy to help each person who comes through the door. In addition to assisting the team to broaden their knowledge, skills and ability I am also learning through the team's wealth of knowledge, skills and ability in working with intimate partner violence. Our program has been proven to reduce the effects of intimate partner violence and we will continue to measure results. We evaluate and make changes regularly based on evidence, research, outcomes, and client feedback. We are an ever growing and developing team working diligently towards positive change. ☘

Alberta Update: Rural and Northern Community Response to Intimate Partner Violence Research Project, Alberta: Overview of Current Success and Recommendations for Change Part II



by S. Barton, K. Hungler, D. McBride, N. Letourneau, & S. Mailloux

Selectd IPV service providers shared their ideas, recommendations, experiences, and hopes for the future. Researchers identified four areas that affect women in rural and northern Alberta who experience IPV: (1) Protective factors such as personal and external resources available to women; (2) Informal supports derived from family, friends, and communities (possibly including cultural, faith, and/or geographical communities); (3) Formal services, including professional services, provided ideally within integrated case management; and (4) Context, which includes environmental and geographical factors that affect daily life for women in the identified communities.

Participants highlighted the need for increased preventative education in schools and communities, including examination of factors that contribute to IPV, and for increased awareness of the effects of IPV on the health and resiliency of communities and various cultures. IPV survivors who now have a healthy and positive outlook could share their “expertise” and possibly reach out to peers who live with IPV. Positive community role models were suggested as potentially

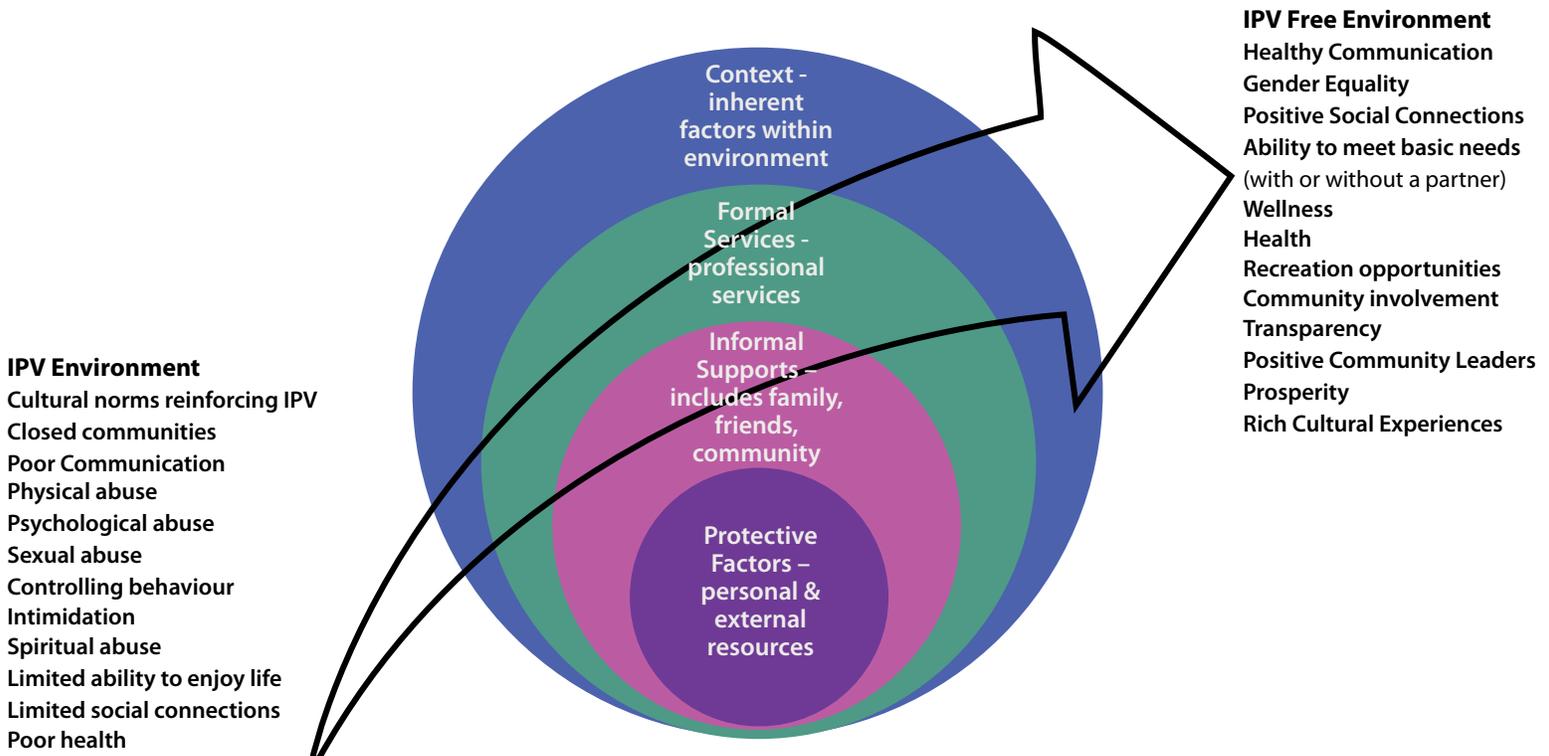
effective ways to engage youth. IPV training for community volunteers was considered important to northern and rural communities, as many rely on volunteers to provide services. Focus on the social determinants of health, rather than on response, was viewed as possibility toward the foundation for an IPV preventative model that was seen as important.

Recommendations

- Establish a trusting relationship where women feel safe to confront and counteract common and intense feelings associated with IPV, such as self-blame and low self-esteem.
- Inform women of their rights and choices by providing precise information about IPV services and who within the system to contact for support, ideally with the help of an advocate.
- Create comprehensive support including economic assistance based on costs of living; parenting/childcare; specialized mental health support, especially IPV-

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Creating and Sustaining Non-violent Communities in Rural and Northern Canada



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be requested through the Court, and a formal assessment—based on risk and lethality factors—must be conducted.

- Offenders in programming must regularly attend court to discuss their progress, or challenges, with the judge.
- Offenders who successfully complete programming are eligible to receive lighter sentences than those who do not, or those who choose to use the traditional court process.

Program evaluations and recidivism studies conducted with the courts demonstrate that they are meeting their objectives of timeliness, improved victim support and safety, offender accountability, cultural responsiveness and increased specialization in the area of domestic violence among justice sectors. Attitudinal and behavioural scales used in the domestic violence programs show that the programs have a positive impact on offender attitudes and behaviours. As well, anecdotal evidence tells us their partners report feeling safer.

There's a big change in my household. The channels of communication are open and there's a lot of trust between my partner...the kids can feel this loving atmosphere in the house.

Program graduate

Recidivism studies showed that offenders referred to domestic violence programs through the early intervention option in the domestic violence courts completed programming more often than those referred otherwise (i.e., post-sentence and self-referrals). They also showed that program completion significantly reduced re-offending and the number of police call-outs when compared to other groups of offenders.



Victims, offenders and families benefit from a therapeutic approach to domestic violence incidents. In Saskatchewan, these benefits include:

- Reduced recidivism
- Increased safety for victims of domestic violence and decreased violent behaviour by their partners
- Increased compliance with treatment and rehabilitation programs
- Increased alternatives to incarceration
- Increased collaboration with justice, health, social services and community agencies to address the underlying causes of criminal behaviour

- Increased support for victims and programming for children who are exposed to domestic violence.

In order to establish these Saskatchewan courts successfully, the following components had to exist, or be developed, in each community:

- Coordinated collaborative community response
- Strong stakeholder partnerships
- Stable and adequate resources with a willingness to stretch mandates and reallocate resources
- Trained and dedicated personnel (judges, Crown prosecutors, Legal Aid lawyers, probation workers, victim services workers, program providers) who embrace the therapeutic approach to justice
- Service provision for victims and offenders
- Dedicated court calendars
- Court and offender tracking systems.

For more information on Saskatchewan's early intervention option for programming, you can watch a recently produced informational video at www.sasklawcourts.ca/index.php/home/resources/videos. Through interviews with program graduates, victims/survivors, police, the judiciary and other justice, health and social services professionals, the video documents the journey of accused individuals who choose the early programming option, and the perceptions of the victims. ☘

Getting arrested...it was the worst and best day of my life... because I finally got the help I needed to get.

Program graduate

Announcements, Conferences and Events



October 4–5, 2016 - RESOLVE Research Day 2016: Indigenous Healing and Trauma: Intergenerational Solutions, at the University of Calgary, Alberta. Presented by RESOLVE–Alberta and Awo Taan Healing Lodge. Highlighted will be the perspectives of recognized Indigenous researchers and community experts. Also offered is concurrent sessions for researchers and community members to share evidence of best practices in promotion of the health of Indigenous communities. For more information refer to www.ucalgary.ca/resolve/research-day-2016.

October 14, 2016 - Law & Justice: A Woman Judge's Insight - 26th Working in Support of Equality Breakfast at the RBC Convention Centre in Winnipeg, Manitoba. Presented by Manitoba W.I.S.E. Inc. (formerly LEAF Manitoba Inc.). For more information refer to manitobawise.com/.

October 18-19, 2016 - Collaborating Across Systems: Preventing and Responding to Domestic Violence against Women and Children, in Richmond, BC. For more information refer to www.casw-acts.ca/en/collaborating-across-systems-preventing-and-responding-domestic-violence-against-women-and-children.

November 17–18, 2016 - 16th Diverse Voices Family Violence Conference at the Fantasyland Hotel in Edmonton, Alberta. Early Bird Fee, until October 21, 2016. \$250 + GST = \$262.50 (includes breakfast and lunch both days). For more information refer to www.diverse-voices.com.

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focused counselling to counteract re-victimization by the court system; increased education funding aimed at long-term, self-sustaining employment possibilities; increased affordable, second-stage, and subsidized housing with priority placements for women; and transportation solutions, both locally and to larger centers.

- Increase access beyond weekdays and beyond the 9AM–5PM norm by increasing funding of programs; increase the number of positions for mental health professionals and provide incentives to stay in northern, rural community positions; and establish partnerships between urban centres having greater IPV resources and rural communities.
- Offer women resources to attend court including affordable/available legal representation, transportation, childcare, and per diem expenses if an overnight stay is required.
- Increase public awareness and learning about IPV, particularly for professionals and volunteers in the field.
- Provide all professionals who work with women with specialized IPV training that includes an understanding of current best practices, a mandatory introductory course for all formal service providers within their first year of being hired, and cross-cultural training for increased understanding of the complexity of social circumstances and cultural norms to better serve these subpopulations.
- Provide police training specific to working in rural areas and utilize case studies in RCMP DV training.
- Increase levels of training for shelter workers who are frequently faced with clients requiring mental health, or other, interventions beyond most shelter workers' levels of competency.
- Establish more domestic violence courts staffed with judges trained in family violence legal proceedings.
- Advocate changes to the Criminal Code of Canada to include a range of physically, sexually, and psychologically coercive and controlling acts in the definition of IPV to give professionals more tools to address and respond to IPV.
- Create innovative outreach opportunities for women to access IPV services that ensure privacy, confidentiality and safety.
- Increase research and evaluation of current programs in order to better inform and guide the allocation of resources.

The full *Community Report* is available from www2.uregina.ca/ipv/research.html. ☞



We're finding solutions to protect women and children from violence and abuse!

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Changes to Addressing Sexual Assault on Campus

Over the last year many universities across Canada have developed programs and policies to improve the response to sexual assault on campus. Among these universities are those that host RESOLVE Centres—University of Regina, University of Calgary, and University of Manitoba.

Last September, the University of Regina introduced a new policy and response protocol to ensure the rights and needs of individuals who report sexual assault and violence are met. The policy includes a commitment to ensuring a safe environment for reporting, ensuring that adequate support, information and referrals are available to survivors, and primary prevention through education. Last October, the Women's Resource Centre at the University of Calgary launched the *Ask First* project. This is a three year project with the aim of building a culture of respect and decreased tolerance of victim blaming by providing education that addresses the myths surrounding sexual violence. Effective September 1 of this year, a new Sexual Assault Policy was introduced at the University of Manitoba. The revisions to this policy include a stronger recognition of the rights of individuals who experience sexual assault, a website to provide support and education to those affected by sexual assault, and clear direction regarding who can provide support and advice on campus. The common theme across these policies and programs is a recognition of the need to create safe spaces for all who work and study on campus through support and education. ☘

RESOLVE Manitoba

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