

# Summary of Healing Journey presentations/analyses conducted in Saskatchewan

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# The Healing Journey Study

- ▶ Tri-provincial study examining women's experience of IPV
- ▶ 7 waves of interviews at 6 month intervals examining
  - Impact of IPV on health and parenting
  - Utilization and satisfaction with services
  - Detailed labour force questionnaire for cost analysis study
- ▶ In-depth qualitative interviews
- ▶ Funded by Social Sciences and Humanities Research Council (SSHRC) – Principal Investigator: Jane Ursel, Ph.D., University of Manitoba

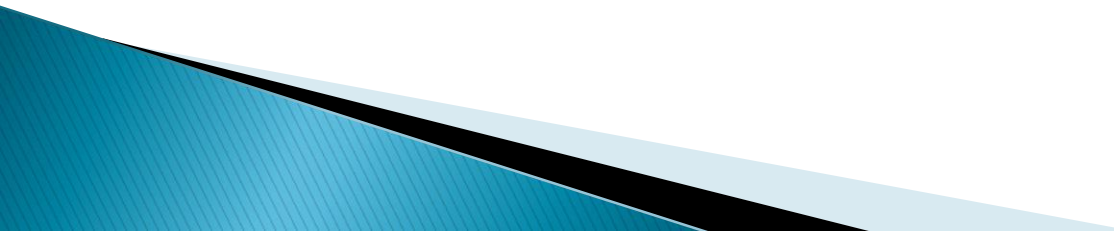
# Recruitment Sites and Number of Participants Recruited by Province

Province	City/Town	Number of Participants
Manitoba	Winnipeg	163
	Small Town/Rural	45
	North	14
	<b>TOTAL</b>	<b>222</b>
Saskatchewan	Regina	62
	Saskatoon	84
	Prince Albert/north	68
	<b>TOTAL</b>	<b>214</b>
Alberta	Calgary and Area	94
	Edmonton and Area	75
	Small Town/Rural	48
	North	12
	<b>TOTAL</b>	<b>229</b>
<b>Overall Total</b>		<b>665</b>


# Summary of Results

21 presentations in Saskatchewan – summary  
of results

# Eating patterns reported by a sample of women who have experienced IPV

- ▶ Women from our sample (Saskatchewan) were more likely to report poor eating when compared to the general public.
  - ▶ High percentage of women (43.4%) reported experiencing a dramatic change in weight, either weight gain or weight loss, that concerns them.
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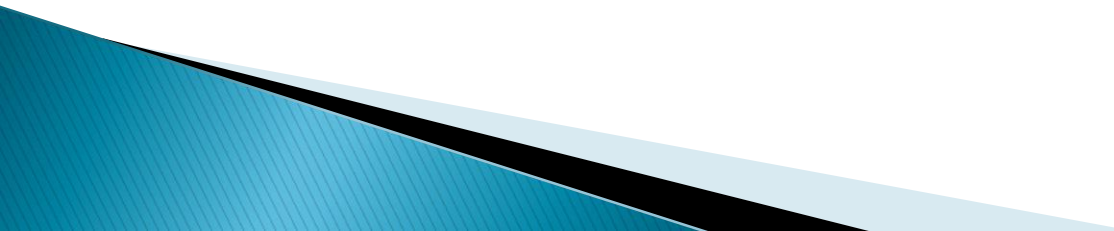
# Impact of abuse on sleep during IPV

- Women who have been abused report high levels of sleep disruption (40% and higher).
  - In the Healing Journey SK Sample, 60.9% (113) reported they do not get enough sleep.
  - Risk of mood disturbance and suicide also increases following sleep problems, implying a causal relationship.
  - Sleep disruption and deprivation have been demonstrated to result in poorer health outcome.
  - Many survivors of IPV had sleep problems much of their lives and may have learned to cope with sleep deprivation early.
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# Bad memories in the bedroom: The effects of cued recall on sexuality in IPV Survivors

- ▶ A higher frequency of being locked in the bedroom is related to higher incidence of rape or attempted rape
- ▶ Women who have been locked in the bedroom but never raped demonstrate more discomfort with their sexual relations than women who have not experienced a bedroom lock-in or rape
- ▶ Women who have experienced non-sexual abuse have patterns of discomfort with sexual relations similar to that of women who have experienced sexual abuse
- ▶ “Locked in the bedroom” is a form of Severe-Combined Abuse
- ▶ IPV shapes women’s experiences of sexuality

# Exploring how survivors understand and experience their sexuality

- ▶ A number of Aboriginal and non-Aboriginal women viewed “proper” men as sexually active and “proper” women as sexually passive.
  - ▶ Aboriginal women were more likely to give brief answer than non-aboriginal women but overall, nobody really talked about sexuality.
  - ▶ Young women’s sexuality was highly regulated, as women age, the surveillance was lessened
  - ▶ **Three Themes:** Silence, Masculinities and Femininities, and Power.
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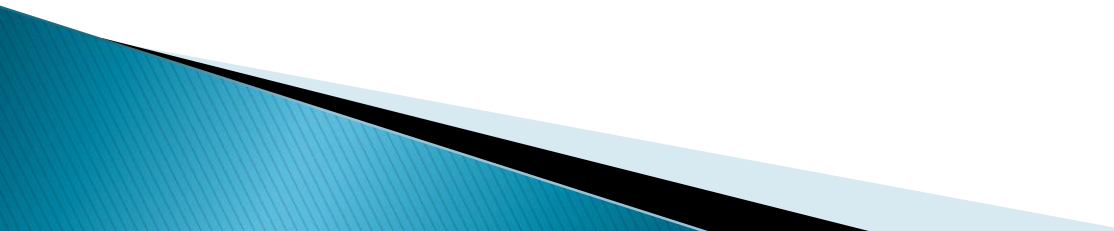
# Abuse during pregnancy

- ▶ Of women abused during pregnancy, 60–96% are women who have been abused in the past
- ▶ Unplanned or Unwanted pregnancy can increase risk by 2.5 – 3x
- Abuse during pregnancy has been associated with:
  - Delayed entry into prenatal care
  - Low birth weight (most due to amount of stress lived)
  - Premature labour
  - Increased behavioural risks (Tobacco/Alcohol/Illicit drugs)
  - Poor maternal nutrition
  - Fetal trauma (miscarriage, spontaneous abortion, etc.)
  - Maternal health issues (most due to Fear of partner)
- ▶ Low birth weight and preterm infants are at risk for: Cognitive deficits, motor delays (including cerebral palsy), language delays, and increased rates of attention, behavioural, and psychological problems.
- ▶ Abuse was consistently associated with post-partum depression

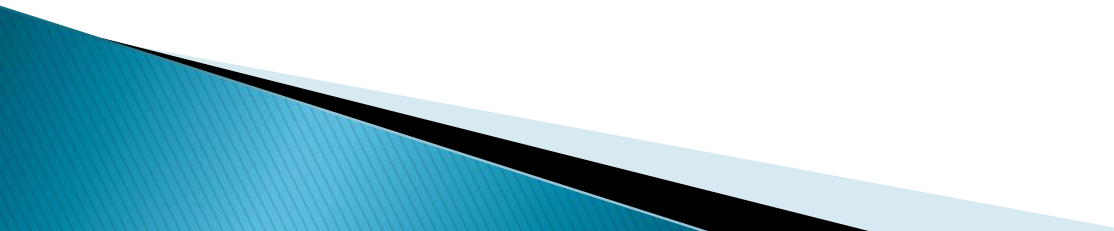
# Experience of abuse, harassment, and strangulation in Saskatchewan survivors of IPV

- ▶ Attempted strangulation is associated with all types of abuse.
- ▶ Attempted strangulation is a risk factor for murder by an intimate partner.
- ▶ The correlation between strangulation and all abuse types suggests that women experiencing all types of abuse could be at risk of being murdered by an intimate partner.
- ▶ Harassment levels in Saskatoon and Regina were the same in this sample of survivors of IPV, but rates of arrest for harassment is higher in Saskatoon.
- ▶ These results suggest that women who are harassed in Regina have a more difficult time when dealing with the criminal justice system.
- ▶ Police intervention is either not available or delayed.

# PTSD symptoms in relation to women's experiences with IPV

- ▶ Phobic Anxiety is associated with all types of IPV.
  - ▶ Victims of IPV are more likely to experience all types of psychopathology.
  - ▶ In addition to PTSD, victims of IPV also are at greater risk of depression and somatization.
  - ▶ As overall abuse experiences (severe combined abuse, childhood abuse, sexual, physical, emotional, harassment) get worse, so do all PTSD symptoms.
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# Health Service Use in Survivors of Intimate Partner Violence and Their Experiences of Symptoms of Post-Traumatic Stress Disorder

- ▶ 17.0% of Saskatchewan women who have experienced abuse reported using medication for anxiety, depression, or sleeping.
  - ▶ 34.1% (63 women) in the Healing Journey likely meet criteria for PTSD.
  - ▶ PTSD was the only significant predictor of health service frequency access when controlling for the effect of IPV severity and age.
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# Police response and post-traumatic stress disorder in women who have experienced IPV

- ▶ Are police services accessed as often as other types of available services?
  - Police assistance was accessed at least once by almost 70% of the sample.
  - The only services that was accessed more than police assistance were counseling programs (over 80%).
- No evidence of police contact, or particular police responses, being associated with mental health outcomes.
- Social support appears to be the most important predictor of mental health.

# Relationship between psychopathology and health service utilization from a sample of Saskatchewan IPV Survivors

- ▶ Severe abuse is a predictor of PTSD symptoms.
  - ▶ PTSD was a significant predictor of frequency of visits to mental health services.
  - ▶ Abuse severity was a significant predictor of frequency of visits to specialists.
  - When women were feeling like they were in crisis, they were more likely to utilize mental health services.
  - A number of women wanted to access services, but were unable because they did not have the resources, or were on a wait list.
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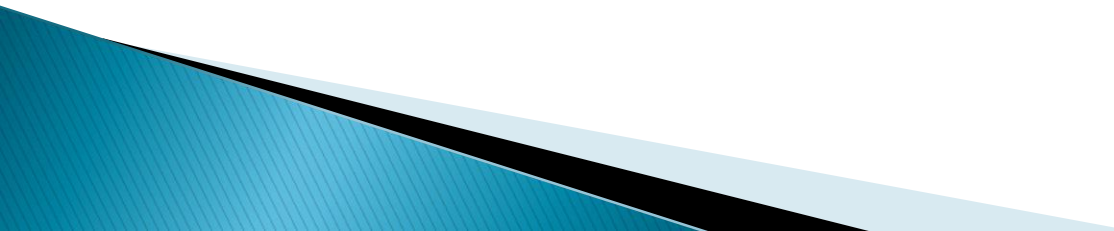
# Legal system use patterns in Saskatchewan rural, urban and northern survivors of IPV

- ▶ More than half (63.9%) of participants reported some legal system involvement due to IPV.
  - ▶ Many participants (52.8%) reported concern that the legal system in their area does not take abuse of women seriously.
  - ▶ Survivors of IPV report many positive experiences with the legal system.
  - ▶ A lot of Survivors of IPV face barriers obtaining legal support.
  - ▶ Too many women report experiencing prejudice and blame when seeking legal assistance
  - ▶ Regional and cultural factors affect experiences with the legal system.
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# Service Use Patterns in Canadian Rural, Urban, and Northern Survivors of Intimate Partner Violence

- ▶ Shelter and second stage shelter use
- ▶ Crisis line use
- ▶ Education
- ▶ Social assistance and housing
- ▶ Legal services
- ▶ Health services
- ▶ Mental health services

Service use may depend on types of services available in that community



# Service Use Patterns in Canadian Aboriginal and Non-Aboriginal Survivors of Intimate Partner Violence

## **Traditional Healing Elders**

- Symptom severity in victims of abuse declined after speaking with “traditional healing elders.” So why aboriginal women don’t use more traditional healing?
  - May be due to colonial effect (embarrassment/Christianization/lack of knowledge/etc.)

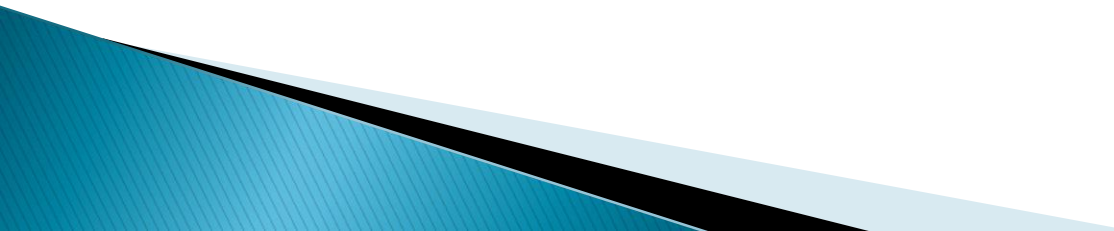
## **Shelters/Second stage housing**

- More Aboriginal than non-Aboriginal women stayed in shelters but they are less likely to use second stage housing because of fear to leave their community/live on husband’s reserve/strong value placed on family/etc.

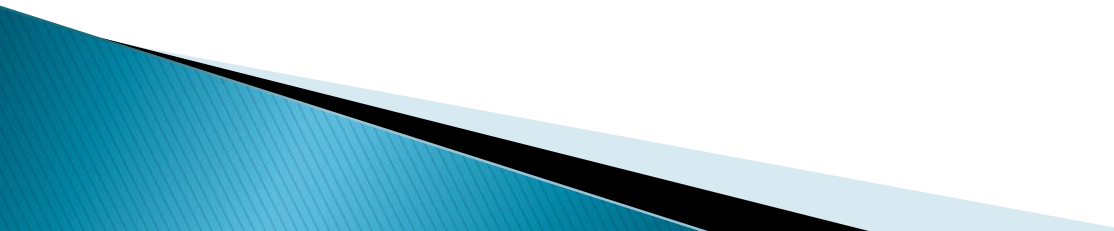
## **Access to Health care system is limited**

- Lack of health care workers with shared background and experiences
- Health care workers behaving in inappropriate, racist, or disrespectful ways


# Shelter Use Patterns in Saskatchewan Rural, Urban, and Northern Survivors of Intimate Partner Violence

- ▶ Northern women are more likely than rural or urban women to report using shelters.
    - The majority of participants in the current study reported that IPV interfered with their job training, education, and employment.
    - Abusers may control education and employment.
  - ▶ Many IPV survivors use shelter services.
    - Shelters offering employment and education support are targeting an important area for survivors of IPV.
  - ▶ Outreach is essential to helping women seek education and employment after leaving the shelter.
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# Interviewing the interviewers (The Healing Journey)

- ▶ Retention of Participants: Long lasting positive relationship between interviewer & participant: trust, rapport, feeling comfortable, caring, non-judgmental, staying connected/monetary payment important/acknowledgment of time/flexibility in order to help others
  - ▶ Retention of Interviewers: to receive feedback and support/feeling of commitment/personal growth/desire to help and share data with communities in order to change policy/relationship
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# Interviewing the interviewers (The Healing Journey)

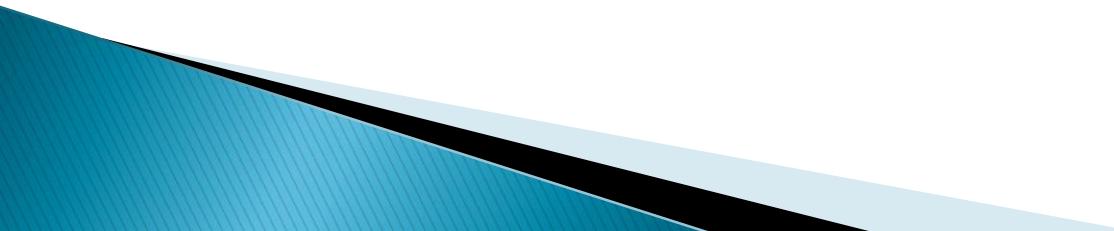
- ▶ Trust, relationship building and understanding the diversity of Aboriginal people were key themes.
  - ▶ One strong theme that emerged was ensuring the women had access to services. It became an ethical dilemma when the lack of services was very apparent to the interviewer(s).
  - ▶ While interviewers were able to set and maintain boundaries, many struggled being “counsellor” vs. “interviewer.” In addition, many felt a close bond with their participants and while they maintained the boundary, it was difficult in many instances to do so.
  - ▶ Theme: Experience that will linger with interviewers: Grief/Hope/Humour
  - ▶ Interviewer development and knowledge gained growth
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# IPV and resilience: learning from Aboriginal women's experience

- ▶ **Resilience:** Dynamic process of human adaptation over the lifespan
  - ▶ **Why resilience:** To focus on women's strength and their ability to survive
  - ▶ **What was found:**
    - ▶ Protective factors (Social support/goals/children) and social context (cumulative and historical violence/relational and cultural barriers/colonial histories) are balanced to create resilience.
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# Shifting bodies, disrupting oppression: women's stories of healing from IPV


## Healing from IPV

- ▶ The individual body is strengthened.
  - ▶ The social and political bodies are challenged.
  - ▶ The relationship between the three bodies is rearticulated, resulting in a reclamation of self.
  - ▶ IPV and healing is not just about an individual person or family.
  - ▶ Interventions need to incorporate events that are relevant to the contexts of women's lives.
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# RESOLVE to end violence in our society

- ▶ Aboriginal women face greater risk of victimization, poverty, and oppression than non-Aboriginal women.
- ▶ Gaps exist between Aboriginal women and Aboriginal men as well as non-Aboriginal and Aboriginal women.

## The Solution (according to The Sisters in Spirit campaign):

- Sustained funding for culturally appropriate services & Aboriginal organizations (healing institutions, etc.)
  - Increased recruitment of Indigenous police officers, particularly women
  - Protection of women sex trade workers' fundamental rights
  - Education programs addressing the history of colonization and marginalization of Indigenous people
  - Upholding international human rights instruments relevant to the prevention of violence against women
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# Questions?

## Thank you so much!

- ▶ If you have any more questions, contact
  - ▶ [Mary.hampton@uregina.ca](mailto:Mary.hampton@uregina.ca)
  - ▶ Have a good evening!

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