

**Stopping The Violence Outreach Programs
Regional Teleconferences Report**

Produced by

**BC Association of Specialized Victim Assistance
and Counselling Programs**

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Stopping The Violence Outreach Programs Regional Teleconference Calls, May 2007

PART 1 Summary Report

1.1 Introduction

In March 2007, we extended an invitation to the STV Outreach programs that were created since 2004 to join our Association as members. We agreed to engage a two-year trial period of membership and at that time consult with the STV Outreach programs to see if this membership schema makes sense.

In April of 2007, the Association facilitated three teleconference calls with STV Outreach workers from across all regions in BC. The purpose of these calls is to provide an opportunity for STV Outreach workers to connect with each other and identify critical issues facing women survivors of violence and STV Outreach programs, and to strategize about ways to address these issues. Workers utilized this opportunity to identify gaps in policies, programs and systems response; to bring forward priorities for resource development work; to identify training needs; and to share information.

The BCASVACP provides support on a daily basis to front-line workers and administrators, STV Counselling Programs and Community-Based Victim Assistance Programs around the province. We now extend that same support to the STV Outreach programs that have been funded through the Ministry for Community Services, and will be assisting them in clarifying their roles and coordinating their services with the other programs.

The conference calls were two hours in length and were conducted using an open-ended agenda format. Thirty-seven workers from thirty programs participated. Numerous other STV Outreach workers were able to communicate their issues or concerns before or after the calls by phone/fax/email.

The participants created the agenda of each conference call by identifying the topics, concerns and issues related to their work prior to the teleconference by responding to our request for this input. The workers participated in meetings when they were available instead of strictly within specific regions, which created a greater mix between regions. Regions were combined per call to decrease the total number of conference calls. This structure made it possible for rural workers to continue staying connected to other rural programs to address the unique challenges faced by women in more isolated or remote communities.

STV Outreach workers in all regions of the province highlighted emerging trends, strategized together to find creative solutions to problems, reaffirmed their commitment to supporting women survivors of abuse, and offered each other support and encouragement.

The issues raised by STV Outreach workers reflect three broad themes that will be broken down into sub-categories in the body of this report:



- A) Direct Service Needs
- B) Indirect Service Needs
- C) STV Outreach Contract Administration and Finances

This report is a snapshot of the issues, based on over six hours of discussions with STV Outreach workers from all regions of the province. Although there was insufficient time for workers to articulate in-depth analyses of every issue impacting survivors in their communities, the report provides a grounded overview of many of the current issues and a sound basis for the Association's recommendations. Addressing these recommendations, even by way of acknowledgement, would provide another opportunity for the Ministry of Community Services (MCS) to demonstrate their ongoing commitment to supporting victims of violence and the programs they fund.

1.2 Participating Agencies

The three Regional Teleconferences were conducted on May 8th and 9th, 2007. The teleconferences were very well attended by staff from thirty programs or 65% of the new STV Outreach programs from across the Province.

May 8th, 2007: Region 1: North Vancouver Island, Region 2: South Vancouver Island, Region 5: Interior, Region 6: Okanagan

- Laichwiltach Family Life Society
- North Island Crisis & Counselling Centre Society
- Powell River & Region Resources Society
- Islands Women Against Violence
- Community Connections Revelstoke Society
- Shuswap Area Family Emergency (SAFE) Society
- Central Okanagan Elizabeth Fry Society
- Vernon Women's Transition House Society

May 9th, 2007 Region 3: Lower Mainland, Region 4: Fraser Valley

- Sea to Sky Community Services Society
- Sunshine Coast Community Services Society
- WINGS Fellowship Ministries
- Women's Resource Society of the Fraser Valley
- Cynthera Transition House Society

May 9th, 2007 Region 7: East Kootenays, Region 8: West Kootenays, Region 9: North West, Region 10: North Central, Region 11: North East

- Family Resource Centre of Invermere
- Golden Women's Resource Centre Society
- Kootenai Community Centre Society
- Arrow and Slocan Lakes Community Services
- Castlegar & District Community Services Society
- Nelson Community Services Centre Society
- Bella Coola Community Centre Society
- Fireweed Collective Society



- Ksan Haouse Society
- North Coast transition Society
- Queen Charlotte Islands Women Society
- Axis Family Resources Ltd.
- Omineca Safe Home Society
- Prince George & District Elizabeth Fry Society
- North Peace Community Resources Society
- Robson Valley Home Support Society
- Boundary Family & Individual Services Society

1.3 Association Updates

The STV Outreach workers were provided with an update of the resources and current initiatives of the BCASVACP.

1.3.1 Resources

The following resources were mailed out to all STV Outreach and STV Counselling programs across the province:

- 2006 Training Forum DVDs
- For the Dignity of Women Resource Package:
 - 5 posters, promoting awareness about the BC Prevention Of Violence Against Women Week, 2007
 - A CD-ROM filled with 7 folders of educational materials:
 - ❖ **Fact Sheets** on Violence In Relationships, Adult Survivors of Childhood Sexual Abuse, Sexual Assault, Criminal Harassment, Acquaintance Rape, and Child Abuse.
 - ❖ **Information Sheets:** Drugs, Acquaintance & Alcohol
 - ❖ **Informational Wheels:** a total of 18 wheels containing information on equality, power and control, representing a diversity of women: Aboriginal, Immigrant, Disabled, Lesbian, Senior, Women's Substance Use; Children; Teen Equality; and Community Collaboration.
 - ❖ **Myths & Facts:** Sexual Assault
 - ❖ **Poster:** a pdf copy of the 18 x 24 inch Prevention of Violence Against Women Poster to allow programs to see where they can place their program information.
 - ❖ **Presentations:** Overheads & Power Point presentations
 - ❖ **Quizzes:** Violence In Relationships, Sexual Assault, and Dating Violence.

These resources are posted on our website: www.endingviolence.org. to provide ongoing access.



Other recently produced resources that are available on our website include:

Records Management Guidelines: Protecting Privacy for Survivors of Violence. A series of important principles and suggested approaches to managing client records which were developed by the BCASVACP and the BC & Yukon Society of Transition Houses (BCYSTH).

Best Practices Manual For Stopping The Violence Counselling Programs
This manual produced by the Association in 2006 establishes best practices guidelines for feminist trauma intervention and program management. The content is wide ranging from assessment and counselling planning, ethics, three stages of counselling work, managing clinical issues such as substance use through to management of waitlists, caseload sizes and attendance policy.

Easy Reference Guide To Bill C-2: Amendments To The Criminal Code Of Canada And The Canada Evidence Act

In 2005 and 2006 Parliament passed Bill C-2 amending the Criminal Code of Canada (Code) and amending the Canada Evidence Act (C.E.A.). With this legislation, the law makers sought to address specific victims' concerns, namely children and youth victims/witnesses who experience sexual exploitation, abuse and neglect and other vulnerable witnesses, including victims of criminal harassment and other crimes, who are called upon to testify.

This legislation includes improvements to access for testimonial aids such as screens and out of court testimony. It also creates access to testimonial aids for persons with disabilities or other vulnerable witnesses that would prevent them from being able to freely give testimony. In addition, the new Bill includes increased powers for judges to order an accused not to cross-examine a victim and to appoint counsel to do so. The Association developed this "Easy Reference Guide to Bill C-2" to assist workers in understanding the changes.

Best Practice Approaches - Child Protection And Violence Against Women

Produced by the BC Ministry for Children & Family Development, May 2004 and developed in collaboration with BCASVACP, BCYSTH, BC Institute Against Family Violence and BC Women's Woman Abuse Response and Sexual Assault Programs. It provides information and guides to workers who provide protective services when assessing and intervening in situations involving violence against women when children may be at risk from harm. The electronic version is available at: [Best Practice Approaches - Child Protection And Violence Against Women](#) available on our website.

1.3.2 Safety Issues Protocol "SIP"

Community Coordination and Women's Safety (CCWS) collaborated with RCMP "E" Division to develop an innovative new protocol that builds on their work to support communities in addressing issues at the local level. The Safety Issues Protocol (SIP) applies to all VAWIR and sexual assault files.

Through the Safety Issues Protocol (SIP) it has been agreed that concerns that do not get adequately addressed at the local now have another avenue. The SIP allows CCWS representatives to bring issues that concern victim safety to the attention of the RCMP District Officer. District Officers have been notified of this procedure, and a form has been developed for these occasions. STV Outreach workers were encouraged to work in collaboration with their CBVAP worker (if they exist within their communities) in cases



involving the RCMP policy not being followed that affects their client's safety. Workers on the calls were encouraged to call any of the CCWS staff or the Association's office for assistance and information.

For further information the programs were reminded that they can contact the CCWS staff:

Gail Edinger, CCWS Regional Coordinator,
Tel: 250-397-2389, e-mail: rosebud@bcinternet.net

Michelle Novakowski, CCWS Regional Coordinator,
Tel: 250-751-2881, e-mail: micheno@telus.net

Tracy Porteous, Executive Director at the Association office,
Tel: 604-633-2506 ext. 10, e-mail: porteous@endingviolence.org

Information regarding the **Safety Issues Protocol** (July 2006) *CCWS Information Bulletin* can be found on our website: www.endingviolence.org under the CCWS section.

1.3.3 Third Party Reporting

In sexual assault incidents, it has been observed that the rate of reporting has decreased to 8% from the previous 10%. It is important to note that often the rate of reporting is correlated with the level of marginalization that women experience. The more marginalized the women are, the less they report sexual assault incidences. The barriers that exist for Aboriginal women, immigrant women, sex workers and women with disabilities cause them not to report such incidences.

One community program shared that *“front line staff were all in agreement that third party reporting is a great idea. They also liked the fact that they can now offer women clear options”*. Thus making a real difference in the way they support sexual assault victims who arrive at their service. *“The SANE nurses were happy to see a formal system of making third party reports that takes care of all the details”*.

Information Update:

BCASVACP is pleased to announce that at the end of June 2007, the Third Party Reporting Work Team, led by CCWS and represented by VPD and RCMP, presented a proposal to the BC Association of Chiefs of Police (BCACP). The proposal has been unanimously accepted by the BCACP and province wide implementation of Third Party Reporting is slated to begin in the Fall of 2007.

This is very exciting as there has never been a province-wide policy allowing for these kind of reports and never before has there been a mechanism to track this kind of information on the police data base. We anticipate this option will result in police getting more information about serial sexual predators that in turn would result in less women falling prey to these horrendous crimes.

Thanks are owed to Vancouver WAVAW, and the Prince George and Victoria Sexual Assault Centres for paving the way as they created this reality at the local level in the 1980s.



It is important to note that the purpose of Third Party Reporting is not to replace giving a full report to police, or calling 9-1-1. The purpose is to provide a means for those survivors who would not otherwise engage with the system, but who may have information that could assist the police in identifying serial predators or trends in sexual assault.

In the past, serial predator cases like Donald Bakker, where Bakker was arrested with a duffel bag containing video tapes of over 60 assaults, none of which had been reported to police, have gone on for many years. In this case people had important information but were prevented from sharing that information with the police because of mistrust or fear of the system, fear of retaliation by the accused, or fear that they would be arrested themselves or not be believed. We hope that this process will soon provide a means for that information to be brought forward in a safe way.

Upon implementation, the Third Party Reporting process will proceed as follows:

- * A victim reports a sexual assault to a program such as a Community-Based Victim Service program or Sexual Assault Centre.
- * The information is gathered, using the standard questionnaire that has been developed, and is passed on to police without information that would identify the victim.
- * Police review the report. The information will be entered on the Police Records Information Management system (PRIME), a national police database and used to evaluate trends and look for commonalities between this sexual assault and other reports.
- * This will be followed by an assessment of whether there is interest in interviewing the victim to gather more information.
- * If there is a need/interest to interview the victim further, the police will contact the third-party agency to follow up.
- * The third party agency will contact the victim and forward the police request to meet with her. If permission is given, the worker will give the victim's contact information to the investigating officer, or arrange to accompany her to a meeting.
- * The decision to meet with the police and/or to give a full report rests with the victim.
- * If the victim remains unwilling to engage with the police, the police will leave it at that but will still have the information logged into PRIME for trend analysis.

Recommendation 1:

BCASVACP recommends that regional training be provided to the systems and the STV Outreach programs before it is implemented. BCASVACP recommends that the Ministry fund this training for the STV Outreach programs.



1.3.4 Promise To Appear (PTA) Or Undertaking To Appear (UTA)

Workers were informed that it is important for women to keep a copy of the PTA/UTA with them at all times as it is an important safety tool. CCWS successfully negotiated with RCMP Headquarters, a RCMP Policy change to now allow women and their support workers access to a copy of the UTA. Not having a copy of the PTA/UTA could jeopardize a woman's ability to keep herself and her children safe.

Information update:

"E" Division has sent out a memo to all detachments that all VAWIR victims or their victim assistance worker should receive a copy of the PTA/UTA where the victim is named. For example: "John will not be directly contacting Jane Doe", thus requiring that Jane Doe receive a copy of the PTA/UTA.

Workers should consider going with their clients to the detachment to get a copy of the PTA/UTA. Please contact Gail Edinger, CCWS Regional Coordinator, Tel: 250-397-2389, e-mail: rosebud@bcinternet.net or Michelle Novakowski, CCWS Regional Coordinator, Tel: 250-751-2881, e-mail: micheno@telus.net if you experience any problems with obtaining the PTA/UTA for your clients.

1.3.5 Community Coordination And Women's Safety (CCWS)

This MCS funded program works with communities that wish to develop new models of a cross-sector coordinated response on violence against women, as well as communities that wish to enhance existing coordination initiatives. The program also works to track and develop negotiated solutions to issues that arise locally but may require response at a regional or provincial level.

Research has shown that violence against women is reduced when service providers and systems responders work together to coordinate their interventions.

The primary objectives of CCWS are:

- helping BC communities develop new models or enhance existing models of coordination on violence against women

- including a focus on rural, remote and isolated communities, and women who face particular discrimination in those communities (including Aboriginal women, women of color, immigrant women, low-income women, women with disabilities, lesbians, transgender women, older women and young women)

- supported by a working group that includes representatives from the criminal and civil bar, the Justice Institute of BC (the provincial training body for police and corrections personnel), RCMP E Division, the BC Association of Municipal Chiefs of Police, Legal Services Society, Community Corrections, community based service providers and representatives from Aboriginal, immigrant and disability communities.

1.3.6 Resource Toolkit

Workers were informed of the upcoming **Freedom from Violence Resource Toolkit** that is being developed by the Association. Workers provided feedback on their need for



information when working with women who have mental health and/or substance use issues. They identified numerous specific challenges they face when working with women facing intersecting issues that will guide the development of the toolkit.

1.3.7 STV Outreach List Serve

We extended an invitation to the STV Outreach programs to join the new STV Outreach List Serve that we have designed to provide updates and allow programs to share relevant information with each other. It will allow information to get to programs in a more timely and efficient way to facilitate information flow that can better assist in providing services to clients. For more information on signing up for the list serve, programs can contact Habiba, at 604-633-2506 ext. 10 or email her: bcasvacp@endingviolence.org

1.3.8 Newsletter

We continue to provide programs with program updates and pertinent information on a regular basis through our tri-annual newsletter. For more information programs can visit our website at www.endingviolence.org or call us at 604-633-2506 ext. 10.

1.3.9 Annual Training Forum

This year's Annual Training Forum: "Freedom from Violence: Navigating the Intersections of Trauma, Mental Health and Substance Use, November 21 & 22, 2007, will provide workers with the information and skills of supporting clients who experience violence, trauma and substance use in their lives and assist the healing processes of survivors who have mental health issues. The focus will be on responding to and coordinating between the anti-violence sector, the mental health sector and the alcohol and drug sector as a means of increasing safety and resources for survivors of sexual assault, violence in relationships, and child sexual abuse. More information is included in our Newsletter and the brochure will be mailed out September 1st, 2007.

PART 2 ISSUES AND RECOMMENDATIONS – 2007 TELECONFERENCE CALLS

2.1 DIRECT SERVICE NEEDS

2.1.1 Insufficient Time In The Job

Most workers are working only 18 hours a week and they emphasized the lack of sufficient hours for their position to enable them to support their clients and do the required administration, networking and coordination. This further creates pressure on them to try to do many things as possible at the same time.

"It is a juggling act" as one worker puts it, I have to get my messages, court dates/accompaniments while working in my other jobs". Workers were also concerned about the risk, safety and the amount of stress that this creates for them.



Another dilemma that workers face in smaller communities is that often clients know where they live and work in other part-time jobs and are thus able to locate them at home or in their other jobs. In many communities, the STV Outreach programs are staffed by workers who also work in CBVAP or STV Counselling programs.

Recommendation 2:

BCASVACP recommends that the Ministry work towards funding all STV Outreach programs as Full Time positions.

2.1.2 Services To Young Women

STV Outreach workers emphasized their concerns and identified gaps that exist in services for young women. There is a lack of counselling services for young women, between the ages of 14 and 19 years, who are survivors of sexual and relationship violence. Workers reported an increasing number of referrals for young women who are seeking support around a recent or past sexual assault. Workers emphasized that providing outreach at schools has brought in clients who are young senior secondary students who have experienced sexual assault or sexual harassment at their workplace, or in their relationships. Workers articulated the lack of services for young women that are woman-centered and focuses or specializes in trauma counselling in rural communities throughout BC. Survivors often do not feel safe about reporting sexual assault or violence due to the lack of or reduced resources and support services. The situation is further restricted due to the part-time nature of many programs and therefore having insufficient time to assist young women who experienced violence.

Workers emphasized that: *“there needs to be an outreach effort to women who have survived a sexual assault”*. There is a need to keep in mind that *“many of the women and children are sexual assault victims as well as experiencing violence in their relationship and that there needs to be services and options available for survivors of a sexual assault”*.

Sexual Abuse Intervention Programs (SAIP) exist in a few communities and although an important resource, workers clearly stated that young women share that they are uncomfortable and unwilling to access these services as they are seen to be child centred. Young women who are survivors of violence are simply unable to access the services they need.

Recommendation 3:

BCASVACP recommends that the Ministry conduct research, documenting the existing services in the province for young women experiencing sexual violence and identify gaps in service in the province.

Recommendation 4:

STV Outreach programs require additional funding in order to provide resources for young women who have experienced violence: sexual and relationship. We strongly encourage the Ministry to submit a Treasury Board submission to request increased funding for STV Outreach and STV Counselling programs to meet this need. We believe a good start would be to add .5 FTE onto each contract.



Recommendation 5:

Upon securing funding, the mandate of STV Outreach programs be expanded to include outreach services to young women, 14 years and older who are able to consent independently to support services and have been victims of violence.

Recommendation 6:

That the Association develop and implement training for STV Outreach Programs that focuses specifically on competencies they would require in order to work effectively with young women who are survivors of violence.

2.1.3 Aboriginal Women

Workers spoke about the importance of taking the time to develop respectful relationships with Aboriginal Communities. They articulated how difficult it is for Aboriginal women to speak out about violence because violence in relationships is often *“considered closed topics or private affairs”*. It is therefore a *“hard area to address”*.

Some programs spoke about the progress they had made and the exciting work they are doing in partnership with some Bands including doing violence prevention workshops and providing support to the women in the community. Workers from one community spoke about how they had set-up a satellite office close to the reserve in a situation that responded to a murder on the reserve. This way the identity of the woman seeking the support was kept private, because the service was off reserve and not in an individual anti-violence Women’s agency thus allowing the healing to take place and trust to be established.

BCASVACP has been working in partnership for the past number of years with marginalized women to assist in identifying the needs to the government.

Recommendation 7:

That the MCS provide specific funding for Aboriginal specific services in communities where there is a large population of Aboriginal people.

2.1.4 Immigrant Women

Immigrant women confront multiple barriers when attempting to leaving abusive relationships. These range from cultural, family, social, economic and the accessibility issues they face when reaching out for services. *“The lack of an interpretation service when making police statements and emergency hospital visits in situations of violence in relationships and sexual assault”* serve to further hinder seeking safety and reducing the risk for violence.

Workers spoke of the inconsistency in the availability of interpreters during intake calls for 911 and when making police statements. This is often the case both for family court and in hospitals after regular hours when dealing with abuse in relationships and sexual assaults. It was a concern for workers when they are unable to provide services due to language barriers. Workers were aware of the challenges women face when attending family court case proceedings, without legal aid, and told to provide their own interpreters.



Workers spoke of the language barrier when reporting to the police. Although the RCMP has access to 3-way phone calls in using interpreters when language barriers exist, this is not the case for the Municipal police. Often it is a situation where a constable comes to speak to a victim without an interpreter. A Winnipeg interpretation service provides a multi-lingual line that is available to both 911 and VictimLink, however workers spoke of translators often not being available. Also, this is sometimes the case in hospitals when women consider reporting to the police after regular hours. There is inconsistency in utilizing interpreter services that currently exist for women with language barriers as well as for women who are deaf or hard of hearing. Some workers noted a similar situation when working with MCFD.

Information Update:

BCASVACP shared the information from the MCFD manual: Best Practice Approaches: Child Protection & Violence Against Women, May, 2004, that outlines “*provide interpretation services that allow safe discussion about her experiences and supporting solutions that respect and account for women’s cultural and religious values*”. (Adapted from “Alternatives to Apprehension: Education, Action and Advocacy” (Buchwitz, 2001 report).

In the case of the Vancouver Police Department, their VAWIR policy states: “*members must be sensitive to cultural differences or specific communication needs of the victim and where necessary shall utilize the services of the Victim Services Unit and interpreters*”.

Workers emphasized the need for clients to have access to interpreter services uniformly and consistently in all communities. In some communities, workers found the RCMP more sensitive on the issue.

STV Outreach Solution

Some workers found it helpful to advocate on behalf of their clients to make arrangements for interpreters ahead of time.

In one community, the worker spoke in detail of their efforts of doing outreach to the immigrant Indo-Canadian community in the Fraser Valley. Some of their efforts of outreach work in the Indo-Canadian community included:

- Establishing a focus group “to learn of how to best reach out to the Indo-Canadian community”.
- Starting a support group within the Sikh Temple
- Having a focus group within the local high school and college to ensure participation by the local youth
- Setting up an office “that is much more accessible to the Indo-Canadian population and that is in an area that caters to the Indo-Canadian population (fabric stores, restaurants, doctors, dentists, video stores, all businesses that are owned and operated by Punjabi speaking staff)”.
- Hiring a part time Punjabi speaking STV Counsellor as well as plans to hire or utilize a Punjabi speaking receptionist. “*In this way, outreach clients are assisted in a more effective manner in getting their messages taken, and possible answers to their questions by the receptionist, rather than waiting until one of our Punjabi speaking Outreach workers can return the call*”.



Recommendation 8:

BCASVACP recommends that the Ministry conduct a thorough Needs Assessment of this issue to determine the extent of the problem and come up with proposed solutions.

2.1.5 Sex Workers

An example of STV Outreach work with sex workers in one community was shared. This initiative involves providing outreach services to women including:

- Starting a drop-in support group at night.
- Community and system partners being more socially conscious and supportive
- A public health nurse attending the support group on a regular basis, as some hospitals and clinics hesitated to provide sex workers with service
- The program is also in touch *“on a regular basis with Abbotsford Parole, and the police, who have attended the drop in night with notifications of released offenders who are at risk to re-offend. The Abbotsford police are very pleased with this service now being provided, as they used to send sex trade workers into Vancouver for service, as there was no local service to provide them with. The Abbotsford police have now referred several women to us, invited us to several “town hall meetings” and have provided us with \$1400 from a recent “John sting” to support the group”*.

2.1.6 Dual Arrests

Over the past year, reports from communities of cases involving the arrest of both parties in domestic violence situations have increased. Accusations of mutual battering by both parties when police arrive on the scene of a domestic violence situation create a dilemma for the attending officers and increases risk for the victim of spousal violence.

The Uniform Crime Reporting Survey for 2000 data indicates that women represent 85% of victims who report spousal abuse to police and that this has remained stable since 1995. BC Police spousal assault data agrees with these figures stating that 76% of incidents involved a male offender, 15% involved a female offender, while 9% involved both spouses assaulting each other

Victim Services Division and Crime Prevention worked collaboratively with the RCMP and the Association to bring the Primary Aggressor Assessment policy (PAA) to BC a number of years ago.

An overwhelming number of STV Outreach workers confirmed that the issue of dual arrests is happening in their communities, where police are arresting both the woman and her partner for assault and not conducting the required RCMP Policy, “Primary Aggressor Assessment” (see Appendix A & B). Workers stressed the fact that they did not have sufficient time in their jobs to support all women who require their services and



thus they work collaboratively with CBVAP and STV counsellors in their communities especially in these kinds of high risk, and complicated cases. Workers spoke of many communities where this is a real serious problem.

The main issue that workers are concerned about is that women charged will be less likely to call the police the next time and this is a safety risk to the lives of women. This could then lead to further isolation and act as a barrier to women seeking access to anti-violence programs.

Women are being charged with assault in situations where women have been living with a known abusive men with prior charges as one worker confirmed that: *"I and many of our staff have worked with a few women in that predicament"*. One worker spoke about a situation where the man had a history of abuse but he called the RCMP first which led to the dual arrests.

In another community, the worker found that a number of women were being charged and shared that she was not sure if the PAA was being done. The worker shared a case *"where a woman was assaulted and in trying to defend herself took out a knife. Despite the presence of witnesses, the woman was charged"*. In this case the Sergeant commented: *"the officer was making a judgment call"*.

Workers shared that they have come across a lot of women being charged who are not referred to STV Counselling. Workers expressed their concern that it is *"extremely frustrating"* to see women being charged and worry about the RCMP not understanding the Primary Aggressor Assessment Policy.

In one case, a woman was charged while her partner had a history of arrests and in one instance it took 6 police officers to arrest him.

Another concern has been in cases where the woman is being charged and no service is then provided or referral made to community-based programs. This highlights the essential need for PAA to be done by the RCMP. There are also dangers and risks: if she is the victim that means that she has no help/referral. This creates a risk factor for a community where the man who has been abusive for many years is at home and the woman is charged when she is found defending herself. In addition, the aggressor gains more power and a sense of entitlement to continue his tactics and an increased potential for eventual homicide by the abuser.

BCASVACP explained to the workers that The Primary Aggressor Assessment (PAA) for the RCMP is required to be done as it is highlighted within the RCMP-VIR Policy. The clear steps that have been laid out in the policy include assessing who is the most vulnerable of the parties involved, who has received injuries and required treatment, who has superior strength and skills and the history violence in the relationship. In May of 2007, the Association's CCWS program met with RCMP Headquarters to outline our concerns about this situation. At that meeting, the RCMP agreed to develop and send a memo to every police officer (RCMP) in BC, outlining the issues and the expectations Headquarters has related to the PAA. They also invited the CCWS program to provide training to all senior RCMP Detachment Commanders when they meet. We have agreed.



It is important for workers to bring forth these concerns to their Violence Against Women Coordinated Committees, local RCMP and seek information and assistance from the CCWS staff.

The CCWS program has developed a one-day inter-sector training on “The Myth of Mutual Battering”, and CCWS program can deliver this workshop in all communities in the province upon request.

Recommendation 9:

BCASVACP recommends that the Ministry support the Association and CCWS initiatives in working with the RCMP Headquarters on this issue. The implications of not doing the PAA endangers women’s lives and further deters women from seeking police assistance in future abusive situations.

Recommendation 10:

BCSAVACP recommends that in the case of dual/mutual arrests, the RCMP Primary Aggressor Assessment be done and referrals to CBVAP (if they exists) and/or to STV Outreach and Counselling programs be made immediately. In the case of mutual arrests, we emphasize that referrals should be made for safety assessments and liaison with the police.

2.1.7 Breaches

Workers indicated that no contact orders are not always taken seriously by the abusive partners or enforced consistently by the RCMP. In domestic violence cases, a high degree of risk is associated with actual or potential breaches of court-ordered protective conditions such as no contact orders. Any reported breach must be dealt with as a high-risk situation for victims and others associated with the victim, with an immediate enforcement response required because of the significant risk of escalating violence. The tragic deaths of Sherry Heron and her mother in Mission Memorial Hospital in 2004 illustrate this risk in stark terms. The lack of escalating consequences to address the escalating violence exacerbates this risk.

Research indicates that in domestic violence cases, the rate of non-compliance with protective conditions is high. Vigorous enforcement of protection orders has been shown to enhance victim safety. (EKOS 2000, Russell 2002, Varcoe et al 2000). Some of the proposed actions for an effective response to violence against women with regards to breaches include:

- An enhanced data collection system about the number of orders issued, repetition of violence and enforcement of breaches, including effectiveness of dedicated police to enforce breaches
- Consistent use of the POR, (Protection Order Registry) particularly by police, so they are aware of specific protective conditions and can enforce a breach. Through the POR, police in BC currently have 24 hours a day, 7 days a week access to information about the existence of protection orders and the conditions they contain.



Recommendation 11:

BCASVACP suggested that workers put issues/concerns that they hear about from the women they are working with, in writing to their VAW committee members and in some cases the RCMP (of course written permission is required from women if their names are to be released). It is also suggested that the same be done when things are done right. This would provide an opportunity for valuable feedback, both positive and negative being provided to the system. The documentation and the follow-up to all correspondence in relationship building is important.

2.1.8 Crown “K” Files

A concern was brought up where STV Outreach workers noticed that the Crown stopped identifying women charged as “K” files. This lack of case file documentation is a concern, as it would impede any process to review and assess what is happening in BC related to domestic violence.

Recommendation 12:

The Association informed workers that the CCWS has discussed this with Crown Headquarters and was informed that Crown was reviewing their “K” file designation policy. Crown will be re-working their policy on this. We will keep the programs updated on this matter and will follow-up with CCWS.

2.1.9 Hospital Sexual Assault Protocol

Workers were concerned about hospitals not having a sexual assault response protocol. In one community on Vancouver Island, women were being asked to go to Victoria for the Forensic Examination. In addition, the hospital staff was not calling a support person for the woman and thus *“it seems that the old protocol has just been dropped”*.

In another case, the support worker went with the sexual assault survivor to the hospital but was not allowed to stay with the woman to provide the support. And in this case the worker was disappointed that both the doctor and the nurse were judgmental towards the woman.

Workers raised concerns about the time it takes to get across the Lower Mainland to BC Women’s Hospital in Vancouver and the fact that these could be young women who cannot travel far on their own. Some women cannot afford to pay their way to or across Vancouver from within the Lower Mainland. In one case, the doctor commented that they *“have no time”* to do these examinations.

An Aboriginal worker spoke of a similar situation in their community where the CBVAP worker had to accompany a woman to Vancouver from Pemberton even though Squamish is closer. Workers also noted that in some cases the doctors maybe willing to do the Forensic Examination but the hospital staff did not call them.

Outreach workers also shared that it often becomes a problem when staff members change thus affecting the service. So much so that it then becomes dependent on the people in the system, not the policy.



On the other hand, in one community, workers were encouraged about the collaborative work they were able to do with their SANE (Sexual Assault Nurse Examiner) program. They worked successfully with the local hospital to provide information about their services. Thus making it more efficient providing services and support to their clients. Workers expressed that the “SANE nurses now know who provides counselling and support to sexual assault survivors”.

Workers also spoke of communities where the SART (Sexual Assault Response Team) has been working really well. Workers agreed that it should be the moral and ethical obligation and commitment of the health care system to the women in our province to provide this needed service. Workers agreed that it is truly indicative of more work that needs to be done.

Recommendation 13:

BCASVACP noted that the Health Care response is lacking in sexual assault cases. The BCASVACP will raise the issue with the BC Women’s Hospital and will communicate back to the sector. This could also entail informing the Health Authorities and the Ministry of Health. It would be very helpful if the Ministry (MCS) could raise this issue with their counter parts in the Ministry of Health.

2.1.10 Working With MCFD

Workers explained the situation their clients were facing when dealing with the Ministry of Children and Family Development (MCFD). “*The difficulty arises when clients want to be seen by a different MCFD Social worker*”. MCFD has an internal process to do that and MCFD is often seen as discouraging women from this practice. Workers raised the concern that women shared situations where the MCFD workers were in some cases “*overly involved*” in the lives of their clients.

BCASVACP is concerned about reports of STV Outreach workers being court ordered to be witnesses. The long-term implication of this would be to deter women from reaching out for assistance. BCASVACP developed a paper in partnership with BCYSTH, BCIAFV and BC Women’s Hospital called “**Developing A Dialogue**” which is available on our website that provides insight into working with MCFD. This document was emailed to the participants of the teleconferences.

Recommendation 14:

MCFD has developed Guidelines in collaboration with BCASVACP, BCYSTH, BCIAFV and BC Women’s Hospital. We will be delivering this joint training in the province region by region.

Recommendation 15:

Workers were encouraged to call the BCASVACP to seek assistance about any difficulties they faced while supporting their clients who are also within the MCFD system. They can call the association staff: Tracy, Susan, Harjit or the CCWS staff: Gail and Michelle.



2.1.11 Groups

Some workers spoke about the psycho-educational groups that they offer in their programs and how were these groups are going. Some programs expressed their concern that *“finding the time required to do groups is significant and takes away from the one to one client work we still need to maintain”*. “Violence In Relationship” groups provide education and address the current difficulties that women are facing. These are often 10 weeks and programs have mothers groups as well.

Information Update:

BCASVACP’s last newsletter **“Support Groups and Healing From Violence”**; Issue 2007-01 extensively covered the topic with information on support groups that are being provided by programs across the province. Programs are encouraged to look at that newsletter.

2.1.12 Public Education

Workers expressed a desire to have a media campaign that is not cumbersome to develop. It was pointed out that this would preferably be a high-end provincial campaign, such as the Anti-Smoking, and the Drunk Driving campaign to enable programs to increase the awareness in their communities on the issue of violence against women. Discussion occurred that in response to broad public awareness, programs could potentially face a situation where the demand for services exceeds their current capacity and funding for services.

Workers were reminded of a previous initiative: in the 1990s where \$50 million in advertising time was donated to the province by the BC Broadcasters to End Violence through a campaign called **Life Violence Free**. The NDP Government had funded the development of the ads and it was an initiative overseen by Ministry of Women’s Equality (now MCS). It led to the production of a number of public advertisements but the ads were never released because of the breakdown of the agreement.

Outreach workers felt that the education campaign could address the issue of secrecy that surrounds the violence permeating the lives of women in our province and communities. Workers were clear in pointing out that an initiative supported by the government would be a strong message against the violence.

There are often consequences for living and working in small or marginalized communities. There is the targeting of workers that takes place. This situation raises the issue of the safety for the workers because there are only limited resources for rural, immigrant, aboriginal, and women with disabilities.

Workers shared ideas about their local initiatives that involve providing public education initiatives by bringing together their partners including the police, schools, and other community partners.

The utilization of local strategies allow for a local perspective making it easier to focus on issues specific to the community to support the message. It offers a wide variety of resources and a starting point between the community agencies or local places i.e. places of worship. It allows for collaborations with other grassroots organizations.



Examples of these include initiatives that some programs are actively involved in within their communities:

- Outreach to schools on topics such as healthy relationships, healthy sexual boundaries and internet safety
- Take Back the Night
- International Women's Day
- Fundraisers
- Activities to reach out to marginalized women where language or economic, social, or physical barriers exists

Recommendation 16:

BCASVACP recommends the Ministry fund a province-wide media campaign towards Ending Violence Against Women and this be done in close coordination with BCASVACP and BCYSTH.

2.2 INDIRECT SERVICE NEEDS

2.2.1 Reporting Statistics

Workers raised a concern that the Ministry statistics reporting form (or the DES form as referred to by the Ministry) does not reflect the time they spend doing their work. They shared that their time spent making phone connections, and doing crisis counselling with their clients among other things is not reflected in the statistics. They all agreed that it is essential to capture all the work they do including transporting a client to the food bank.

Workers pointed out that even if different services were provided to assist the same client, these services would have to be accounted for in the statistics.

One worker brought up the scenario where she is the STV Outreach worker as well as the STV counsellor within the same agency. In one case, she received 4 new referrals for the STV Counselling program and when she works with these same clients in her STV Outreach role – it looks like over time there were no new clients.

STV Outreach Solution:

The workers emphasized that it is important to account for the clients separately according to the services being provided to assist them and to treat each service separately.

The Outreach workers reported that they needed to create a better system to account for all the work they do. The present system of collecting statistics is missing the depth and breath of the program. It should account for the amount of time that is spent advocating and filling out forms as well. The workers agreed that marginalized women need more time to assist them, however this is again not captured in the statistics. Workers pointed out that a woman at risk requires more of their time. Also in a similar situation where the worker supported the client for an hour over the phone, it is being recorded as 1 call only, thus not accounting for the length of the support provided. At the same time, workers were concerned that a detailed form would require more time and that workers have no time to complete it. There is a similar situation when doing presentations in communities that require traveling time to go to, for example in remote communities. The



time for travel is not accounted for and thus this is “*frustrating*” for workers when reporting to their administrators and the Ministry.

Recommendation 17:

BCASVACP acknowledges that the Ministry wants to capture the correct and the appropriate statistical information. BCASVACP recommends that the statistical forms be refined to reflect the work being done and the time it takes to do the work. BCASVACP acknowledges that the statistics form is an important tool as it accounts for all the work that is done.

Recommendation 18:

BCASVACP recommends that the Ministry organize meetings for STV Outreach workers on proper completion of their statistical reporting.

Recommendation 19:

BCASVACP recommends that contract managers commit to discussing the impact of statistics with each program administrator and STV Outreach worker with specific reference to workloads and direct versus in-direct service ratios.

2.2.2 Training Needs

The need for increased access to both core and ongoing training has been clearly articulated by all the programs. Workers also spoke about the BCASVACP Annual Training Forum as an invaluable opportunity for training on emerging issues as well as for expanding networks, sharing information and reducing isolation.

Sexual Assault Training

Workers expressed the need to receive training on supporting sexually assaulted women with the criminal justice system as well as supporting them through hospital accompaniments. Workers expressed their strong interest in receiving training in working with young sexual assault survivors. In October 2006, the BCASVACP sent out an expression of interest for sexual assault trainings to STV Outreach programs and received a response that indicated that programs did not have the funds to send Outreach workers to training.

BCASVACP Annual Training Forum

The BCASVACP was able to extend an invitation to the STV Outreach workers for the last 2 years with funding from the Federal Government. This year again, we will be providing subsidies for the STV Outreach workers to attend the BCASVACP Annual Training Forum, 2007.

Areas of Interest

Workers pointed out these trainings would assist them with their work:

- Core training
- Role clarification between STV Outreach workers and STV Counsellors
- Advocacy issues
- Relationship and trust building with Aboriginal communities
- Understanding the Criminal Justice System
- Family Law Training



Recommendation 20:

That the Ministry recognize the need for core and ongoing training for STV Outreach workers by dedicating a multi-year training fund. It is further recommended that the Ministry seek to increase the funds provided to the Association to allow us to better meet the needs of these new programs. We gratefully acknowledge the training funds we receive to provide training to STV Counselling programs, however, this fund is insufficient to also meet the needs of this new sector.

Recommendation 21:

That the Ministry advocate with Ministry Of Health and VSCPD to include STV Outreach workers in their trainings that are violence or trauma specific to increase cross-sectoral training and collaboration among sectors.

Recommendation 22:

BCASVACP recommends that the Ministry provide BCASVACP with additional training funds for the coordination and delivery of trainings to STV Outreach workers.

Community Leadership Training

This CCWS skills based training has been designed for those leading or interested in leading local violence against women coordination initiatives. Participants will have an opportunity to increase their leadership skills in working with interdisciplinary coordination initiatives.

Two key themes are emphasized throughout this training: using a feminist perspective to work with diverse groups with competing and at times conflicting perspectives and interests; and the value of working together to bring about change.

Information Update:

The next offering of the Community Leadership Training is March 11, 12, 13 2008. Contact CCWS staff to ensure your space.

2.2.3 Building Community Supports**Working Collaboratively**

STV Outreach workers reported having collaborative relationships with STV Counsellors and other Community-based workers. The STV Outreach workers are working to fill service gaps such as public education, providing transportation, giving out information and gathering referral resources, helping women integrate into the community and are doing court accompaniment where CBVAPs do not exist. STV Outreach workers are able to meet with other community agencies more regularly, and are helping to address the needs of women on waitlists and can support women with basic legal information and emotional support. STV Outreach workers indicated they are doing more short-term counselling and referring the long-term counselling to the STV Counselling programs. Also in communities that have CBVAPs workers, referrals are made to them. Workers clearly expressed that their role “have *worked itself out*” and that they “*work closely*” with the other programs and that is “*working well*”.



One successful community model that was spoken about included the Aboriginal members sit on an inter-agency VAWIR committee including Mental Health workers. The STV Outreach worker felt that *“many initiatives were a result of the committee’s work”*. The RCMP attends the meetings and committee members do bring forward any questions that they have. The committee is currently working on a directory of anti-violence programs in the region that will provide the community with a current list of resources.

Workers spoke about protocols they developed in their communities to coordinate services and to increase safety of women. These included a Safe House Protocol and a protocol with the local school counsellor. Some workers were pleased about their efforts to work collaboratively with the anti-violence organizations within their communities through establishing committees.

Working with committees such as VAWIR committees is *‘a good source of networking’*. According to one worker it *“works really well”* and requires that the committee members *“work on it to get to know people and reduce barriers”*. In one community, they were able to work effectively without having formal written protocols in place. The referrals are getting better as a result of this work.

Recommendation 23:

BCASVACP suggested STV Outreach workers get involved with VAW Coordination Committees where they exist in their communities. If a VAW Coordination Committee or protocol does not exist, workers are encouraged to call CCWS for assistance.

Recommendation 24:

BCASVACP suggested programs used written protocols to establish working partnerships within their communities. The protocols help to clarify how referrals are made as well as provide suggestions for situations when things go off the *“rails”*. These protocols can be reviewed annually and rewritten as required. BCASVACP and CCWS have assisted communities with information to guide the development of written protocols.

Referrals From Non Anti-Violence Agencies

Many programs reported that referrals are starting to get a lot better now that others know they exist. Some communities continue to face the challenges of the lack of referrals. Various strategies including doing active outreach to agencies by providing more information regarding STV Outreach programs have not been helpful. According to one program *“90% of their referrals continue to come from their own Transition House”*. Workers emphasized their shorter hours of work for the lack of referrals as they pointed out that *“it can be frustrating trying to gain access to the limited Outreach services”*. Challenges faced by STV Outreach workers included doing outreach work to community centres and religious places – and some workers spoke of these efforts as working great while others reported they are *“not paying off”*.

Recommendation 25:

BCASVACP suggested that workers continue to make referrals to CBVAP and STV Counselling programs in their communities and ensure their services are used by these programs as well.



STV Outreach Solution:

Workers suggested meeting with the local multicultural settlement services to share expertise and resources. In one community, this meant creating partnerships such as doing support groups together. The program supported Aboriginal women running these groups to promote learning new skills and creating working relationships. These positive efforts encouraged the other programs to have a discussion about what these groups did, share networking strategies, and working together to learn about cultural competencies. As the workers agreed this allowed for the “*ongoing work of building bridges*”.

2.2.4 Volunteers

Some programs use volunteers to transport clients. This is possible in agencies where there is a community development department with overlaps, making it possible for one worker to recruit volunteers. Volunteers often help with assisting to take clients for their doctor’s appointments, or to the food bank. Workers were concerned about having volunteers do more in-depth work as they are not skilled in the same way.

For some programs “*we would be lost without our volunteers. Among other things volunteers assist by doing a variety of duties such sorting donations, cleaning, painting, participating in community events, fundraisers, setting up resource tables at community events, and doing shifts there*”. Workers spoke of volunteers who provided the support in writing proposals and locating funds. Workers pointed out that most of the funding proposals have deadlines that are difficult to meet especially because most STV Outreach workers only work 16 hours a week. The main concern for programs is the amount time required to recruit, supervise and train volunteers. The Association asked the programs using volunteers, what kind of Volunteer Insurance they carry? i.e. driving clients, etc. The Association explored and can provide an inexpensive insurance package to programs who use volunteers, however, there needs to be a critical mass large enough to make it worth the Insurance company’s effort.

Recommendation 26:

BCASVACP suggested the possibility of doing a Needs Assessment to determine the need for Volunteer Insurance by STV Outreach programs.

2.2.5 Specific Factors In Rural Settings

Access To Safety And Service

The challenges faced by workers continue in this area as service options for women who have experienced violence remain limited in small rural communities where the STV Outreach program may be the only service available with no options for referral.

As evident across BC’s rural communities, the erosion of the social supports and isolation have disproportionately affected the lives of women, placing them in deeper isolation and threatens their survival. STV Outreach workers continue to face the challenge of limited referral options for rural women with the safety of these women being greatly compromised due to their high visibility in small communities.



In the case of the Haida Gwaii community, women “*face serious health and life risk issues due to their extreme isolation*”. The transportation options are limited to air and sea only (as there is no highway to get off the island) with an overlay of service being severely affected by sudden, severe weather changes. The extreme winter and windy conditions often mean residents are left without phone or power services. “*Women in Sandspit who need to flee abuse have no ferry access after 10 pm, if they want to reach our large island, where the Transition House and Safe House are located. A return taxi trip from Sandspit to Charlotte is required (can cost \$100) if they want to access those services, or catch the Rupert ferry*”. The available transportation provides options of either traveling 8 hours on a ferry service that is highly dependent on the weather or taking a plane that is often a full days’ trip and very expensive.

According to one worker who has been working with the northwest communities for almost a decade, this is the state for Aboriginal and non-aboriginal communities alike. “*The provincial and federal funders have abandoned the north*” leaving “*it in a state where education, social services and funding is poor, limited or unavailable due to population base again, as well as federal jurisdiction for reserves*”.

Confidentiality

In small and isolated communities confidentiality is an important factor. This is also an issue in culturally close-knit communities where workers attend the same gatherings or places of worship. People know each other, recognize vehicles and are informed about workers in their community. In smaller communities, it is common for workers to shoulder dual roles (STV Outreach, STV Counselling, CBVAP or CWWA for example) within the community service network.

Workers reported their struggles with knowing information relevant to the safety of a current client that they cannot share because they are bound by confidentiality. Client safety and confidentiality restrictions are on-going issues in rural communities. For example, programs spoke about community events or dinners, but there is the difficulty of coordination in small communities as women are not able to attend due to the fact that the offender or his family may be involved. Despite the fact, more time and effort is spent coordinating such initiatives and workers felt that some of the needs of the women in the community are not met.

Impact Of Poverty

Rural communities in general have a lack of safe and affordable housing. It is very difficult to work with a woman when she needs accessible safe housing. Women often return to abusive relationships due to inadequate housing. Programs have also worked creatively to provide services that involve working with 3 programs: STV Outreach, STV Counselling and Safe Homes in their communities.

Recommendation 27:

BCASVACP recommends that the Ministry increase funds to the STV Outreach programs in rural and isolated communities to meet the needs of women experiencing violence in their lives. These communities often have low populations but the needs are very high. The part-time nature of most of the STV Outreach workers makes it difficult to provide services given the challenges of isolation, limited resources, severe weather and unreliable phone and internet services in these communities.



2.3 STV Outreach Contract Administration And Finances

2.3.1 Appreciation For BCASVACP Programs And Services

STV Outreach workers in all regions expressed appreciation for the regional conference calls stating that the calls provided the *“much needed support”*. Workers clearly stated that the calls were *“extremely useful for connecting with other workers in the region who do similar work, sharing resource information, ideas for community coordination as well as allow them to better support each other”*. The calls are particularly important for programs that are in isolated regions or are staffed by workers who are new to the anti-violence work and doing part-time positions.

Workers also expressed their appreciation for the work that BVASVACP does on an ongoing basis, such as information sharing, training, the annual fall training forum, and the link the BCASVACP provides between their programs and the Ministry.

“These calls help us to find out what other outreach workers are doing to provide services effectively”.

“Thanks for all the resources that the BCASVACP has been sending us”.

“We really appreciate the support the BCASVACP provides, it helps us to do our job well.”

2.3.2 Core Training

Workers were asked about their training needs and if core training is required, they unanimously agreed *“Yes PLEASE! I think that core training would be a fantastic idea”*. When asked about the when they would need it *“the sooner the better would be my answer to when”*.

Recommendation 28:

MCS has provided the funds to the Association and the BCYSTH to jointly develop training STV Outreach programs. BCASVACP will work collaboratively with the Ministry to meet the training needs of the programs. There are ongoing dialogues with the Ministry about it. Currently BCASVACP and BCYSTH have received \$10,000 from the Ministry to develop core training for Outreach workers. This will be based on the BCYSTH core Transition House training and the Association’s STV Counselling and Sexual Assault trainings. It will consist of three four-day modules. Funds will be required for delivery.

2.3.3 Guidelines For Service: Roles And Mandate

Role Clarification

The STV Outreach workers are working to fill service gaps such as court accompaniment, public education, transportation, giving out information and gathering referral resources, and helping women integrate into the community. Outreach workers are able to meet with other community agencies more regularly, and are helping to



address the needs of women on waitlists and can support women with legal information and emotional support. Workers reported that they are doing counselling, providing assistance through systems, public education and coordination between programs. Workers indicated that they are doing more short-term counselling and referring the long-term counselling to the STV Counselling programs. Referrals are made to CBVAPs where they exist.

Workers pointed out that they provided supportive counselling in a variety of ways and in some cases *“it is while driving a client to an appointment”*. It was clear that their role is to work to *“compliment rather than take away”* or duplicate the services already being provided. Thus their programs are seen as *“added resources”* being made available to women survivors and as one worker said their work can be thought of as *“the water between the islands”*. Workers agreed that as *“separate entities they would become thinly spread out, pretty quickly”*. Thus they emphasized that their work was to *“work collaboratively and to work as a team”* with the other programs that exists. One worker spoke about having to provide services to 9 communities and that it entails *“a lot of going out and talking about what I can offer”* and not about *“creating new things”*. The workers agreed that it was very effective to work *“together to address the issues of violence against women”*.

Recommendation 29:

BCASVACP suggested that workers could locate the various services being provided in their communities by visiting our website: www.endingviolence.org and the BCYSTH website.

Recommendation 30:

BCASVACP understands that the Ministry is open to the idea of the STV Outreach programs filling in the gaps and not duplicating the services that are already being provided.

Interpretation Of Mandate

There was a variety in the spectrum of issues that Outreach workers assisted clients with. These varied where some were working only with violence in relationships while others dealt with all types of abuse against women and these included elder abuse, all female abuse, impact of abuse, sexual assault only with adults or 19+ and or young women living as adults. Some workers on the other hand, were providing services to survivors of childhood sexual abuse as well. It was clear to STV Outreach workers that women who require mid-term counselling were referred to the STV Counselling programs.

Workers did acknowledge the issue of boundaries when supporting rural women as often these women do not have access to STV Counselling and thus are sometimes assisted by STV Outreach workers because of their flexibility to travel to meet the women.

“If there is something that is beyond my reach, I refer to the STV Counselling Program and provide the woman with transportation. Often support is provided while traveling to these appointments”. Clients are also assisted with getting to their Mental Health appointments.

The CBVAP provide brief emotional support while supporting clients working with systems. The STV Outreach workers will have to use their discretion and skills to make



referrals when working with the women who could also use the support of the CBVAP or who are waiting to receive STV Counselling. For some workers *“building bridges with community partners, providing public information sessions, providing direct support services to women and children fleeing violence”* is their role.

Some programs provide support groups to women. One program shared with us that they were providing support groups although *“at present, they are finding the time required to do groups is significant and takes away from the one to one client work we still need to maintain”*.

Workers raised the questions of supporting clients engaged in the justice system. As one worker said *“court accompaniment”* is specified in our mandate but it *“does not indicate whether the accompaniment is to criminal or family court”*.

Recommendation 31:

BCASVACP reiterated that the programs work in collaboration with other anti-violence service providers to best meet the needs of their communities, minimizing duplication of services already being provided by STV Counselling programs and CBVAPs.

BCASVACP provided clarification that any woman dealing with abuse or violence be supported by the STV Outreach services and that barriers shall not be created depending on the kind of violence women are experiencing. In the case of historical abuse the referral depends on the circumstances and thus unless immediate advocacy is required it may become part of an STV Counselling referral.

BCASVACP recommended that the criminal court related work is within the mandate of the CBVAP contracts and thus it would lend itself to be supportive of women to provide accompaniment when attending to family court matters.

Although the BCASVACP observed some confusion, communities articulated their roles with supported consensus to work at minimizing duplication.

Recommendation 32:

BCASVACP suggested that the STV Outreach workers arrange to meet with the other service providers to clarify boundaries and suggested that these could then be part of their written protocols. Regardless, agreements and protocols shall be set-up with all anti-violence agencies in a community.

Recommendation 33:

BCASVACP recommends that the STV Outreach Contract Managers meet with the programs to provide further clarification on the role and mandate of their programs.

2.3.4 Accreditation

STV Outreach workers expressed their concern in the area of ongoing efforts by their organizations to be accredited. This process involves the standardization of paperwork, requiring detailed information about clients. Workers spoke about the effects of these



requirements and the resulting changes in their agency's' philosophies, policies and procedures as well as ethical issues in feminist support work. It was pointed out that the expectations around documentation and records management directly conflict with what is called for in the Records Management Guidelines (RMG), thus making it a serious issue.

BCASVACP provided information on the calls and STV Outreach workers were encouraged to contact the BCASVACP office for more information if needed.

The long standing record keeping best practices as outlined since 1998 in the RMG is that workers collect only the information that is needed to provide the service, which is in keeping with current PIPA legislation. The problem that programs experience is that the two accrediting bodies, COA and CARF, have standards that mandate the collection of extensive information about clients on intake. Programs that are going through accreditation find a direct contradiction between accrediting expectations and their best practices records management guidelines.

The Association has brought forward concerns about accreditation to the Ministry and the Ministry of Public Safety and Solicitor General, and attempted to talk to both accrediting bodies with the goal of having their information collection standards waived in BC for anti-violence programs. STV Outreach clients are highly vulnerable to having their files subpoenaed and therefore any irrelevant information contained in the file could be used by the defense in order to attack client's credibility. The Association understands that accrediting standards with respect to records management may be waived on a case-by-case basis, however most programs do not know this and we believe it would be more efficient to have the Ministry's involvement.

Recommendation 34:

BCASVACP and the Ministry discuss the possibility of the Ministry speaking with both accrediting bodies about creating a provincial standard that anti-violence agencies be exempt from the accreditation records management standards and instead rely on the Records Management Guidelines.

Recommendation 35:

The Record Management Guidelines, a document prepared by the BCASVACP in partnership with the BCYSTH, offers samples and guidelines for records collection. The RMG also provides guidelines regarding PIPA requirements regarding consent and complaints.

Resources For Reference

Workers requested hard copies of the resources that have been produced by the BCASVACP and that have been mailed to the other programs. Workers spoke about how it would be more practical for them to have these hard copies readily available instead of having to access the BCASVACP's on-line copies of these resources. Workers cited the difficulties they faced which included: 16 hour work weeks, the nature of their work where they are often out of the office with their clients, sharing offices and running into the situations where it is not possible for them to access the computer or the photocopier. Workers thus requested hard copies of the Records Management Guidelines and the STV Counselling Program Best Practices Manual.



Recommendation 36:

BCASVACP will ensure to mail all STV Outreach programs a copy of these resources.

2.3.5 Other Issues

STV Outreach Worker Support

Workers expressed their need for accessing debriefing for self-care/vicarious trauma. STV Outreach workers face many situations on a regular basis where these resources are required to deal with the impact of the front-line work they do.

Recommendation 37:

BCASVACP recommends that MCS provide funds for a STV Outreach Worker Support Plan that is similar to the one being provided to STV Counselling programs and CWWA Counselling programs cost is \$2500 per program.

Community Advocate Support Line

The Legal Services Society's, new Community Advocate Support Line ("CASL") project, started on May 15, 2006 until 2010.

CASL is a direct phone service operated by the Legal Services Society as an adjunct to LawLINE. LawLINE lawyer Alison Ward is currently staffing CASL. She can provide brief legal advice, information, and coaching to support advocates' work on behalf of clients. She can offer assistance on legal matters involving income assistance, residential tenancy and housing issues (including foreclosure), family law, employment insurance, the Canada Pension Plan (including disability benefits), debt collection and bankruptcy, consumer contracts, and judicial reviews.

How to reach CASL: CASL can be reached at **(604) 601-6074** from the Lower Mainland, and toll free within BC at **1-877-601-6066**. These numbers are for advocates only. Unlike the LawLINE, the CASL line does not have a queue system; it does have voicemail capacity. Alison answers calls from advocates on the CASL line from **9:30 a.m. to 12:30 p.m., Monday to Friday**. When calling the CASL line outside those times, or if Alison is on another call, workers are advised to leave a detailed voicemail message. CASL messages are often responded to within one business day.

What information CASL requires: To access services through CASL, advocates must provide Alison with the full legal name, address, and phone number (if any) of the client. Alison requires the full legal names of any opposing parties involved in the client's legal issue. Professional responsibilities of lawyers require that the issue is reviewed and recorded but it will be kept confidential. This means that the advocate should generally obtain the client's consent to release this information to the CASL project before calling.

Additional Resources

Workers shared other resources such as "Walking in her shoes" which was said to be "*experiential and impactful as there were real-life scenarios*". This resource: *Walking In Her Shoes Kit* can be ordered from Washington State Coalition Against Domestic Violence under Educational Resources <http://www.wscadv.org/> There are 3 editions. It is American, and thus some of the names of services, etc. are a little different than ours,



but that is minor. One worker said “*we have used it quite often as an educational tool over the past few years and have found it to be effective*”.

Save Our Daughters Coalition is based out of Surrey and was started in response to tragic deaths of South Asian women in the Lower Mainland. They have since developed a website with links to other resources: <http://www.saveourdaughters.ca/>

Recommendation 38:

BCASVACP offers a comprehensive list of resources and publications on our website. We acknowledge that there is no one stop service for all the resources that programs require. Workers were encouraged to use our website and VictimLink as a resource for finding services locally and in other communities across the province. The BCYSTH website also has resources listed from across the province and the United States. In addition the website www.shelternet.ca provides resources from across the country.

Other Program Challenges

- Rural communities are being further impacted by:
 - Geographical isolation
 - Traveling long-distances to provide services
 - Funding limitations
- Increases in homelessness
- Lack of affordable housing – “*the number one problem is that women cannot possibly afford housing anymore, and so find it difficult to improve their life with no shelter*”.
- Substance Use: Women with substance use issues and who are living in poverty face situations of having to rinse “*their needles in puddles of water on the street, sharing needles*”. And in one community, there was a municipal by-law that states the community is a “*harm reduction free zone*”.
- Health care concerns: where women often do not have access/or are unable to access health care services due to the lack of medical coverage which then effects negatively on their health.
- Accessing hard to reach clients: where language or economic and social barriers exists.
- Lack of an interpretation service when making police statements and emergency hospital visits in situations of violence in relationships and sexual assault cases.
- Lack of services for women experiencing violence from a teenage offender.
- Barriers created by poverty:



- MCFD workers' negative perception of women living in poverty and the service women receive from some income assistance offices.
- Recovery houses having wait lists, and in some communities STV Outreach workers reported that there are a few that are not reputable and are unsafe for women. The limited number of beds for women at emergency shelters including the Salvation Army”.

PART 3: CONCLUSION

Workers expressed appreciation for the services and resources of the BCASVACP. Workers have asked for even more from us in the areas of training, policy development, information and resource exchange, and organized networks with regular opportunity to meet with peers.

Appreciation goes to the Ministry too for funding these new STV Outreach programs and to the MCS Program Managers.

In spite of the struggles and stresses described by workers, they also demonstrated an exceptional resiliency and determination to work well and creatively within the time and funding limits of their programs.



Appendix “A”

“E” DIVISION
OPERATIONAL MANUAL
Part 2—Criminal Code Offenses—Persons

Amended: 2005-02-24
Moved from IV.1: 2004-05-20

2.4. Violence in Relationships

1. [General](#)
2. [Violence Against Women in Relationships \(VAWIR\)](#)
3. [The Cycle of Violence](#)
4. [Primary Aggressor](#)

4. 1. For the purposes of this policy, "Primary Aggressor" means the person in the relationship **who is the most compelling, rather than the first, aggressor.**

4. 2. An allegation of mutual aggression is often raised by the Primary Aggressor as a defence with respect to an assault against their partner.

4. 3. Members are cautioned against accepting an argument of mutual aggression. Each case should be fully investigated to determine what happened, who is most vulnerable, and who, if anyone, should be arrested.

4. 4. Members should identify, arrest and charge the Primary Aggressor where reasonable and probable grounds exist, in accordance with the [Criminal Code](#) .

4. 5. Members must be prepared to support their identification of the Primary Aggressor with observations and reasons. In making their determination, members should consider all the circumstances, including the following:

4. 5. 1. The intent behind the law and policy designed to protect victims of relationship violence;

4. 5. 2. Who has suffered the most extensive physical and/or emotional damage and who received treatment for that injury;

4. 5. 3. Who has superior physical strength and skills for effective assault;



4. 5. 4. What is the history and pattern of abuse in this relationship?



Appendix “B”

CRIMINAL JUSTICE BRANCH, MINISTRY OF ATTORNEY GENERAL

CROWN COUNSEL POLICY MANUAL

ARCS/ORCS FILE NUMBER:

56680-00

EFFECTIVE DATE:

May 1, 2003

POLICY CODE:

SPO 1

SUBJECT:

Spouse Assault

CROSS-REFERENCE:

ALT 1 CHA 1 VIC 1

Policy

Charge Assessment and Alternatives to Prosecution

Under the *Crown Counsel Act*, Crown Counsel are responsible for the decision to prosecute. The charge assessment policy requires Crown Counsel to examine the case at each stage of the prosecution and decide whether there is a substantial likelihood of conviction and, if so, whether prosecution is required in the public interest. This cannot be determined solely by the victim’s wishes.

Where there is a decision not to lay a charge or where a stay of proceedings becomes necessary, Crown Counsel should consider whether the safety of a victim or a child requires an application for a recognizance under s.810 of the *Criminal Code* which can include counselling and supervision conditions administered by the Corrections Branch. In some cases it may be appropriate to proceed with a charge of breaching a court order under the *Family Relations Act*.

Mutual recognizances are generally inappropriate and mutual charges arising out of the same incident should generally not be approved.

Where a review of the risk factors outlined below indicates a low risk of future violence and the offence is not of a serious nature, Crown Counsel may refer a case for alternative measures consideration. Crown Counsel should make the final decision on whether to approve alternative measures after careful consideration of the probation officer’s risk assessment report.

While an alternative measures referral may be considered at any stage of the



proceeding, in some cases it may be advisable to approve a charge and have conditions of release in place before making the referral.

