



Community Perspectives and Perceptions on Violence, Impacts and Prevention Opportunities



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REPORT PREPARED BY:

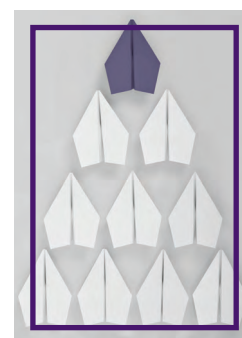
Dr. Jo-Ann Vis, Ph.D.,
JVIS Consulting

Rosemary Scofich,
Public Health Nurse,
Thunder Bay District
Health Unit

Lee-Ann Chevrette,
Coordinator,
Crime Prevention
Thunder Bay

Cynthia Olsen,
Coordinator,
Thunder Bay Drug
Strategy

Kimberly Ongaro,
HBSW



A Community
Perspectives and
Perceptions on
Violence, Impacts
and Prevention
Opportunities

COLLABORATION OF
THUNDER BAY DISTRICT
HEALTH UNIT, CRIME
PREVENTION COUNCIL
AND THUNDER BAY
DRUG STRATEGY

Background

The World Health Organization identifies violence as a global public health problem,¹ and defines violence as “the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.”² Violence affects not only the individuals and families who experience violence directly, but the whole of society.

Likewise, the experience of violence for individuals in Thunder Bay has far-reaching consequences for our entire community. We know that many individuals have experienced violence in their own home, school, neighbourhood and/or workplace. However, statistics alone regarding the prevalence of violence do not tell the whole story, because it is well understood that violence - specifically violence against women, is vastly underreported.³ Also, violence is a complex issue and, therefore, a greater understanding of violence requires a greater understanding of the experience of violence for individuals and communities.

It is within this context that this project - Community Perspectives and Perceptions on Violence, Impacts, and Prevention Opportunities, was designed. This project is a collaboration among the Thunder Bay District Health Unit (TBDHU), Crime Prevention Thunder Bay and the Thunder Bay Drug Strategy. All three organizations are committed to increasing individual and community safety and well-being for all people in Thunder Bay.

The TBDHU is committed to meeting the public health needs of Thunder Bay and District by delivering accessible programming of the highest standards in health protection, health promotion and disease prevention. As such, the TBDHU seeks to inform and influence individual behaviours and community decisions that

lead to positive health outcomes. The Crime Prevention Thunder Bay's vision of Thunder Bay is a safe, inclusive and welcoming community, and prioritizes efforts to reduce violence in Thunder Bay. The Thunder Bay Drug Strategy is committed to reducing the harms associated with substance use in Thunder Bay, including harms that link the experience of violence and substance use.

The partners recognize the complexity of violence and the need for a collaborative, multi-sectoral approach to the prevention of violence and the reduction of harms associated with violence in Thunder Bay. In an effort to deepen our understanding of community perspectives on violence in Thunder Bay, these organizations sought to consult directly with stakeholders, community members, and agencies that provide supports and services for those who have experienced violence.

In 2016, the TBDHU provided funding to support a violence prevention project in Thunder Bay. These funds, along with financial and in-kind support from the project partners (Crime Prevention Thunder Bay and Thunder Bay Drug Strategy), were used to contract Dr. Jo-Ann Vis to prepare quantitative and qualitative tools to gather feedback from community members and agencies regarding their experience of violence, and to explore recommendations on prevention

initiatives and interventions to prevent or reduce harm from violence in our community.

The survey and interviews were led by TBDHU but the project was a collaborative effort.

Over the course of two months, qualitative interview questions were designed for focus groups that would include service providers as well as community citizens who were willing to engage in group discussions. The qualitative interviews were held between April and June, 2016. Also, quantitative questions were developed and designed to capture feedback in survey format relating to individual perception of safety and experienced violence. All individuals who participated, in person or online, were also asked about prevention strategies. The survey was launched on June 20, 2016 and remained open for four weeks.

The findings and recommendations in this report reflect the feedback gathered from the participants using a mixed methods research design.

Purpose

The purpose of this community engagement exercise was to hear from both service providers and community members about their experience with violence as well as to solicit ideas that could be used to inform prevention strategies. It was identified that service providers, as well as community members, could offer a unique perspective concerning violence in the city, whether it be directly or indirectly.

Therefore, the partnering organizations reached out to directly consult with community groups, organizations and individuals regarding experiences of violence within Thunder Bay. This information was used to identify key concerns regarding violence and to inform prevention strategies to reduce harm from violence.

The goals of this exercise were to:

- Engage the community in a conversation about violence
- Capture the voice of individuals who experience violence in Thunder Bay
- Capture the voice of individuals who provide supports/services to individuals who experience violence in Thunder Bay
- Identify key concerns regarding violence in Thunder Bay
- Identify prevention opportunities and key recommendations to prevent and reduce harm from violence in Thunder Bay

The specific research questions the project partners sought to better understand include:

- Who is experiencing violence?
- What forms of violence are individuals experiencing?
- Where is violence occurring?
- What causes people to feel unsafe?
- What are the impacts of violence?
- What makes people vulnerable to violence (both experiencing and perpetrating)?
- How much violence is being reported?
- What are some barriers to reporting?
- What supports and services are individuals accessing?
- What are some barriers to accessing services?
- What are some gaps in services?



Methodology

A comprehensive community engagement exercise was designed to elicit information from the community. By gathering qualitative and quantitative information through a consultation process, the community was given an opportunity to share information and knowledge, and to assist the partnering agencies in gaining a greater understanding of the many forms of violence and possible strategies to prevent and reduce violence.

A mixed methods research design was developed to gather information from Thunder Bay community members regarding their experience of violence. Mixed methods research has become increasingly popular in health systems⁴; this approach includes both qualitative and quantitative data collection tools, which has been shown to help overcome the limitations and/or weaknesses of any one research method.⁵ The use of multiple data sources and/or research methods, called triangulation, facilitates validation of data through cross-verification from two or more data sources.

Participants included service providers, consumers of community services, as well as the general public who were interested in offering their opinion and/or personal experience of violence. The three data collection tools used include two qualitative methods and one quantitative method to gather data from across community sectors.

INTERVIEWS (QUALITATIVE)

For the stakeholder interviews, an interview template consisting of 11 questions was developed. For the purpose of this project, a stakeholder was considered an individual or agency that has an interest in violence prevention work and was sought for guidance and expertise on various violence related issues. A total of 34 individuals were interviewed from fourteen service organizations representing the justice system, the health sector, the shelter system, child welfare, and Indigenous and women-serving organizations. The interviews were held between April and June 2016.

COMMUNITY FOCUS GROUPS (QUALITATIVE)

A focus group template consisting of 7 questions was developed. A total of 47 individuals participated in 9 community focus groups representing seniors, youth, service organizations, homeless individuals, the LGBTQ2S+ community, people with disabilities, women, Indigenous and other cultural minority groups.

ONLINE COMMUNITY SURVEY (QUANTITATIVE)

The Together We Can End Violence Survey was developed and available online between June 20 and July 15, 2016. This survey was administered through Survey Monkey. It was promoted through traditional and social media, shared among community partners, and promoted in the community at displays at shopping centres and community meeting places. Approximately 22,000 people were informed about the survey; a total of 1164 surveys were completed.

A thematic analysis was used to integrate the qualitative and quantitative data, and to provide insight into the research questions. As a result, a snapshot on the complex state of violence in Thunder Bay was captured.

Findings

It is important to note that these findings are a reflection of the research participants' feedback, and that not all of the findings are consistent with the current research literature on violence and violence prevention. These findings do not necessarily reflect the views of the partner organizations.

As noted above, information was collected in the community using a mixed methods research design. The findings cannot be considered generalizable to the whole community, but rather, captured a point-in-time experience of violence among individuals in Thunder Bay who chose to participate in the research. The information presented in this report outlines themes to assist in understanding the experience and context of violence in Thunder Bay.

In many cases the qualitative data reflects many of the same issues noted in the survey data; however, the qualitative data provides some additional and more in-depth information. The quotes used in this report are included to highlight themes that emerged within the data. Many interviewees offered similar versions of the quotes used, and many of the quotes related to similar themes. This overlap helps to illustrate the complexity of violence. The quotes selected in this report were chosen at the discretion of the authors.

The online survey provided a snapshot of one's experience captured in a quantitative format. This information offered a glimpse of the experience of violence at a given point-in-time. All survey responses were combined with the qualitative information in the thematic analysis.





4.1 WHO IS EXPERIENCING VIOLENCE?

Among those who reported experiencing violence, 88.7% (n=275) identified their age, as follows:

- 8.7% (n=24) were 25 years of age or younger
- 59.3% (n=163) were aged 26-50 years
- 31.3% (n=86) were aged 51-75 years.

Of those survey respondents who reported experiencing violence, and who reported their gender, 72% (n=200) were female, while 25% (n=68) were male.

Of the 29% (n=310) who experienced violence, additional social and demographic data was provided by 87.1% (n=271):

- 18.5% (n=50) reported being Indigenous
- 14.8% (n=39) reported having a disability
- 11.1% (n=30) reported being LGBTQ2S+
- 9.6% (n=26) reported being a minority (other than Indigenous)
- Those who identified as immigrants and as homeless represented 1.1% each

Many focus group and agency participants identified women as being particularly vulnerable to experiencing violence, especially domestic violence. Our local survey findings differ from the literature on the age of women experiencing violence; the literature identifies young women as experiencing violence at a higher rate, but only 8.7% of female survey respondents 25 years and under reported experiencing violence. It is however important to note that 91% of all individuals who responded to the survey were over the age of 26, and so the survey data may not be accurately capturing the age range of those women most affected by violence in our community.

Among the population that shared they experienced recent violence and provided other demographic data, 18.5% identified as Indigenous. It is important to note that this 18.5% represents 48% of the total number (n=105) of Indigenous people who participated in the survey. In other words, 48% of self-identified Indigenous participants who responded to the survey reported experiencing violence within the past year. Participants in the focus groups and stakeholder interviews also frequently identified Indigenous populations as highly vulnerable to experiencing violence, and that this may in some instances be normalized.

but also identified as the main group for which prevention efforts would yield the best results. An intergenerational impact was noted as one of the key indicators for risk of violence. The following quote offers some additional information:

Eleven percent (n=30) of those who experienced violence identified as LGBTQ2S+ in the survey. This represents 42% of the total number of LGBTQ2S+ persons (n=71) who participated in the survey. In other words, 42% of self-identified LGBTQ2S+ participants reported experiencing violence within the past year. This population was also identified by interview respondents as highly vulnerable to violence.

"I think there is still a lot of verbal violence that happens...just in the school I went to, 'gay' was a derogatory term – I heard it every single day... and then also physical violence, I know especially with people from the trans community...something like shopping for clothes can be a huge issue."

"Another thing I've noticed with a lot of the people I'm dealing with, and it goes back to residential schools, they see all the violence growing up, and then that's, to them, that's the norm. So, they don't really realize that they're being abused. They think to be abused is broken bones and blood everywhere. They don't realize how much abuse encompasses, you know, emotional, psychological, all those other – pushing and shoving, not broken bones and blood."

Along with women and Indigenous people, those who have a disability were identified in stakeholder and focus groups as being particularly vulnerable to violence. Participants noted that those who have a disability are at higher risk of experiencing violence as well as experiencing more barriers in accessing services. As stated above, 14.8% (n=39) of survey respondents who experienced violence reported having a disability; this represents 40% of all respondents who identified they had a disability.

Children and youth were identified in both the survey and interview data as the most vulnerable group in terms of exposure to violence,

While there was some discussion that there has been a change in terms of acceptance for those who identify as lesbian, gay and bisexual, many spoke about their concerns of increased vulnerability for those who identify as transgender. It was thought that perhaps individuals in the community may not know if one is lesbian, gay or bi-sexual, but that someone who is visibly transitioning may be more identifiable in certain circumstances in the community. The following is an example:

"So, for instance in a year we might work with 500 women and 70-100 kids, specifically around domestic violence...it's children who have been exposed to violence, so the impact, really developmentally and long-term, for children."

4.2 WHAT TYPES OF VIOLENCE ARE PEOPLE EXPERIENCING?

The online community survey asked participants to identify the types of violence that they had experienced over the past 12 months. Respondents were asked to select all types that applied.

The following were the five top types of violence identified:

- **VERBAL 72%**
- **EMOTIONAL 49%**
- **BULLYING 44%**
- **PHYSICAL 36%**
- **RACIAL 28%**

Verbal and emotional violence/abuse ranked the highest. Verbal abuse was also commonly reported by interview participants, and was noted in survey comments as verbal assaults and threats, swearing, abusive language, insults and slurs. The groups that most experienced verbal violence included women, the LGBTQ2S+ community, and Indigenous people.

Other forms of violence identified include sexual violence, financial abuse, racial violence, gang-related violence, homophobia, and transphobia. Stakeholder and focus group participants were also asked about the types of violence that they had witnessed or experienced personally. The main themes that emerged around the types of violence that individuals are experiencing in the community included sexual violence, domestic violence, physical violence, racial violence, workplace harassment, elder abuse, financial abuse, and cyberbullying.

Domestic violence was commonly mentioned as a main form of violence by interviewees. The legal definition of domestic violence is: Any abusive, violent, coercive, forceful, or threatening act or word inflicted by one member of

a family or household on another can constitute domestic violence.⁶ Domestic violence can include various types of violence that occur within an intimate partnership. Interviewees frequently referred to violence within a relationship as domestic violence, highlighting women as those who are at particularly high risk for sexual, physical, emotional and financial violence within relationships.

The community perception of violence was also frequently mentioned as a means to uphold behaviours that are violent; it was believed that it may be “accepted” in the community. Interviewees frequently highlighted the need for education around what domestic violence is, and how it affects everyone within a family. Participants also noted that there are not enough services in the city focussed on the whole family that address domestic violence, and instead some of the existing services place undue stress on the survivor of violence, and fail to hold the perpetrator accountable.

Physical assault was also frequently mentioned as a common form of violence that was seen by interview participants. Physical violence was mentioned in the context of domestic violence, but also as violence that occurs within the community, oftentimes within populations that are marginalized. Physical violence was mentioned in both the interviews and in survey data as presenting as fights or assaults (“being jumped”), stabbings, assaults with other types of weapons, and commonly reported as being perpetuated, or exacerbated by alcohol or other substances.

Racial violence was a theme that appeared throughout the interviews as being systemic, historical, and society-wide. Additionally, some of the

“It’s physical violence, it’s sexual violence, and really psychological violence as well, just that kind of intimate terrorism that’s occurring in women’s and kids’ lives, around being fearful of someone that perhaps has never actually struck them or harmed them physically, right, so that level of violence that I think also doesn’t get talked about in any real way.”

“Stereotypes exist within the community. ... It seems that there’s little groups within little groups that pick on each other.”

comments gathered in the online community survey included racial stereotypes, behaviours and violent opinions. Examples in the survey included verbal slurs, physical assaults (i.e. Indigenous people being egged by strangers, having rocks thrown at them, etc.), and profiling by those who are meant to help individuals (i.e. service providers, first responders, health care professionals, etc.). It was suggested that community racial violence is escalating, needs a collaborative community response, and that all citizens have a role to play in ending it.

"In any given day, I'm speaking to women who are trying to leave an abusive relationship, or have an ex-partner who is stalking them, or are involved in a custody or family law dispute where the children are being used as pawns or they're being threatened. And then women of course are regularly reporting sexual assault."

"A lot of times, I get thrown something at me while I was walking, and they're calling me names like "squaw" or "dumb Indian" or things like that."

"We are seeing workplace violence. We are getting requests not only from an employee perspective, from the sense of workplace violence around harassment or bullying, but we are also seeing it from the perspective of health and safety related to clients. So, clients that themselves are presenting that are aggressive and then have violence and are harming staff."

Cultural sensitivity training and culturally appropriate programming were identified as ways to better educate employees and the broader community to end the perpetuation of colonial ideologies, and the violence and harm that result.

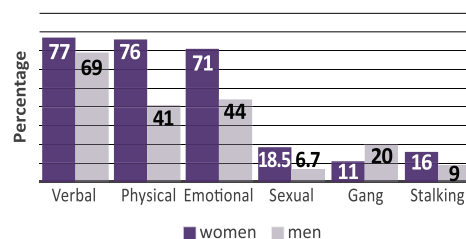
Another type of violence that was identified in the interviews and in the survey comments was financial abuse, which included the victims being financially dependent in a relationship, and an elderly parent or other relative that is being controlled or taken advantage of for their money.

Workplace violence was also identified in both the survey and interviews. Workplace violence was oftentimes noted as being perpetrated by clients or individuals that were receiving support or assistance by an employee, who then, as a result of their caring role, experienced physical or verbal abuse. The interviews also suggested that workplace violence could exist between workers or management. From the limited survey information received it can't be determined which factors, processes, and interactions put people at risk for workplace violence, but interview data revealed that violence in the workplace is an area where prevention efforts could produce positive results as individuals are becoming more educated on their rights in the workplace.

Cyberbullying was mentioned by interview and focus group participants as a growing form of violence; participants noted that the online community through Facebook and other forms of social media can be used as a tool to perpetuate violent ideologies.

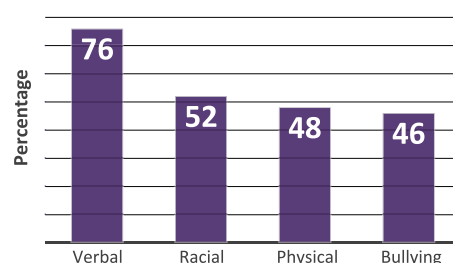
Among those who reported experiencing violence within the past 12 months, there appears to be some significant gender differences, in terms of the types of violence experienced, as illustrated in the following chart:

Types of Violence Experienced by Gender



With the exception of gang violence, where men reported experiencing this type of violence almost two times more than women, women experienced verbal, physical, emotional and sexual violence and stalking at higher rates than men. In some cases, such as physical, emotional and sexual violence, the differences were substantial.

Types of Violence, Indigenous People



The top types of violence experienced by self-identified Indigenous survey respondents included verbal (76%) and racial (52%); physical violence and bullying was experienced by 48% and 46% of Indigenous respondents, respectively.

4.3 WHERE IS VIOLENCE HAPPENING?

Individuals who reported experiencing violence within the past 12 months were asked where they experienced violence. Respondents were asked to select all options that applied. The following list includes the top four locations where individuals reported experiencing violence:

- **ON THE STREET (53%)**
- **IN THE HOME (27%)**
- **WORKPLACE (27%)**
- **IN A RECREATIONAL AREA (18%)**

Fifty three percent (n=157) stated that the violence they experienced happened on the street and an additional eight responses in the "Other" category fit within this location as identified by their description comment. The second most common setting was the home. While domestic violence was not a specific form of violence that survey respondents could select, the fact that 27% of those who reported experiencing violence experienced it in the home could indicate that much of the violence (physical, verbal, emotional, etc.) that participants reported is domestic in nature.

Survey respondents were also asked where they felt unsafe in our community. Respondents identified the following top five locations:

- **STREETS OF THUNDER BAY (77%)**
- **BUS STOPS/BUS SHELTERS (76%)**
- **PARKING LOTS (75%)**
- **BARS (59%)**
- **PARKS (49%)**

A total of 77% (n=795) of the online survey respondents identified that they felt unsafe on the streets of Thunder Bay, with an additional 15 responses in the comments section that fit with this location. While it was mentioned that, historically, there have been areas in the city that were believed to be unsafe, this appears to still be true. Many interview/focus group participants also noted that fear of being victimized on a street is common, especially later in the day and when one is approached by a group of people. In many cases, the perception of safety was also dependent on the time of day. For example:

"It depends on the time of day. I feel safe in parking lots and on the streets during the day, but I would watch over my shoulder at night and in certain neighbourhoods."

According to the survey, bus stops and bus shelters ranked second highest for areas where individuals feel unsafe. City Hall, which is a main hub for public transportation, was also mentioned in the survey comments as a place where people felt unsafe.

Interview and focus group participants expressed concern about bars sometimes becoming gathering places that create opportunities for violence to occur. Some participants also suggested that many individuals, and youth in particular, have no place to go and end up in areas around a bar. It is the congregation of people before, during, and after the bar that seems to create a sense of fear. Participants also expressed that they sensed that individuals are drinking more, drinking earlier and going longer/later, creating situations where people become increasingly vulnerable to violence.

The survey results identified parks as the fifth highest area in the city where participants reported feeling unsafe (49%). One of the main issues expressed concerning safety in the parks is related to substance use.

The following quotes support this concern:

"We have three cameras located on that building, and there is an eye in the sky right there, and nothing deters the public from violence or selling drugs, or using drugs out in the open... drinking in the parks."

"Oh, I see a lot of people who drink at the park. They don't come here when they drink, they'll be at the park, they won't be here."

Another common theme in the "Other" option for the question "Where do you feel unsafe?" was that respondents felt unsafe on walking trails or bike paths. This was noted in 21 of the 148 comments, and was also identified within the top five areas where people had experienced violence within the past 12 months. Comments that reflect this theme include:

"Can't walk the recreational trails without incidents"

"I do not go for walks anymore in my favourite area."

Additional survey comments were made about neighbourhoods in general, and in some instances, specific neighbourhoods were identified as areas where people felt unsafe, including downtown core areas and certain residential neighbourhoods.

Survey results also demonstrated that among the people who reported experiencing violence in the past 12 months, 27% identified that they experienced violence in the workplace. Workplaces also ranked in the top ten places where survey participants felt unsafe. Several quotes demonstrate how respondents feel that violence is accepted in their place of work:

"Call to police is frowned upon by upper management."

"Accepted as a part of the job."

"Sadly, part of my job and I'm used to it."

While one's home can provide a sense of safety for many, this is not the case for all. Individuals who indicated that they live in apartments or in a home within a neighbourhood that has experienced a lot of violence reported that they often feel unsafe in their home. Incidents like break and enters, strangers looking into homes through windows, or trespassing in backyards were also identified as reasons that participants felt unsafe in their homes. Lobbies were also identified as areas that can feel unsafe.

"The fact is now if I go downstairs to where my freezer is, I really think twice about it. I check to see if there is anyone around. Yet when I first moved in there, I was in an apartment in the basement and I felt very safe. But it has changed."



4.4 WHAT CAUSES PEOPLE TO FEEL UNSAFE?

The online community survey asked participants “What causes you to feel unsafe?” Respondents identified the following:

- **BEING IN CERTAIN NEIGHBOURHOODS (78%)**
- **WALKING ALONE AT NIGHT (76%)**
- **BEING IN SITUATIONS AND/OR PLACES WHERE PEOPLE ARE DRINKING AND/OR USING DRUGS (70%)**
- **SEEING GROUPS OF PEOPLE GATHERING ON THE STREET (65%)**
- **FEAR OF VIOLENCE (63%)**
- **FEAR OF CRIME (62%)**
- **RACISM AND OTHER FORMS OF DISCRIMINATION (44%)**

Being in certain neighbourhoods and walking alone at night ranked highest among respondents. Being in situations and/or places where people are drinking and/or using drugs was selected by 70% of participants as something that made them feel unsafe. This issue also

was also identified in the “Other” option, where an additional 20 responses reflected this theme. The “Other” option for this question also contained several descriptions of individuals that a respondent may encounter, and the language of many of these comments were intolerant, insensitive to the individual’s situation, racist, or otherwise discriminatory. These examples of discriminatory attitudes against specific members of our community should be explored further to better understand their relation to violence and violence prevention.

A lack of community connection and interaction was identified by interview and focus group participants as creating fear in the community, as well fear of others who are unknown. Many individuals also discussed the loss of connection between neighbours, not knowing who to go to close by if there were a safety concern, and being fearful of one’s neighbour.

“Seniors do not want to leave their apartment at night because of violence. Seniors want to be in their homes like 6-7 at night behind closed doors.”

Concerns regarding the safety of youth, especially those who are travelling from remote communities or reserves were expressed. A lack of meaningful community connections is something that many respondents believed put youth at an increased risk for experiencing violence.

Another concern identified, specifically in the interview feedback, was the perception that the level of violence has increased and become more aggressive, with weapons of various kinds being used. An increase in gang-related violence, groups of people assaulting one person, the use of knives, guns and other weapons were also identified as serious concerns that have been increasing.

“I think about those high school students that come from off, that live on the remote communities like off-reserve. They don’t have no experience of city, or what it’s like to live in a city, compared to where they were brought up. And they get taken advantage of. ... I guess sometimes they’re lonely, they miss their home, it’s very hard for them to come down to school to leave their family ... they had to leave their home, and then they don’t really have the language.”



4.5 WHAT ARE THE IMPACTS OF VIOLENCE?

Among those who reported experiencing violence within the past 12 months, 89% indicated that they were affected by the violence. Respondents were asked to select all impacts that applied. The most common impacts identified are as follows:

- **ANXIETY AND DEPRESSION (76%)**
- **FEAR OF OTHERS (41%)**
- **FEAR OF PUBLIC PLACES (35%)**
- **AFRAID FOR FAMILY (33%)**
- **SOCIAL ISOLATION (33%)**
- **RELATIONSHIP DIFFICULTIES (32%)**

In addition to the impacts identified above, there was a long list of other impacts, including loss of possessions, income and friends, physical injury, alcohol and drug use or increased use, chronic illness, etc. Many of the 56 "Other" comments highlighted the impacts on mental health, including anger issues, post-traumatic stress disorder, loss of trust and increased fear. Fifteen percent of respondents also indicated that they experienced suicidal thoughts resulting from the violence experienced. Several interview and focus groups respondents shared how their mental health was impacted.

"I fear going to work. I fear public places."

"Self-harm...having trouble trusting people that I should be able to trust and feel safe with but my mind just associates most men with my attacker."

Other impacts of violence highlighted throughout the survey and by interview and focus group participants were themes related to financial strain, poverty, discouragement with the justice system, power imbalances, protection of children, and the continued cycle of violence within families that experience violence.



4.6 WHAT MAKES PEOPLE VULNERABLE TO VIOLENCE?

Focus group and interview participants were asked what they felt contributed to violence, and what they thought the risk factors were for experiencing violence in our community. Many of the most common responses were also cited by survey respondents as reasons that they feel unsafe in the community. Many of these factors are related to the social determinants of health, or things that occur when the social determinants of health are not met.

"Where are we really lacking? Meeting social determinants of health: housing, shelter, food, all of those things play out. Violence, I think is just some way, a report card to say we're not doing a very good job, because that's what it's resulting in. Lack of coping skills, desperation, not enough services in place."

The most commonly cited risk factor for violence was substance use, which was also the third highest reason survey respondents reported feeling unsafe in the community. Focus group and interview participants cited alcohol and/or drug use as common reasons why violence occurred. Participants varied in their descriptions of why substances factored into violence in the community; many said that experiencing violence led to substance use, and then into

more violence, while others cited violence as a means for collecting debt from selling illicit substances. It was noted that those who are intoxicated may be more likely to perpetrate violence.

"...with the drug collections, people not paying their debt, or it's a forceful matter to get their money back, or the threats of violence so that he'll make payments so they can get their next fix."

Substance use was also believed to make individuals more vulnerable to experiencing violence.

"She probably was too drunk, too intoxicated, and she probably had something in her bag that they wanted, and they just kind of jumped her."

There were survey respondents who left comments about those who may be "drunk" or those who are using drugs as individuals who make them feel unsafe in the community. The qualitative data from the interviews, as well as in the comments section of the survey paint a very complex picture of how and why substance use contributes to violence, and to a reduced sense of safety in the community.

Mental health was frequently identified as a contributor to violence in the community, and also identified as an impact of experiencing violence. It was also noted that unaddressed mental health issues may be a driving force for substance use, which may then lead to violence. Another factor that was frequently mentioned that leads to violence is trauma, especially intergenerational trauma that is never addressed or processed. Many participants noted that the mental health concerns that result from trauma, and the lasting effects of trauma on the individual and the rest of their family can have an impact on violence in the community.

"I've met people I don't know how they're even still functioning, I really don't. When they, when you hear a little bit about their story, it's just so incredible how much loss they've experienced, it's amazing even that they're still putting one foot in front of the other. So, if they have some ineffective coping mechanisms, like using drugs and alcohol, or you know, violence in their own lives, it's pretty understandable."

Poverty was mentioned frequently as a reason violence occurs, and also as a reinforcing risk factor for future violence. Some participants cited poverty as a road to violence to fulfil a basic need that is otherwise unmet. Violence was also noted as a coping mechanism of those who experience poverty, as a response to a lack of adequate resources.

"We know violence, not always, does come out of desperation and anxiety."

"If the person who brings the money home, like the breadwinner of the family, if they get sick and aren't able to work, they're in a situation where they're financially precarious. Where if they don't make that credit card payment, that will immediately put them in a tailspin, and that has serious impacts on your ability to hold it together as a family. And so, some people will turn to drinking and things like that, and then others lash out or they'll just have sudden outbursts and the relationship of the family will deteriorate."

Housing and homelessness were frequently identified as issues that contributed to violence, as well as risk factors for perpetrating violence and/or being a victim of violence. Participants illustrated how a lack of housing, or lack of affordable and/or adequate housing, can put someone at risk of experiencing violence, especially in situations where a partner is fleeing a domestic violence situation.

"And even with our homeless populations, when they're sleeping, they prefer sometimes not to sleep at the shelter, when they're sleeping in the back alleys or in vehicles, like basically in vehicles that are abandoned, they basically have to lock themselves in, because people come along and try to stab them. And that's just what we're seeing, so what are we not seeing in the community, and that's pretty scary."

Lack of education about violence was also frequently cited as something that contributes to violence, in a few different ways. Participants mentioned that a lack of education around what violence is, starting at a young age, contributes to the perpetuation of violence.

"If there was educational videos showing domestic violence, you get that, you show that to the kids in the classroom or whatever, maybe they'll think about it, maybe they'll be like, 'wow'. Maybe it'll stay in their mind."

Participants also cited that a lack of education or awareness of the resources and supports available in the community for both victims and perpetrators can increase the risk of violence.

"I find a lot of people don't know anything about resources at all. It seems that it's not advertised as much. ... most are low income, poverty, homeless people, like they're not watching TV and seeing commercials, they're not on the internet scrolling through things, they don't have that ability so how else are you – you have to figure out a way to be able to reach these people."

Another factor that was identified several times as both a contributor to violence and a risk factor for experiencing violence is racism. A lack of education was expressed about the Indigenous community, and the impacts of colonialism, residential schools and intergenerational trauma. Some participants spoke about the effects that residential schools have left on individuals and families, how the impacts continue to be experienced today, and how this may contribute to a cycle of violence within a family.

Also of concern to interview and focus group participants was the isolation of Indigenous people when they leave their community and travel to Thunder Bay. Participants spoke about the effects that disconnecting from family and culture can have on a person in an unfamiliar environment, emphasizing the challenges for Indigenous youth who need to leave their homes for education. This may all increase the risk for violence.

"People who are having the drugs are taking advantage of these kids who are coming out of smaller communities; they're giving them drugs to sell, and a place to stay. You see lots of stuff out there, and the sad part out there is that they have no knowledge of Thunder Bay."

Concerns around the community's intolerance of difference were expressed in the interviews as something that can increase the risk of victimization or perpetration of violence, in that if the community is not accepting of difference, it allows hostility to grow.

"Thunder Bay ... is not very understanding of people's differences. They're not very tolerant of difference."

"And then there was a 'you're a non-taxpayer, so I don't care too much about you' and then... that's kind of like, wrong right there. Because under the Treaty, too, that everybody should be treated the same way. And that's also something else that needs to be looked into."

Intolerance of people's differences in the community was also reflected in the online survey comments. Some respondents, especially when asked what made them feel unsafe, offered examples using language that was clearly intolerant and discriminatory towards some groups in Thunder Bay. Many of these comments had racist undertones, and many others were overtly racist towards the Indigenous community. The fact that racism and intolerance were identified as risk factors for violence, and that the survey responses collected some real examples of this intolerance within our community supports the need for more education around racism and its impacts, and about diversity and inclusion within Thunder Bay.



4.7 HOW MUCH VIOLENCE IS BEING REPORTED?

Among those who responded that they had experienced violence in the past 12 months, 34% said it was reported to the police. Males, females, those who identified as Indigenous, and those who reported a disability all reported the incident to police at similar rates, at 34.9%, 34.7%, 34.7% and 35.9%, respectively. However, only 20% of those who identified as LGBTQ2S+ identified that they reported the violence they experienced to police. It is important to remember that the sample sizes were small, and so this information cannot be considered generalizable to the community. Rather, it offers a snapshot in time, from among this group of respondents, of what is happening in our community. This is an area that should be further explored.

The survey went on to ask why individuals were not reporting. The top six reasons identified for not reporting include:

- **THERE WAS NO PHYSICAL INJURY (47%)**
- **FELT IT WAS TOO MINOR (46%)**
- **DID NOT WANT TO INVOLVE THE POLICE (37%)**
- **FEAR OF RETALIATION (35%)**
- **FEAR OF NOT BEING BELIEVED (29%)**
- **PREVIOUS NEGATIVE EXPERIENCE WITH POLICE (26%)**

There were some differences between females and males in terms of reasons for not reporting violence to police.

The top four reasons identified by females why they did not report were:

- **FELT IT WAS TOO MINOR (56%)**
- **THERE WAS NO PHYSICAL INJURY (49%)**
- **DID NOT WANT TO INVOLVE THE POLICE (38%)**
- **FEAR OF RETALIATION (36%)**

The top four reasons identified by males why they did not report were:

- **THERE WAS NO PHYSICAL INJURY (48%)**
- **PREVIOUS NEGATIVE EXPERIENCE WITH POLICE (38%)**
- **PREVIOUS INCIDENTS REPORTED TO POLICE DID NOT RESULT IN THE DESIRED OUTCOME (36%)**
- **FEAR OF RETALIATION (34%)**



The top reasons identified by Indigenous respondents for not reporting the violence they experienced were:

- **DID NOT WANT TO INVOLVE THE POLICE (45%)**
- **NO PHYSICAL INJURY (45%)**
- **PREVIOUS NEGATIVE EXPERIENCE WITH POLICE (41.9%)**
- **PREVIOUS INCIDENTS REPORTED TO POLICE DID NOT RESULT IN DESIRED OUTCOME (36%)**
- **FELT IT WAS TOO MINOR (36%)**
- **FEAR OF RETALIATION (36%)**

Twenty two percent of survey respondents chose “Other” as the reason they did not report. The most prominent theme in the comments was around workplaces, with respondents noting again that violence was a part of the work role or workplace setting. Other themes that emerged from the survey comments and interviews were “fear” in general, mistrust of the police, the inability to speak English, they did not know the laws, had a previous “record”, had unstable mental health, and they felt shame and guilt.

Survey and interview/focus group data supported the reality that many incidents of violence go unreported. Fear about potential implications when one reports violence became a common theme. The following quotes illustrate this:

“Do people feel safe to report? They know that when they give that information, that whoever it was might end up back on the street that night anyway and then their own safety is at risk, right? So, you can’t guarantee the safety of someone who’s gone through violence. You can put safety measures in place but you can’t tell that person you are now safe.”

“For instance, you get beat up in the street, for your drugs or because you didn’t pay a drug debt, they’re not going to be more likely to report that...it’s the criminality of it, and the risk of the repercussions of becoming an informant.”

Police presence and positive relationships with police was also seen by some as a strength. Many community groups and organizations that require the support of police to create a safer environment shared positive experiences with police. It was also noted that when neighbourhood policing was in place, their presence when they walked or biked in the communities made a positive difference.



4.8 WHAT ARE SOME OF THE BARRIERS TO REPORTING?

Interview participants were asked what they believed were some barriers to reporting violence. Some of the barriers identified are similar to many of the reasons why individuals did not report violence (previous); however, there were other specific barriers identified and information shared in the focus groups and stakeholder interviews that shed more light on people's experiences.

The most common barrier to reporting identified was having a past negative experience reporting the violence. Participants elaborated by saying that whether they sought help from the police, or from a community agency, if the individual was not met with support, the chances of them reporting future violence dropped.

Frequently mentioned were feelings of shame, guilt, blame, and judgement for reporting, and fearing the consequences that may come of that. Common themes from the interviews also included fear of retaliation, which was also captured in the survey responses. Fear in this instance also related to what would happen to the individual's life if they reported, especially if they were financially dependent on the perpetrator. Fear of not being believed was also a common theme from the interviews, and is related to the responses about having a negative previous experience reporting violence. Participants noted that oftentimes, those who chose to report put a "target" on their back for repeated violence, and so choosing not to report was a way of keeping themselves safe.

"I think it's the fear of repercussions, and I think they're scared of having to face the people the next day knowing that the system doesn't work. And they're going to charge somebody and then know that they're going to be out of jail within 12 hours and they're going to have to face them on the streets again. I don't know how many times we've seen violence or abuse, and the people, they don't want us to call the police, they don't want anything to happen."

Fear of the child welfare system emerged as a theme in the interview and focus group data.

The fear of having children removed, and the complexity around what happens to a child when violence is reported, is a reason many cited for not reporting the violence they experienced. This is particularly so in instances of domestic violence and it is acknowledged that children need protection in homes where violence occurs. Local child welfare services report working with families, their supports and community partners to enhance child safety and wellbeing which results in the vast majority of children remaining in the care of their families when they are receiving child protection services.

"Fear of involvement of child welfare, fear of apprehension of children, fear that they will be charged, fear that they will not be believed. And these are not unreasonable fears, right, they happen all the time, and especially for racialized women, and low-income women, and women with addictions."

"That's a stigma I think from the victim's point of view, they don't want their kids taken away. They're always afraid... kids are present when the assault happens, that they're always afraid that child welfare is coming in and gonna take their kids."

However, it appears that many families rarely see the child welfare system as a resource or source of support. Many participants noted that once child welfare is involved, the victim of violence, who is most often female, has to jump through many hoops to get her children back, while the system fails to keep the perpetrator accountable.

A further elaboration on this theme was that too often the focus is on the mother, versus the father, especially when he may be the one who is perpetrating violence. It leaves the mother, who has experienced the violence, responsible for her children, in addition to trying to cope with her experience.

Another opinion expressed was that the child welfare system can be a resource to fathers, and the importance of putting effort into engaging them again.

"It is the victim that we are working with because they are often the primary caregiver... and so sometimes it feels like they are being held accountable, whereas if the dad works out of town, he is gone for months or weeks at a time...lots of times men avoid our service...there is no way to force the dads to work with us."

Some interview participants also spoke to the issue of elder abuse, specifically those who live at home with an adult child. In these situations, the issue of isolation, lack of awareness of available resources, and fear of reprisal were identified as barriers to reporting violence to police or others, and may contribute to underreporting.



4.9 WHAT SUPPORTS AND SERVICES ARE PEOPLE ACCESSING?

Online survey respondents were asked if they accessed formal and/or informal supports following an experience of violence. Formal supports include trained professionals, such as law enforcement officials, mental health workers and physicians. Informal supports include members of informal social networks, such as family and friends.

A total of 41% of online survey respondents indicated that they accessed formal supports following an incident of violence. The top five formal supports accessed include:

- **POLICE (53%)**
- **GENERAL COUNSELLING (38%)**
- **MENTAL HEALTH SERVICES (36%)**
- **HEALTH CARE SERVICES (26%)**
- **LAWYER (20%)**

Many interviewees identified the importance of ongoing counselling as a key to making change, especially when it came to domestic violence. Law enforcement, the legal system and the child welfare system were identified as the primary crisis supports; however, access to free and accessible counselling services were thought to be critical for change to be sustained.

The top three formal supports accessed were the same for both men and women. A total of 46% of those who accessed formal services noted that the services were helpful; however, it was noted that lack of coordination and easy access to services were barriers that require attention.

A total of 74% of online survey respondents indicated that they accessed informal supports following an experience of violence. The top five informal supports accessed include:

- **FRIEND (80%)**
- **FAMILY (76%)**
- **CO-WORKER (39%)**
- **NEIGHBOUR (16%)**
- **ONLINE SUPPORT (I.E. FACEBOOK, CHAT ROOM, FORUMS) (12%)**



4.10 WHAT ARE SOME BARRIERS TO ACCESSING SERVICES?

Interview participants were asked to identify barriers to seeking out services or formal supports after they had experienced violence. It is important to understand these barriers, as the survey results showed that only 41% of those who reported experiencing violence accessed formal supports (i.e. services).

The most prominent barrier identified by interview participants was the response by staff who are providing these services. Many service providers who were interviewed highlighted the importance of providing a compassionate response to people who have experienced violence, and that if this response isn't received by the victim/survivor, they may shut down and not continue to access services.

"I think a lot of people just want someone to care about them. Like, if you come from a violent home and you're violent, you know it's not right, you don't want to be violent. And then, you know, you just want somebody, people to just give a shit."

"We need to empower people and support them."

Similarly, the response from police when violence is reported is critical. Some participants noted that some front-line officers appear unsympathetic, and do not make it easy for the victim/survivor of violence to proceed in getting further support. It was also noted however, that the police had some positive qualities that were appreciated by the community. The police Domestic Violence Unit, the foot patrol, and officers who patrol the same neighbourhoods frequently and get to know the people in the neighbourhood were all considered positive, and were mentioned frequently by interview and focus group participants.

Another barrier to accessing services that was frequently mentioned was the lack of resources to facilitate or enhance the ability to use services. Participants identified that things like affordable child care, accessible transportation, and even basic needs (access to food and shelter) are imperative for individuals to continue to engage

in services. Many participants spoke to the fact that if victims of violence do not have their basic needs met, it becomes difficult for them to tend to other needs.

A concern identified by interview participants was that individuals are often accessing medical services such as the emergency department when, in fact, other services could be more appropriate to address their needs; however, lack of availability and/or access to services creates a further negative impact and vulnerability to experiencing violence. Wait lists were also identified as a barrier to accessing services, and also something that contributes to more violence. Participants noted that if appropriate services aren't readily accessible, more harm can be experienced while those individuals wait.



4.11 WHAT ARE SOME GAPS IN SERVICES?

A gap identified by many was a lack of affordable childcare. This was highlighted as something that prevents women, and sometimes men, from accessing the services they need. Many felt that if affordable childcare were offered as part of a service, more individuals would access services.

Participants also mentioned that there is a lack of community drop-ins or gatherings, especially for populations at an increased risk of violence. Participants noted that culturally appropriate community gatherings could increase the social safety net for those who otherwise may feel isolated within the community. Community drop-in programs or centres were also identified as something that is needed for youth who don't have many other places to go.

"We need to get more activities going more in the evening. I find in Thunder Bay, there's a lot to do during the day, but as soon as like around 6:00 comes, there's nothing to do."

"I think a physical space. A space that people know they can go to, and it's not about putting up a sticker and it's not about advertising or any of that stuff, it's about just having one place where everyone just knows that if I need something I can go here and someone will help me."

"A place that is safe, where people can meet each other, people can kind of have that sense of community and feel safe doing that, and that there's really not a lot of places, maybe not any at all in Thunder Bay, that people can just do that."

Participants in the interviews and focus groups were asked what they felt was missing from services to address violence in our community. A prominent theme that emerged was the lack of services available for men in our community. Many offered examples of what happens if a man needs to flee his home with his children, and how there's nowhere for him and his family to go. Additionally, services for men who perpetrate violence so they can deal with violence that they had previously experienced were identified as being required to create change and prevent future violence. Again, the cycle of violence was identified, and many expressed the need to address unresolved issues of past violence, and the need for a place for men to go to deal with unresolved trauma to promote healing.

"We need free services for men, in terms of like individual counselling and follow-up ... if we stabilize them, on various levels, from addictions, to their views about masculinity, to working through past trauma or whatnot, then we also settle the behaviour and then we impact the system."

Another factor that was mentioned frequently was the actual gap that exists when services work in silos. Many mentioned that agencies have to work better with each other and communicate better to ensure that those that need help are actually receiving it. While coordination among service providers was seen as improving in recent years, it was clear that many thought there was still room for improvement. In particular, was the concern about the amount of time, cost and energy required by one person to navigate the system and/or to find out what services might be available. Information about material resources, such as income supports and counselling programs, appear to be difficult to access, especially for the most marginalized and at-risk populations.

While there have been improvements in communication among agencies within the system, there appears to be acknowledgment that more can be done, and that this is not possible by one organization alone.

"And I think partnerships. There are some really good things happening in this community around this work, everywhere, and we're not linking up in the most effective ways all the time."

"Why can't we come together in Victoriaville Mall, which is not utilized and it's got space, and on Wednesday morning or whatever, you just come in there from 9-12, and this is where you see people. You're not in line... you can fill out an application... Fort William on a Wednesday morning... and the P.A. side of town on the Thursday morning. We need to get that hub."

Comments about the need for more and better coordinated service provision were also frequently mentioned in the survey, stakeholder interviews and focus groups. Some suggestions provided include "a one stop shop", better coordination of services, and easier access to services for those who have experienced violence, as well as services that address mental health and substance use.

"The whole idea of having a hub ...there is a whole wealth of services for the VAW sector, but it becomes almost a full-time job accessing those services and keeping appointments."

Many community members and service providers identified the need for ongoing counselling aimed at repairing relationships with a focus on families and that a gap in these family resources/ services exist. Many identified that families want violence to end, but the relationship to continue. Participants acknowledged the lasting effects of trauma from violence, and that it is essential for services that are accessed to follow up long-term with the individuals, as well as their whole families.

A lack of education about violence was identified as a gap in our community. Many participants felt that there are still stereotypes and commonly accepted social norms that certain forms of violence are "okay" and some are not. Many participants mentioned that educating youth in schools about what violence and sexual violence are, could go a long way in preventing it from occurring in the future.

Discussion

Several themes emerged over the course of the research project. They are highlighted below.

5.1 SOCIAL DETERMINANTS OF HEALTH

The social determinants of health (SDoH) were discussed in many of the interviews, and are understood to influence the health of populations. SDoH include income and social status; social support networks; education; employment/working conditions; social environments; physical environments; personal health practices and coping skills; healthy child development; gender; and culture.⁷ These determinants are believed to be at the core of many factors relating to violence. Many participants, particularly service providers, spoke to the complexity of factors influencing one's physical and social environments, stating that it is unrealistic to reduce or eliminate violence without first addressing the social determinants of health.

5.2 DOMESTIC VIOLENCE

One of the main themes that emerged in almost every interview and focus group, and which was also reflected in the online community survey, was related to domestic violence. Domestic violence was perceived as permeating many categories related to violence. Generally speaking, individuals did not differentiate between violence and abuse, but discussed these issues and experiences interchangeably.

Many discussions about abuse history emerged in the interviews and focus groups. This included childhood abuse as well as intimate partner abuse. Types of violence discussed primarily included sexual, physical, emotional and financial. Domestic violence is complex and the feedback gleaned from the interviews and survey support the varied and intertwined issues that accompany domestic violence and the reality of its intergenerational patterns.

In the online community survey, 27% of the respondents who reported having experienced violence in the previous year indicated that the violence occurred in the home. Many individuals, as well as service providers, discussed the vulnerability of individuals who have experienced violence in the past and the many barriers that exist to keep one-self safe.

Equally concerning are the many comments about the potential for the cycle to continue once children become victims of violence; either in the home or elsewhere. The following is an example of such exposure for children:

"We're also seeing the second and third generation violence, inherited violence, learned behaviours and those kinds of things. I have been here a long time, so I've seen it in children."

"My mom never taught me to deal with emotions. It was anger or nothing. You know? So, when I was sad and depressed, I lashed out. I'd fight."

Overall, barriers to adequate interventions, material resources and safety, contribute to the vulnerability of children to experience violence either directly or indirectly (i.e. as a witness).



5.3 VIOLENCE AGAINST WOMEN

As mentioned above, domestic violence and violence against women in general were predominant themes, especially within the interview data. Almost every individual and focus group interview expressed that when domestic violence is occurring within a relationship, that women are disproportionately impacted. Participants noted that concerns and fears associated with contacting police, involvement with the court system, being believed, loss of housing and income, single parenting, involvement of child welfare, and loss of relationship as just some of the issues that increase the complexity of domestic violence, and many of these are barriers to reporting violence. While there have been many improvements regarding service provision and partnering/coordination of services such as victim services, policing, the Domestic Violence Unit, francophone services, victim witness and bail safety connected to the court/legal process, and coordination protocols between violence against women programs and child welfare, gaps remain. One of the largest gaps pertains to co-ordination and access to services. Equally concerning is the lack of access to material and basic living needs when one is in a crisis situation.

Another challenge for women in particular is the issue of emergency shelter for some women. Participants noted the lack of a safe space for women fleeing violence who do not have children, or have dependent teenage boys.

"Our community is missing a safe house, we have no services for sex trade workers ... if a woman is still in a relationship with the man, or visiting him or something, she can be discharged, or you know, she can't come back to the shelter."

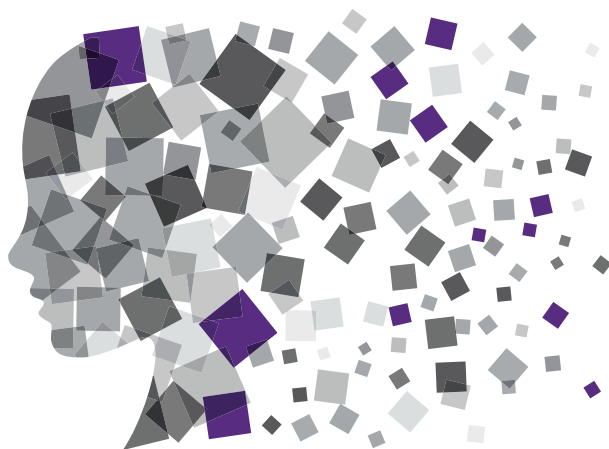
"Crisis homes don't allow youth to be there, just children, so when a woman leaves her family, she has to leave her 16-year-old son uncared for, because she can't bring him."

5.4 VIOLENCE AGAINST MEN

As briefly noted above, two differences related to men's experience of violence were made: one pertaining to lack of supports for men who have perpetrated violence and the other for men who have previously experienced violence. Several interviewees pointed out that men who have abused their partner may also have experienced violence. While this is not an excuse for abusive behaviour, it speaks to the cycle of violence and the lack of resources and services available for men to deal with unresolved issues.

Both service providers and focus group participants expressed a concern about the lack of free and accessible services available to men who have experienced abuse and who go on to perpetrate violence. Some participants voiced there are inadequate services to support men if they choose to make healthy changes in their lives, and this poses a significant barrier to protect against future violence for our community.

"What we don't see a lot is referrals or conditions for men to get individual counselling, grief counselling, counselling about processing things they went through in their childhood... we need free services for men."



Mental health and addiction services were also noted as services lacking for men who are interested in making positive changes. Many of these services also have wait lists, and/or costs (i.e. private counselling services) associated with them, which can create barriers. Many of those interviewed also discussed situations where men have experienced violence in their relationships. In all types of intimate relationships, service providers have reported an increase in violence-related calls where a male partner has been abused. Service providers discussed issues concerning stigma and shame, and also highlighted the lack of services available for men, once a decision to access services has been made. Specifically, the lack of crisis shelter for men was noted in many interviews.

"A men's shelter is definitely needed in the City of Thunder Bay. A men's shelter because we need some place where they can go with children, because where do they go?"

"But the men? They don't have many options. The options they do have, I don't think they are the best...just lack of resources."

"Most impacted? I'd say children, youth and children. I mean, it's everybody, really, but for those that are the most vulnerable, it would be children and youth. They don't really have a voice in this at all."

5.5 VIOLENCE AGAINST CHILDREN AND YOUTH

Children and youth were identified throughout both the survey and interview data as being among the most vulnerable in terms of exposure to violence, but also targeted as the main group to which prevention efforts would yield the best results. Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue.⁸

An intergenerational pattern was noted as one of the key indicators for risk of violence, which is supported by the literature on Adverse Childhood Experiences (ACEs). The child welfare system was rarely identified as a resource to assist families, but rather seen as a barrier or threat by many who experience violence, and by many other who provide support to victims/survivors.

In the absence of safe relationships and environments, changes in brain architecture can occur in children, and can have long-lasting impacts, including changes in behaviour and mental health, which can lead to aggression and antisocial behaviour. Exposure to domestic violence threatens healthy childhood development and there is a strong likelihood that the experience of violence will perpetuate future violence (i.e. cycle of violence).

5.6 SUBSTANCE USE

Substance use was a key theme that emerged in the interviews, focus groups and online community survey. It was noted as one of the main factors believed to be contributing to violence in Thunder Bay and that, oftentimes, it makes an individual's situation more complex. Research suggests that those who have experienced violence are more likely to use substances⁹; therefore, it was not surprising that this issue was identified as a top priority for inclusion in violence prevention strategies.

Treatment and prevention of problematic substance use (alcohol and drugs) was the top prevention area chosen in survey responses (63%) (see next section) and was also identified a priority in the interviews. Substance use was also noted as a key barrier to accessing and maintained participation in services. Many interview respondents suggested that Thunder Bay requires adequate substance use programs across the spectrum from detox to aftercare programs.

"...improving the medical detox, we need to make that a priority... That program needs to be given a real influx of money and resources."

When discussing the connection between substance use and violence, participants noted that in many cases the substance use is severe. Many noted that substances include solvents, non-beverage alcohols and street drugs. Others commented that individuals under the influence of these substances become violent with one another one night and then will meet up with each other the following day, not even realizing/remembering what has happened.

5.7 MENTAL HEALTH

Mental health issues were identified in the online community survey, interviews and focus groups as being a significant factor related to the experience of violence. Mental health impacts following the experience of violence included anxiety and depression, fear of others and public places, fear for family, social isolation, post-traumatic stress disorder and relationship difficulties.

Mental health was highlighted not only as an impact of experiencing violence, but also as a factor contributing to violence. In both cases, accessibility to services to assist those suffering with mental health issues and impacts was identified as a significant concern among research participants.



5.8 POVERTY

Poverty was discussed in interviews and focus group interviews as one of the main reasons that individuals might find themselves in a violent situation, and/or is one of the main reasons why individuals and/or families might continue to be exposed to violence (i.e. remain in or return to an abusive relationship). Interview and focus group participants identified addressing poverty as a key area for prevention.

Poverty was also identified as a barrier to accessing services. People with little to no income often do not have access to transportation, are unable to pay for services, lack childcare, have limited access to computers, phones, and/or appropriate material resources to adequately assist them in obtaining and maintaining professional services. When basic needs such as food and shelter are not met or are met inconsistently, individuals find it challenging to access or maintain other services such as counselling or treatment.

Income is also a factor for individuals who live in substandard housing and are unable to afford other options. People resort to living on the streets, and in shelters, vehicles, and unsafe housing when there is little or no income. This is further discussed in the following section.

5.9 HOMELESSNESS

Homelessness was a theme that was identified and discussed in almost every interviews and focus groups. This was consistent across gender, age, race and/or sexual orientation. As a socio-ecological issue, homelessness is a factor that can leave one more vulnerable, and can contribute to violence. It can be a key determinant in one's continued exposure to violence and is of course linked to many other contributing factors to exposure and vulnerability to violence. The following quote offers an example of such vulnerability:

"We have in particular a high volume of women, who are essentially homeless, but they are the hidden homeless because often they are staying somewhere or entering into relationships really for the purpose of housing, that increases their victimization."

5.10 RACISM AND DISCRIMINATION

A total of 44% of online community survey respondents identified that racism and other forms of discrimination made them feel unsafe. While the details of "other forms of discrimination" are unclear in the survey responses, data from the interviews and focus groups indicate that these other forms can include discrimination based on gender, race, ethnicity, sexual orientation, age and disability.

The majority of interviewees discussed racial violence in relation to Indigenous populations, which is further discussed in the following section. It was very apparent, specifically in the data collected through the online community survey, that much work remains to be done to address racism towards the Indigenous community.

Linked to this theme, however, are additional concerns about the vulnerability of newcomers to the community (i.e. immigrants, refugees). Many immigrants, experience language barriers and other changes associated with living in a new country and are often unaware of Canadian law and their rights, which can place them in a vulnerable position.



5.11 INDIGENOUS POPULATION

Woven through many of the interviews and focus group discussions was a level of awareness of how racism continues to dominate the lived experience of many Indigenous people.

Structural violence refers to systematic ways in which social and economic structures harm or otherwise disadvantage individuals. Structural violence is subtle, often invisible, and often has no one specific person who can (or will) be held responsible (in contrast to behavioral violence).¹⁰ Colonization is by definition a form of structural violence.¹¹

We know that communities that experience inequities in the social determinants of health not only carry the additional burden of health problems, but they are often restricted from access to resources that might improve their situation.¹² This fact must be considered when developing any violence prevention initiatives.

Indigenous women were most often identified in the interviews and focus groups as the population believed to be among the most vulnerable to/at risk of experiencing violence in Thunder Bay. Issues pertaining to intergenerational trauma, partner violence, systemic racism, limited access to resources and potential language barriers were discussed as reasons why Indigenous individuals might be seen as being more vulnerable to experiencing violence. In particular, interviewees discussed the barriers of seeking out services by Indigenous people, including fear of police and involvement of child welfare agencies, structural racism, and poverty. Specifically, it was noted that Indigenous women would avoid seeking out formal support when needed because it is believed that they will not receive the support they request.

"A lot of First Nations women are told 'don't talk to police, don't call the police, it is not going to turn out well for you' and so they wind up, if there is an incident and somebody else calls police and they flee the scene they get arrested. They're definitely not going to call police again."

Another theme related to Indigenous people that emerged during the interview process was the challenges faced by Indigenous people when they leave their home communities. Participants shared that they believe that individuals and/or families might choose to leave their community to access services such as education and health care, or as a way to escape poverty, addiction or abuse; however, when they arrive in Thunder Bay, they experience culture shock, systemic barriers, possible communication barriers, no support, racism, and no family to rely on.

"There are so many people coming into this community, who may not have any connection to people at all. They want to leave their community, but they got no support once they get here."

While Indigenous women were perceived as the most vulnerable to violence, Indigenous youth, specifically youth leaving their home communities to access education in Thunder Bay, were also seen as incredibly vulnerable, and a primary focus from a prevention perspective. It was suggested that engaging Indigenous youth and celebrating the strengths of Indigenous teachings and culture would be a primary way to create a future free of violence.

It was clearly understood by some participants that Indigenous people have been profoundly impacted through the process of colonization and historical assimilation policies, and that organizations need to partner to establish programming to build identity and pride in Indigenous culture.

The following quote provides an example of focus for prevention efforts through sharing the strengths of Indigenous people:

"First of all, to get out there and to get peace with the culture that is their identity, that is who they are, the person. The First Nation person. And when they have those things, they will feel good about themselves, they will be proud of who they are. But that is not the way that we are taught when we were kids... they tried to destroy us. We were born here to be successful."

5.12 LGBTQ2S+

Another population identified by interview respondents as highly vulnerable to violence was the LGBTQ2S+ community. While there was some discussion about a change in terms of acceptance for those who identify as lesbian, gay and bisexual, many spoke to concerns of increased vulnerability for those who identify as transgender. It was thought that perhaps individuals in the community may not know if one is lesbian, gay or bi-sexual, but that someone who is visibly transitioning may be more targeted in certain circumstances in the community.

5.13 SOCIAL MEDIA & THE INCREASED USE OF DEVICES

In the last couple of decades, many individuals have formed relationships online and through social media. While the benefits of social media are many, incidents disclosed during this research project indicate that social media is increasingly becoming a medium through which one can experience and perpetrate violence. In the survey, among the individuals who noted that they experienced violence in the past 12 months, 8% identified that they had experienced 'electronic' violence, meaning they experienced violence online or through the use of a device. While this may not represent a large percentage, it is an important factor to consider as society becomes increasingly engaged in social media as a communication tool, especially with respect to youth.

5.14 MYTHS AND SOCIAL NORMS

Many of the participants in the interviews and focus groups suggested that many myths concerning violence remain, including how violence begins and why it continues. Many individuals questioned: "why does the woman stay?" versus "why do men hit?" Some of the comments provided in the interviews and focus groups also demonstrate that myths regarding violence, especially in domestic situations, still exist. The following quote is such an example:

"I'm seeing that type of domestic violence...it is an addiction...a cycle that leads to violence... it seems that you want to be abused again, over and over."



Also, the majority of programs continue to focus on victims rather than perpetrators. Although individuals noted that there is a need to let victims of violence know what resources are available and how to safely remove oneself from a violent situation, there was much discussion about the need to switch the focus to the perpetrator and increase accountability, ask questions that promote responsibility, and provide skills to effectively manage emotions.

"We have seen a lot of campaigns around young women, how to keep yourself safe, basically around how not to put yourself into vulnerable situations where you are going to be at risk... but there are others that focus on the reverse, and it's the ones around teaching boys predominantly again... that this isn't the way we view young women."

5.15 YOUTH AS AN AGENT OF CHANGE

Survey, interview and focus group data identify youth as a key target audience for violence prevention education. Suggestions include focusing on youth as a way to mitigate intergenerational violence, teaching youth about healthy relationships and how to manage emotions. This could be seen as a top priority for violence prevention, as it was supported consistently in the data.

"We have to think about children and youth in the preventative piece. We need to find ways to give them a good start, give them those good life skills, about what is appropriate and what is not, what feels good and what doesn't and what to do when they are in pain."



5.16 JUSTICE SYSTEM/COURT PROCESS

Community members and service providers who participated in this research project, and who are involved with domestic violence work offered a consistent opinion that the current legal process is falling short for victims. While many acknowledged the success of the bail safety program, there were also many others who shared examples where the system fell short, leaving the individual who is experiencing violence vulnerable to ongoing abuse and threat of loss of life. The following quote outlines the seriousness of the concern:

"If a woman gets a restraining order, and someone breaches it and the police do not show up instantly she could be dead. And everybody knows that. And everybody knows that if he wants to kill you, if he wants to break down – and even the police will say that, if he wants to get you, he will. And so that is one of the reasons why women don't buy into the system, because what is the point, it will just make him madder."

Interviewees offered many similar statements, indicating that something different needs to happen. Many service providers offered statistics and noted that Thunder Bay in particular holds one of the highest rates for domestic violence in Canada, indicating that alternatives to traditional responses need to be sought.

"We need a way for the system to hold perpetrators accountable. That's just such a repetitive thing that I will always keep saying until something changes... we need a court system that understands the dynamics of domestic violence and enhances the safety of women and children."

5.17 CHILD WELFARE SYSTEM

Perhaps one of the most compelling themes that emerged from the data relates to concerns regarding the child welfare system. Fear of child welfare and apprehension of children was repeatedly identified as a serious concern, believed to be one of the key barriers to reporting violence, particularly domestic violence. It was acknowledged that children need protection in homes where violence occurs, and it appears that families rarely see the child welfare system as a resource or source of support.



Prevention

Over many decades, service providers, agencies and advocates in our community have worked to create programs, services and policies to address and effectively respond to violence after it has happened. However, with all of this work, rates of violence, particularly violence against women and violent crime in Thunder Bay remain among the highest in Canada.^{13, 14} It is well documented that cities with well-coordinated, collaborative violence prevention efforts have reduced violence.^{15, 16, 17} With a violence prevention goal in mind, and to stem the levels of increasing violence, coordinated efforts now need to focus on opportunities to stop violence before it starts. This means adopting a prevention strategy with a focus on best practices in our community.

Prevention is a systematic process that promotes safe and healthy environments and behaviors, reducing the likelihood or frequency of an incident, injury, or condition occurring.¹⁸ Violence prevention specifically refers to efforts intended to stop the perpetration of unhealthy, harmful, dangerous, and illegal behaviour and acts, as well as victimization and re-victimization by others.

Recommendations for prevention strategies are based on information taken from both the qualitative and quantitative data provided through the interviews, focus groups and online survey.

Primary prevention happens before violence has occurred to prevent first time victimization or perpetration. Primary prevention activities can work with intervention strategies that are already in place in community-based programs and services. Examples of primary violence prevention are education and awareness, increasing social connectedness, parenting skills and economic development.

Secondary prevention focusses on interventions and immediate responses to deal with short-term solutions for survivors and perpetrators. This level is meant to prevent further harm and to stop violence from happening again. It also identifies those who are at risk. Secondary prevention activities can include shelter services, street outreach, counselling, legal and medical advocacy, safety planning, arrest and protection orders.

Tertiary prevention addresses ongoing support to survivors and ongoing accountability and rehabilitation for perpetrators. It also involves long term interventions to prevent reoccurrence of the situations and behaviors that cause harm and it also tends to be the most costly form of prevention. Examples would be restorative justice, decreasing recidivism, addressing mental health challenges and treatment of problematic substance use.

Many of the recommendations stemming from this initiative are interconnected and offer a starting point for decision makers to prioritize actions and to elicit further information and support from the community to prevent violence.

According to the Together We Can End Violence Survey, the top ten interventions that were believed to have the greatest impact on reducing harm from violence and/or abuse in our community include:

- **TREATMENT AND PREVENTION OF PROBLEMATIC SUBSTANCE USE (INCLUDING ALCOHOL AND DRUGS) (63%)**
- **POVERTY REDUCTION (55%)**
- **SAFE, AFFORDABLE HOUSING (50%)**
- **CHANGES TO THE JUSTICE SYSTEM (48%)**
- **SKILL BUILDING FOR YOUTH (I.E. CONSENT, RESILIENCY, HEALTHY RELATIONSHIPS) (47%)**
- **NEIGHBOURHOOD SAFETY PROGRAMS (47%)**
- **SERVICES FOR WOMEN (I.E. MORE SHELTER BEDS, PROGRAMS) (36%)**
- **COMMUNITY EDUCATION AND AWARENESS OF VIOLENCE (32%)**
- **IMPROVED RESPONSE AND SERVICES TO PROTECT CHILDREN (29%)**
- **ANTI-RACISM PROGRAMS (28%)**

Recommendations

The recommendations provided below are for further consideration in the development of a violence prevention strategy. They are a combination of suggestions from the research participants, and the community partners. The literature on best and promising practice in violence prevention will need to be considered carefully for the context in Thunder Bay, and to help determine appropriate priorities.

6.1.1 ADDRESS PROBLEMATIC SUBSTANCE USE TO PREVENT VIOLENCE

Based on the survey data, 63% of respondents felt that addressing problematic substance use was the most important intervention to prevent violence in our community. It is critical to understand the complex relationship between substance use (including alcohol) and violence. Research has put forth three models that attempt to explain the drug-violence link¹⁹:

One such model identifies the psychopharmacological link to violence or criminal behaviour. It posits that the effects of certain substances on the individual using them impacts behaviour, and research suggests that substances such as alcohol, cocaine, amphetamines, and barbiturates are more strongly linked to violence.

A second model identifies the relationship between the cost of substance use and criminal behaviours. It suggests that in order to support one's drug habit, people may commit crimes such as theft, robbery, break and enter, to obtain money to pay for the substance of choice.

The third model suggests that the illegal nature of the drug world is the driving force on criminal behaviour. Violence related to the production and sale of drugs, such as turf wars, are implicated by this theory.

In order to effectively mitigate the complex relationship between substance use and violence, interventions targeting each of these models should be considered as a component of prevention efforts. It is important to note that most people who use drugs illegally will never become regular users, and even fewer will develop an addiction.

Also many people who use drugs illegally will commit no other crimes, and many people who commit crimes, including violence, never use illegal drugs.

- Address problematic alcohol use in the community, including improved supports for those who use non-beverage alcohol
- Develop and enhance early intervention/prevention programming for young people to prevent or delay the onset of substance use
- Promote policies and programs that improve the safety of drinking environments
- Ensure the continuum of treatment and aftercare services for problematic substance use meets the needs of the community



6.1.2 ADDRESS THE SOCIAL DETERMINANTS OF HEALTH (SDOH) TO PREVENT VIOLENCE

Preventing violence is believed to be most effective when the multiple risk factors associated with violence are addressed, including poverty, unemployment, housing and problematic substance use. Poverty reduction and safe, affordable housing were listed as the second and third most important interventions by survey participants to prevent violence. Many of the social determinants were also mentioned in the interview and focus groups as being closely related to violence, and increasing one's vulnerability to experiencing violence. Increasing advocacy to have basic needs met and improve the conditions and environments in which people are born, live, play and work were themes that resonated throughout the community and stakeholder feedback.

- Advocate for initiatives focused on minimizing the effects of poverty, social isolation, food insecurity, lack of adequate housing, addictions, gender inequality, and racism
- Advocate for safe and affordable housing
- Increase services for women, specifically around programs and the number of shelter beds available (and access to them)

6.1.3 IMPROVE EDUCATION AND AWARENESS

Thirty-two percent of survey respondents identified education and awareness as a top priority for violence prevention. Seventeen percent of the comments in the "Other" option for prevention interventions were also education-focused. The need for more education about violence and violence prevention also figured prominently in the interviews and focus groups. Education for the general community was mentioned, as well as education for specific groups. Education as a primary prevention activity was mentioned as promising for the general community, and for youth specifically.

- Establish a violence prevention education program that targets youth and the development of skills and strategies for healthy relationships. This should include a focus on regulating one's emotions, learning skills to cope, deal with stress, frustration and anger and how to respond to challenges in a healthy way rather than harming oneself or others
- Shift education away from victims and toward the perpetrator, with an emphasis on responsibility, proactive messages and strength-based alternatives to violence, including a safety plan for the perpetrator to stop the violence before it starts
- Develop and implement cultural and Indigenous teachings. Working together to incorporate Indigenous knowledge and holistic healing is an approach among Indigenous and non-Indigenous organizations that can reduce violence and is a vital opportunity for Thunder Bay to move forward
- Parenting programs were identified by 25% of survey respondents as important violence prevention interventions. Programs like Triple P Parenting and other evidence-based parenting programs should be continued and expanding where possible
- Encourage local service providers to become educated on the impacts of trauma and to develop trauma-informed skills to appropriately respond to someone who has experienced violence
- Develop sensitivity training and cultural safety training for both staff and the community at large, including youth in schools

- Create and deliver an anti-violence campaign that considers a community approach to addressing violence. Many participants in both the interviews and survey noted that police can only do so much to prevent violence, but that the community as a whole can work together to create a safe environment for everyone. Engagement and partnerships with the local school boards were seen as integral in the implementation and promotion of anti-violence education
- Inform and better prepare newcomers for life in our city by providing education on the laws and their rights as a Canadian and services available
- Create a 'nobody gets hurt' day-seek support by the City in a declaration
- Deliver violence prevention information and other information about available services as flyers in mailboxes, hang posters on boards in community stores, food banks and other locations where vulnerable individuals may see them

6.1.4 STRENGTHEN NEIGHBOURHOODS TO REDUCE VIOLENCE

The development and implementation of programs and/or activities to support safe neighbourhoods was a key violence prevention theme. The focus should be on activities to enhance quality of life for individuals at the neighbourhood level. When people do not feel safe in their neighbourhoods, it impacts the health and well-being of those who live there, as community members are less likely to use local parks, access public transportation, walk to the grocery store, or let their children play outside. Comments in the survey focused on engaging the community and getting to know those in your neighbourhood, as well as offering community gatherings for both the youth and the elderly. Additionally, in the focus groups and interviews, participants mentioned frequently that social isolation and a lack of sense of community are risk factors for violence.

- Investigate, support and promote effective programs found in other communities that increase neighbourhood safety



- Explore the feasibility of developing a comprehensive neighbourhood strategy. Look at the Toronto Neighbourhood Strategy, which uses Urban HEART, a Health Equity Assessment and Response Tool to address health and social inequities
- Promote neighbourhood hubs, where people can get to know each other and access service providers. Free social and recreational programming for youth in the evening and weekends should be included
- Explore the development of a neighbourhood post traumatic incident protocol, such as the ones developed for Toronto and Ottawa, as a way to respond to traumatic events at the neighbourhood level and to build community resiliency
- Promote greater neighbourhood involvement in the Thunder Bay Police Service Zone Watch Program

6.1.5 DISRUPT RACISM

Colonial assimilation policies have kept Indigenous people at a social, economic and political disadvantage, which has resulted in unequal access to resources and power, and significant disparities in health status, income, employment, and educational attainment. These disparities increase Indigenous peoples' exposure and vulnerability to both systemic and interpersonal violence.

There is a need to address both interpersonal and systemic racism. Cultural sensitivity training and culturally appropriate programming were identified as important ways to better educate employees and the broader community to end racism. It was identified that much more needs to be done to end the perpetuation of stereotypes, racist ideologies, and structural violence that reproduces social and economic disparities for Indigenous people.

- Seek out opportunities to discuss racism and the harms caused by colonization openly and honestly, and to use whatever power we (individually and as a community) have to disrupt racism

6.1.6 INCREASE COORDINATION AMONG SERVICE PROVIDERS

While coordination among service providers was seen as improving in recent past years, many expressed that there was still room for improvement. In particular, there was a concern about the amount of time, cost and energy required by one person to navigate the system and/or to find out what services might be available. Information about material resources, such as income supports and counselling programs, appear to be difficult to access, especially for the most marginalized and at-risk/vulnerable populations. Both service providers and citizens made reference to the need for drop-in, one-stop, locations where people can access services and make referrals and/or applications where necessary.

- Research successful integrated service delivery (i.e. community hub model/one-stop shop for services) and explore opportunities to implement a similar service in Thunder Bay
- Work with system partners and provide leadership where possible to endorse a more coordinated response throughout the domestic violence system, from reporting through to legal process and follow-up service
- Identify ways to reduce barriers to reporting violence to police
- Identify ways to reduce barriers for perpetrators to access and maintain participation in services

6.1.7 DEVELOP AND DELIVER A CAMPAIGN IN NEIGHBOURHOODS TO INFORM INDIVIDUALS OF SERVICES

Linked to the above recommendation is the need to find creative ways to inform people about the services available to those experiencing violence, or at high risk of experiencing violence. Participants identified the need to go beyond the use of social media, which they believe has become the norm. There was a recommendation to use more traditional means of sharing information and promoting programs and services such as brochures, canvassing in neighbourhoods, and holding community meetings. Develop with community partners a campaign aimed at minimizing the negative perception of service providers.

- Create a campaign that focusses on the benefits of certain programs and services such as the child welfare system, police and other crisis services, with the goal of increasing comfort in accessing services and promoting services as important resources versus barriers, specifically in circumstances involving domestic violence
- Improve access to income supports and counselling programs, and support the creation of more programs to address mental health and problematic substance use, especially for the most marginalized and at-risk populations
- Identify opportunities to raise awareness about services available in the community, specifically for individuals who are at high risk for experiencing violence. This can include improved communication and advertising/promotion of services and creative campaigns

6.1.8 CREATE SERVICES THAT ADDRESS A HOLISTIC AND WHOLE FAMILY APPROACH

Twenty-nine percent of survey respondents identified improved services and responses to support children as an important intervention to reduce violence. It was suggested that coordination of services that address the needs of the whole family, especially in situations of domestic violence, was needed. A more holistic approach was suggested repeatedly.

- Assess the gaps relative to family shelters, and explore the need for one in Thunder Bay
- Assess the gaps relative to men's needs, and advocate for better services for men, including services such as a shelter for men with children



6.1.9 ADVOCATE FOR CHANGES TO THE JUSTICE SYSTEM AND VIOLENCE PREVENTION

As noted in the findings section, both survey responses and qualitative interviews support prevention activities related to a review of concerns of involvement within the legal/justice process and to advocate for change in this area. Positive changes could lead to significant secondary and tertiary prevention gains.

- Advocate for changes in the justice system. As noted in the findings section, forty-eight percent of survey respondents identified changes to the justice system as an important intervention to reduce violence. Interview data also supports prevention activities related to a review of concerns of involvement in the legal/justice process and advocacy for change in this area.
- Research effective/evidence-informed interventions for perpetrators

- Promote life skills for perpetrators of violence and help them to deal with anger. The goal is to aid perpetrators to be accountable for their actions with an emphasis on responsibility and proactive messages, including a safety plan for the perpetrator to stop the violence before it starts
- Investigate potential high-risk situations where violence is more likely to occur, escalate and/or reoccur, and develop community harm reduction strategies to address these situations

6.1.10 PRIORITIZE EFFORTS THAT ADDRESS GENDERED AND RACIALIZED VIOLENCE

Violence against women was identified as a significant issue in Thunder Bay by research participants, and we have the statistics to support this. Violence against racialized women and, specifically, Indigenous women, needs to be prioritized. Indigenous women are killed at six times the rate of non-Indigenous women.²⁰

- Educate the community to deepen the understanding about gendered and racialized violence
- Support efforts to address Missing & Murdered Indigenous Women and Girls, including raising awareness about the connection between Canada's colonial history and the increased vulnerability of Indigenous women and girls

Conclusion

The TBDHU, Crime Prevention Thunder Bay and Thunder Bay Drug Strategy partnered together as a result of feedback from community groups and individuals regarding ongoing and unresolved issues pertaining to violence in Thunder Bay. The information in this report is a summary of data gathered from community members and service providers who shared their thoughts and perspectives regarding their experience of violence in Thunder Bay. The report provides recommendations for primary, secondary and tertiary violence prevention activities and strategies as a first step towards exploring a violence prevention strategy for Thunder Bay.

There is no single cause that accounts for violence, therefore dedication to all levels of prevention is required. Some of the suggested interventions require great systemic change; however, progress can be made as demonstrated by successes and promising practices from other communities. Prevention will mean changing social norms that allows violence to thrive, improving the well-being of individuals and families, ensuring basic needs are met, coordinating services and improving responses from service and program providers and the justice system.

Given the social context in Thunder Bay, effective violence prevention strategies will also require that we look closely at the impacts of colonization, including racism and social exclusion, and systemic vulnerabilities; those systems that disproportionately increase the vulnerability of some groups to violence and at the same time reduce their agency and capacity to access appropriate supports.

While prevention efforts typically take years before measured change can be realized, the recommendations offered here provide a base from which to explore, develop and implement efforts to prevent and reduce the harms from violence in Thunder Bay.



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