



Honouring Our Relations

A Family Violence Prevention Resource Manual for Community Workers Supporting Indigenous Peoples in Montreal



The Indigenous Health Centre of Tiohtià:ke

The Indigenous Health Centre of Tiohtià:ke (IHCT) offers low barrier health services to Indigenous community members residing in or visiting Tiohtià:ke (Montreal). The IHCT seeks to improve the health outcomes, quality of life, and social determinants of health of Indigenous people in Montreal through a culturally competent, wholistic¹ health service delivery model that is accessible to all. The IHCT's services and programs are designed to prioritize quality and continuity of care.

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Contributors: This project is grounded in the guidance, knowledge, and lived experience of Elders, Indigenous community members, staff at IHCT, and partner organizations in Montreal.

This manual is intended to provide a general understanding of the roots and contemporary context of family violence within Indigenous communities in Canada, with a focus on the Greater Montreal Area. It offers general advice and recommendations for service providers in Montreal working with Indigenous community members at risk of, or who have experienced, family violence.

Everyone is responsible for using their best judgement to determine how to respond to individual situations of family violence.

Content Warning: Some of the content in this document may be distressing or triggering. Certain sections mention topics related to colonization and intergenerational trauma, systemic discrimination and violence, and sexual assault.

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¹ "The term wholistic is more inclusive of Indigenous ways of knowing, understanding, being, and doing. This includes being more reflective of the coming together of the four elements in life encompassing the physical, spiritual, emotional, and mental elements of wellbeing as reflected in the Medicine Wheel."

For more, see: Rosalin M. Miles et al., "Wholistic versus Holistic: Words Matter for Indigenous Peoples," *The Health & Fitness Journal of Canada* 16, no. 3 (2023): 3-7, <https://doi.org/10.14288/hfjc.v16i3.830>.



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Before We Begin...

An important note for people accessing this resource manual:

Working in the field of family and community support, particularly in relation to family violence, requires care, humility, and ongoing self-reflection. Personal experiences such as upbringing, education, culture, community values, and professional training may shape how we understand violence, safety, and healing. These experiences can influence how we receive information and how we support individuals and families affected by violence.

Before engaging with this manual, readers are encouraged to pause and reflect on their own perspectives and readiness to engage with this topic. Some questions to consider include:

- How open am I to learning about family violence and its impacts in Indigenous communities?
- Do I hold personal beliefs, assumptions, or experiences that may affect how I respond to someone experiencing family violence?
- Am I prepared to approach this issue in a non-judgmental, culturally respectful, and community-centered way?
- Do I know how to care for my own well-being when engaging with difficult and potentially distressing material?

Engaging in honest self-reflection is a strength, not a limitation. It supports more thoughtful learning, safer service delivery, and more respectful relationships with the individuals, families, and communities that this manual is intended to support.



Why This Work Matters

Addressing and preventing family violence in Indigenous communities requires approaches that are culturally grounded, community-informed, and reflective of the distinct realities of First Nations, Inuit, and Métis peoples. Experiences of violence are shaped by ongoing colonial legacies, systemic inequities, and structural barriers that affect access to safety, housing, healthcare, and culturally appropriate supports.

Effective prevention and response must be developed in partnership with Indigenous communities and include the leadership of Elders, Knowledge Keepers, survivors, and frontline workers. Community experience and research indicate that intimate partner violence, child maltreatment, and intergenerational trauma are often interconnected, and responses are most effective when they address these forms of harm holistically rather than as separate issues.

Awareness initiatives are important but must be accompanied by accessible, culturally safe services, immediate crisis supports, and long-term, trauma-informed healing options. Strengthening the capacity of frontline workers, organizations, and community networks enhances early intervention, improves safety planning, and supports sustained healing. These efforts contribute not only to violence prevention, but also to long-term community wellness and reconciliation-oriented practice.





Project Overview

This manual was developed by the Indigenous Health Centre of Tiohtià:ke (IHCT). Its purpose is to increase awareness and understanding of family violence, to support the responsible transmission of this knowledge, and to guide organizations and community workers who may wish to develop or strengthen family violence awareness and prevention initiatives.

While many examples and references included in this manual are drawn from programs and services in the Greater Montreal Area, the information and approaches presented are intended to be useful across different regions and community contexts. Readers are encouraged to adapt the knowledge in ways that respect local realities, resources, and cultural frameworks.

Family Violence (FV) is a significant public health, human rights, and social issue in the lands we now call Canada. It is “dreadful” and “dehumanizing”² and refers to behaviours that cause physical, psychological, sexual, emotional, or financial harm, including:

- Physical abuse
- Psychological or emotional abuse
- Sexual violence
- Financial control
- Coercion and intimidation
- Harassment and stalking

It can occur in married, common-law, dating, same-sex, or casual relationships, as well as within families (e.g., between parents and children, siblings, or extended family members) and intergenerational relationships. Family violence affects people of all genders, ages, sexual orientations, cultural backgrounds, and socioeconomic situations. In Indigenous communities, family and gender-based violence intersect with ongoing cycles of violence and resulting harm, such as the national crisis of Missing and Murdered Indigenous Women, Girls, Trans, and 2-Spirit (MMIWG2S+), underscoring the urgency and gravity of the issue.

This manual is primarily focused on awareness, prevention, and support. Direct intervention in situations of family violence is a specialized and high-risk area of practice and should only be undertaken by trained professionals. Improperly handled responses can unintentionally escalate danger and place survivors, families, and staff at increased risk of harm. At the same time, frontline workers and community members may encounter situations where some level of response is necessary. For that reason, the manual provides guidance on safe, trauma- and violence-informed approaches, including recognizing warning signs, responding in supportive ways, and making appropriate referrals.

A Resource and Support Network is included in this manual to help readers identify Indigenous and mainstream services that may assist individuals and families experiencing violence. Not all agencies provide specialized family violence programming; however, they may offer essential supports such as childcare, transportation assistance, clothing, food, or other practical services that can contribute to safety and stability. Readers are encouraged to conduct their own research to understand what each organization offers before making referrals.

² Neil Andersson and Amy Nahwegahbow, “Family Violence and the Need for Prevention Research in First Nations, Inuit, and Métis Communities,” *Pimatisiwin* 8, no. 2 (2010): 9–33.

What This Manual Does and Does Not Do

Again, this manual is not intended to make the reader an expert in family violence, nor does it instruct individuals to intervene in suspected situations of abuse. Rather, it serves as an introductory and awareness-building resource. Its goal is to help readers better understand the nature of family violence, its root causes, and the broader social and historical contexts that shape its presence in Indigenous communities.

The manual also provides foundational guidance for organizations and community groups interested in developing family violence awareness or prevention programs. It highlights pathways for further learning, training, and collaboration so that readers can strengthen their capacity to respond supportively and responsibly within their respective roles.

Ultimately, as an introductory resource intended to strengthen awareness and guide safe referral practices, this manual aims to:

- Increase awareness of the seriousness and complexity of family violence
- Encourage culturally grounded and community-centered approaches
- Support prevention and early awareness efforts
- Promote safe and appropriate referrals to trained services and supports
- Open dialogue, deepen understanding, and contribute to collective efforts to reduce family violence





Understanding Family Violence in Context

Multiple terms are used to describe violence within relationships, including “family violence,” “intimate partner violence,” and “gender-based violence” (see Appendix B and Appendix C). In many Indigenous contexts, practitioners intentionally use the term “family violence” because it reflects a broader understanding of harm as experienced not only between intimate partners, but across families and communities. This terminology recognizes that violence is rarely isolated and often occurs within wider social, historical, and relational contexts.³

Family violence can affect anyone regardless of age, gender, socioeconomic background, race, or family structure. However, some groups face heightened risk, including women, Indigenous peoples⁴, persons with disabilities, and individuals who identify as 2SLGBTQIA+. ⁵ Recognizing both the universality of violence and its disproportionate impacts is essential for an accurate and ethical understanding of risk and response.

Although family violence is most often associated with violence against women and children, men can also experience family violence. Many men face barriers to seeking support, including stigma, shame, and the perception that men are typically perpetrators rather than victims. As a result, violence against men is often underreported and their needs may go unrecognized. For First Nations, Inuit, and Métis men, experiences of family violence are also shaped by the broader impacts of colonialism, including the disruption of traditional gender roles, harmful stereotypes, and systemic discrimination.

While many services appropriately focus on supporting women and children, there remains a need for greater recognition of men and boys’ experiences and for culturally grounded supports designed to address their needs.⁶ It is critical to believe men and boys who are victims and provide them with culturally relevant supports.

Within Indigenous frameworks, family violence is understood through an approach that is wholistic, relational, and historically grounded. Rather than focusing solely on individual incidents, this perspective considers the broader conditions that shape experiences of violence, healing, and well-being. In practice, Indigenous shelter networks and frontline workers often draw on multiple intervention models—such as ecological, feminist, and trauma-informed approaches—while grounding their work in Indigenous cultural values, community knowledge, and lived realities.⁷



3 Fraser Mustard Institute for Human Development, “Interventions for the Prevention of Family Violence in Indigenous Populations” (2022), <https://socialwork.utoronto.ca/wp-content/uploads/2022/08/Policy-Brief-Family-Violence-Jan19-reduced.pdf>, 5.

4 Although this manual uses the term “Indigenous” as a collective term, it is important to recognize that Indigenous peoples in Canada are not a homogeneous group. They represent diverse Nations with distinct histories, languages, cultural practices, governance systems, and spiritual traditions. Any discussion of family violence must therefore be attentive to local and cultural specificity.
For more, see: Fraser Mustard Institute, “Interventions for the Prevention of Family Violence,” 2.

5 FAQ (Quebec Native Women Inc.), The Aboriginal Approach to Family Violence (2022), <https://faq-qnw.org/wp-content/uploads/2022/01/The-Aboriginal-Approach-to-Family-Violence.pdf>, 4.

6 The need for expanded services for Indigenous men in the Montréal area was consistently highlighted during community meetings held by IHCT with Elders, intervention workers, crisis responders, and other community leaders and staff. These discussions aimed to better understand the current service landscape and identify ways to both respond to and prevent family violence, including by breaking cycles of violence.

For more, see: The Task Group on Mental Wellness, “Family Violence Prevention” (2023), https://fpwc.ca/wp-content/uploads/2024/02/NPH-Family-Violence-Prevention-Report_EN_FinalDigitalLow-res.pdf, 6.

7 FAQ, Aboriginal Approach to Family Violence, 4.



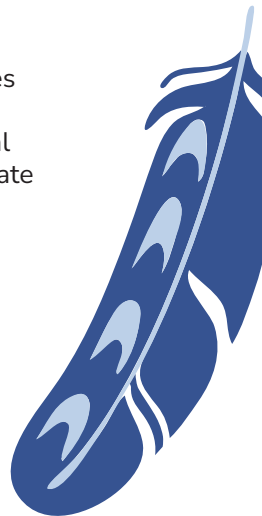
The Aboriginal Approach to Family Violence draws on these influences, yet is grounded in a distinct and specific context: the history of colonization and the ongoing struggle of Indigenous peoples to regain control over their development and future. While it may share similarities with other intervention models, it differs fundamentally because it begins from the lived historical and contemporary realities of Indigenous communities.⁸

This approach is rooted in the historical and ongoing impacts of colonization, which fundamentally disrupted Indigenous family systems, governance structures, and cultural continuity. Colonization involved the domination of Indigenous lands and peoples and the rapid imposition of foreign political, social, and economic systems. Over a relatively short period, longstanding social structures that had developed over millennia were destabilized through:

- Forced displacement from traditional lands
- Suppression of languages and spiritual practices
- Imposition of patriarchal governance systems
- Family separation through residential schools and child welfare systems
- Rapid settlement and loss of land-based livelihoods

Colonial policies, including the Indian Act, were explicitly designed to control and assimilate First Nations peoples while eroding distinct identities, governance systems, and community autonomy. For Inuit communities in particular, the widespread slaughter of qimmiit (sled dogs)—which were essential for transportation, hunting, safety, and land-based living—severely restricted access to the land and contributed to forced settlement.⁹ These rapid and externally imposed changes produced profound cultural, social, and economic upheaval within a single century.¹⁰

Residential schools and other assimilationist institutions further disrupted family structures and parenting knowledge. Children were forcibly separated from their parents and communities and denied opportunities to observe healthy caregiving relationships, cultural teachings, and attachment models. As a result, many survivors were left without appropriate models for parenting, contributing to intergenerational disruptions in family relationships, caregiving practices, and emotional well-being.¹¹

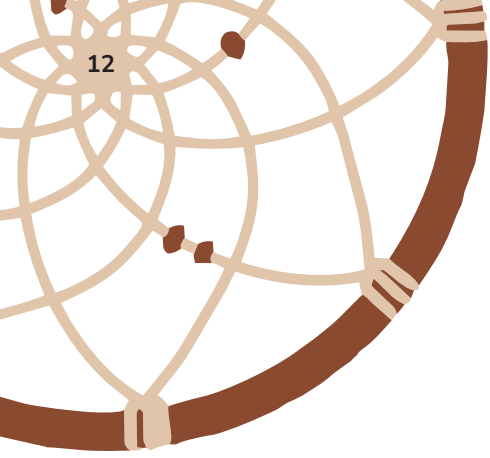


⁸ Ibid., 5.

⁹ Government of Canada, "Government of Canada's apology for the Nunavik Dog Slaughter," accessed February 27, 2026, <https://www.rcaanc-cirnac.gc.ca/eng/1732300419996/1732300456676>.

¹⁰ FAQ, Aboriginal Approach to Family Violence, 8–10.

¹¹ "Separated from their parents, residential school survivors had weak or inappropriate models for parenting; many of the 'stolen generation' themselves never learned important parenting skills." See: Andersson and Nahwegahbow, "Family Violence," 9–33.



Research and community experience indicate that the effects of these disruptions continue across generations. Intergenerational trauma, loss of cultural continuity, systemic racism, and ongoing structural inequities have contributed to cycles of violence, mental health challenges, and social marginalization in some communities.

Indigenous practitioners frequently emphasize that family violence is interconnected with broader social issues, including addiction, suicide, housing instability, and normalized experiences of violence, all of which share common roots in dispossession, powerlessness, and historical trauma.

At the same time, any effective approach must acknowledge complexity and resilience. While religious institutions were historically involved in systems of assimilation and gendered control, for example, many Indigenous peoples continue to draw strength from spiritual and cultural beliefs. Culturally safe practice therefore requires respecting each person's worldview, choices, and sources of strength within their own cultural and spiritual framework.

By situating family violence within its broader historical, cultural, and structural context, this manual affirms that effective responses must extend beyond individual-level interventions. Meaningful prevention and support require culturally grounded, community-informed, and trauma-aware approaches that address both immediate safety and long-term healing. Grounded in self-determination, respect, and wholistic well-being, this perspective seeks not only to reduce violence, but to support the restoration of family strength, cultural continuity, and community wellness.



Connections Between Violence and Homelessness

Indigenous peoples in Canada experience homelessness at disproportionately high rates, reflecting the ongoing effects of colonial policies and systemic marginalization. While Indigenous peoples make up roughly 5% of the national population, they represent over 30% of people experiencing homelessness—a stark indication of structural inequities and historical dispossession.¹²

Prior to colonization, Indigenous communities maintained sophisticated systems of governance, land stewardship, and family organization that supported collective well-being. Colonial policies disrupted these systems and contributed to housing conditions that continue to affect many Indigenous communities today. Generations of underinvestment, imposed governance structures, and ongoing systemic racism within social service systems have resulted in housing shortages, overcrowding, and inadequate housing infrastructure in many First Nations, Inuit, and Métis communities. In some cases, homes require significant repairs or contain environmental hazards such as mould – conditions that contribute to serious physical and mental health consequences. Safe, affordable, and adequate housing is widely recognized as a fundamental social determinant of health and a basic human right; however, many Indigenous families continue to face barriers in accessing such housing.¹³

These policy failures and resulting housing challenges often contribute to migration from rural or remote communities to urban centres in search of housing, employment, or services. Yet Indigenous people in urban areas frequently encounter additional barriers, including discrimination in rental markets and a lack of culturally appropriate housing supports, increasing the risk of housing instability and homelessness.¹⁴

Violence is the leading cause of homelessness for Indigenous women in Canada. Indigenous women are nearly three times more likely than their non-Indigenous counterparts to experience violent victimization—including sexual and physical assault, robbery with a weapon, or threats of violence—whether by strangers, acquaintances, or within intimate relationships. Abuse in the home has been a primary driver for young women experiencing homelessness, with 61% citing such experiences as the reason they ended up on the streets.¹⁵

Precarious housing conditions further increase Indigenous women's vulnerability to violence, exploitation, and trafficking. These conditions are linked to the MMIWG2S+ crisis, and they often push individuals migrating to urban centres into unsafe environments where intersecting race, class, and gender discrimination exacerbates their risk.¹⁶

Systemic barriers—including limited access to education, employment, safe housing, and culturally appropriate healthcare—compound the cycle of poverty and violence, leaving many Indigenous women and gender-diverse individuals with few options to escape unsafe situations. Homelessness not only endangers these individuals but also places their children at risk of apprehension by child welfare authorities. In some cases, individuals remain in abusive situations to maintain custody of their children, highlighting the complex interplay between structural oppression, poverty, and family violence.¹⁷

12 Homeless Hub, "Indigenous Peoples," accessed March 1, 2026, <https://homelesshub.ca/collection/population-groups/indigenous-peoples/>.

13 House of Commons, Standing Committee on Indigenous and Northern Affairs, The Effects of the Housing Shortage on Indigenous Peoples in Canada, 44th Parliament, 1st sess. (Ottawa: House of Commons, June 2022), <https://www.ourcommons.ca/Content/Committee/441/INAN/Reports/RP11862143/inanrp03/inanrp03-e.pdf>, 9.

14 Ibid., 1.

15 GBV Learning Network, "Issue 25: Indigenous Women, Intimate Partner Violence, and Housing," accessed March 1, 2026, https://www.gbvlearningnetwork.ca/our-work/issuebased_newsletters/Issue-25/index.html.

16 Ibid.

17 Ibid.

Cabot Square: Homelessness and Sex Trafficking

Cabot Square, located in downtown Montreal, is a park that regularly serves as a hub for people who are precariously housed, many of whom are Indigenous. A large portion of the people present in Cabot Square use drugs and/or are involved in sex trafficking.¹⁸ Reports from intervention workers across the city have found that traffickers routinely target Indigenous women and girls, approaching them under the guise of romantic interest or friendship to conceal their intentions.¹⁹

Many individuals exploited through sex trafficking have their cellphones or identification taken away and are encouraged to use drugs before being coerced into sex trafficking to repay a growing “debt” related to drug use. This often begins a vicious cycle. To keep individuals trapped in this loop, some traffickers in Cabot Square—and elsewhere—have been known to coerce victims into using drugs early in the morning to maintain both psychological dependence and an indefinite state of debt.

Mediators and intervention workers from various community organizations regularly conduct outreach in Cabot Square. While these services are helpful for connecting with the community and providing key referrals or system navigation, there are limits to these types of responsive, “band-aid” interventions.

Much of what makes people vulnerable to exploitation begins long before they arrive at places like Cabot Square. Factors such as child-welfare removals, lack of housing and healthcare in some Indigenous communities, limited addiction services or safe supply in Quebec, and systemic racism create conditions that traffickers know how to exploit. As one frontline worker noted, trafficking does not happen in a vacuum; it occurs where systems have already failed people.²⁰

¹⁸ Canadian Centre to End Human Trafficking, “At Cabot Square, Presence Is the Intervention,” December 16, 2025, <https://ccteht.ca/at-cabot-square-presence-is-the-intervention/>.

¹⁹ CBC News, “Missing and Murdered Indigenous Women remembered in Montreal march,” CBC News, October 5, 2025, <https://www.cbc.ca/news/canada/montreal/missing-and-murdered-indigenous-women-montreal-1.7651555>

²⁰ Canadian Centre to End Human Trafficking, “At Cabot Square.”





Cabot Square is also a site of remembrance and resistance. It regularly hosts marches honouring the lives of Missing and Murdered Indigenous Women, Girls, and 2-Spirit people (MMIWG2S+).²¹ The realities visible in Cabot Square illustrate the deep connections between family violence, systemic vulnerability, and the ongoing MMIWG2S+ crisis. Other locations across Montreal, including certain hotels, airports, and bus terminals, are also known hubs connected to trafficking networks.

These realities must also be understood within a broader context. A lack of government-funded services and resources in many communities contributes to migration to urban centres such as Montreal. The colonial context has contributed to overcrowded housing in many communities, particularly putting women and children at risk and forcing individuals to flee their homes and communities.²²

For more information, please contact the Cabot Square Project, by the Native Women's Shelter of Montreal. (See Resources and Support Network.)

²¹ Zachary Cheung, "Community memorial honours unhoused Indigenous lives at Montreal's Cabot Square," CityNews Montréal, November 28, 2025, <https://montreal.citynews.ca/2025/11/28/community-memorial-unhoused-indigenous-lives/>.

²² House of Commons, The Effects of the Housing Shortage on Indigenous Peoples in Canada, 20.



Overcrowded Housing and Family Violence

The housing needs in Inuit communities are the highest amongst all populations in Canada, with 40% of Inuit living in overcrowded housing compared with 6% of the overall Canadian population.²³ More than 25% of First Nations households in Canada experience overcrowded housing – a rate nearly seven times higher than non-Indigenous households.²⁴

In places such as Nunavik (northern Quebec), overcrowded housing has long been documented as a major stressor that can contribute to family violence and the need to escape unsafe environments. As a result, many women travel to Montreal seeking safety and support. However, this influx places immense pressure on already limited services, and access to safe, stable housing remains a significant challenge. Experiences of family violence may also persist in new forms within urban contexts.²⁵

Many individuals ultimately attempt to seek refuge in places such as the Native Women's Shelter of Montreal or other emergency shelters; however, the demand for these services often far exceeds available capacity.²⁶

According to Herb Lehr, President of the Metis Settlements General Council:

*“Away from their families, communities and support systems, our people are alone and vulnerable... the lack of housing contributes to the higher rates of gender-based violence experienced by Indigenous women, girls and gender-diverse people. For instance, women and children may have no choice but to live with an abusive partner due to a lack of alternative housing or shelter.”*²⁷



23 Canadian Geographic, "Housing," Indigenouspeoplesatlasofcanada.ca (Canadian Geographic, June 4, 2018), .

24 Assembly of First Nations, "Housing Investments in First Nations Communities," Closing the Infrastructure Gap, accessed March 6, 2026, <https://afn.ca/economy-infrastructure/infrastructure/closing-the-infrastructure-gap/housing/>.

25 House of Commons, The Effects of the Housing Shortage on Indigenous Peoples in Canada, 20–21.

26 CBC News, "Missing and Murdered Indigenous Women."

27 House of Commons, The Effects of the Housing Shortage on Indigenous Peoples in Canada, 20–21.

Even within organizations whose mission is to protect and care for those who are most vulnerable, biases and systemic discrimination against Indigenous peoples can persist. Intervention workers in Montreal often report a lack of clarity and standardisation around shelter-bed availability, forcing workers to rely on time-consuming trial-and-error calls to determine where beds may be available.

Some intervention workers have also reported that when indicating that a client in need of support is Indigenous, the response from hotlines or shelters can change, with previously available supports—such as funding assistance or bed availability—suddenly no longer offered because the client may be perceived as “difficult.”

The challenges that some Indigenous individuals face—including drug/substance use, precarious housing, and involvement in sex work or sex trafficking—must be understood within their broader systemic context rather than used as grounds for exclusion and mistreatment.

Slow or negative responses from police or other organizations when requesting assistance for Indigenous community members can further marginalise and disenfranchise an already systemically vulnerable population.²⁸ Distrust in institutions and authorities grows when care is delayed or denied. Over time, this can contribute to learned helplessness and reinforce cycles in which people feel that seeking help will not lead to meaningful support.

Breaking these cycles requires rebuilding trust with the community. This begins with educating ourselves and our organizations, moving toward culturally safe models of care (including hiring Indigenous staff), and approaching Indigenous individuals seeking support with openness and respect rather than suspicion.

It takes immense, and often unfathomable, courage for someone to seek support and attempt to break out of cycles of violence, particularly when dependants such as children or pets²⁹ are involved. Addressing these realities requires a broader commitment to Indigenous ways of knowing, being, and healing, including the right to self-determination. These approaches can often be effectively integrated within social medicine approaches, including Housing First models, harm reduction strategies, and culturally safe systems of care that recognise the structural forces shaping these experiences.

Housing is healthcare.

“The provision of housing [is] a fundamental solution to ending violence against women, girls and two-spirited LGBT2QIA+ people.”³⁰

²⁸ CBC News, “Missing and Murdered Indigenous Women.”

²⁹ See References NWAC’s Housing Toolkit For Pets

³⁰ House of Commons, The Effects of the Housing Shortage on Indigenous Peoples in Canada, 21.

How to Use the Manual

This manual is designed as a practical, culturally informed resource for service providers who support Indigenous women, men, boys, girls, 2SLGBTQIA+ members, and families experiencing violence. It offers foundational context, guiding principles, and applied strategies to help readers understand the broader historical, social, and systemic factors that shape experiences of violence, as well as the importance of culturally safe, trauma- and violence-informed responses. The manual is intended to be used as both a learning tool and a reference document. It can be read sequentially or consulted by section depending on the reader's role, setting, and immediate needs. While each section can stand on its own, they are interconnected and should ideally be considered together to support wholistic, respectful, and effective service provision.

The manual is divided into four sections:

1

Intergenerational Trauma and Systemic Context

The first section provides essential background on intergenerational trauma and the systemic conditions that shape the lived realities of Indigenous peoples and communities. It explains how colonial policies and historical harms—including displacement, cultural disruption, and family separation—continue to influence present-day experiences of violence, health, and service access. The section also examines the interconnected nature of issues such as sexual violence, human trafficking, systemic racism, and barriers within justice and social service systems, with particular attention to the experiences of Inuit women. By situating violence within historical and contemporary contexts, this section helps service providers understand why culturally safe, trauma-informed, and community-centered approaches are necessary for meaningful and respectful support.

2

Impacts of Family Violence on Indigenous Communities

This section examines the wide-ranging impacts of family violence, including intimate partner violence (IPV), on Indigenous individuals, children, families, and communities. It outlines the physical, emotional, psychological, and long-term health consequences of violence, as well as the often-hidden dynamics of coercive control and fear that shape survivors' daily lives and decision-making. The section also highlights how exposure to violence affects children's development and intergenerational well-being, contributing to cycles of trauma when combined with broader structural inequities. Particular attention is given to the distinct barriers faced in remote, Northern, and Inuit communities, including geographic isolation, limited infrastructure, confidentiality concerns, and lack of culturally appropriate services. Moreover, this section emphasizes that the disproportionate rates of violence experienced by Indigenous women and communities are rooted in structural conditions rather than individual circumstances, and that their impacts extend beyond immediate harm to affect community safety, cultural continuity, and long-term collective wellness.

3

Supporting Indigenous Community Members

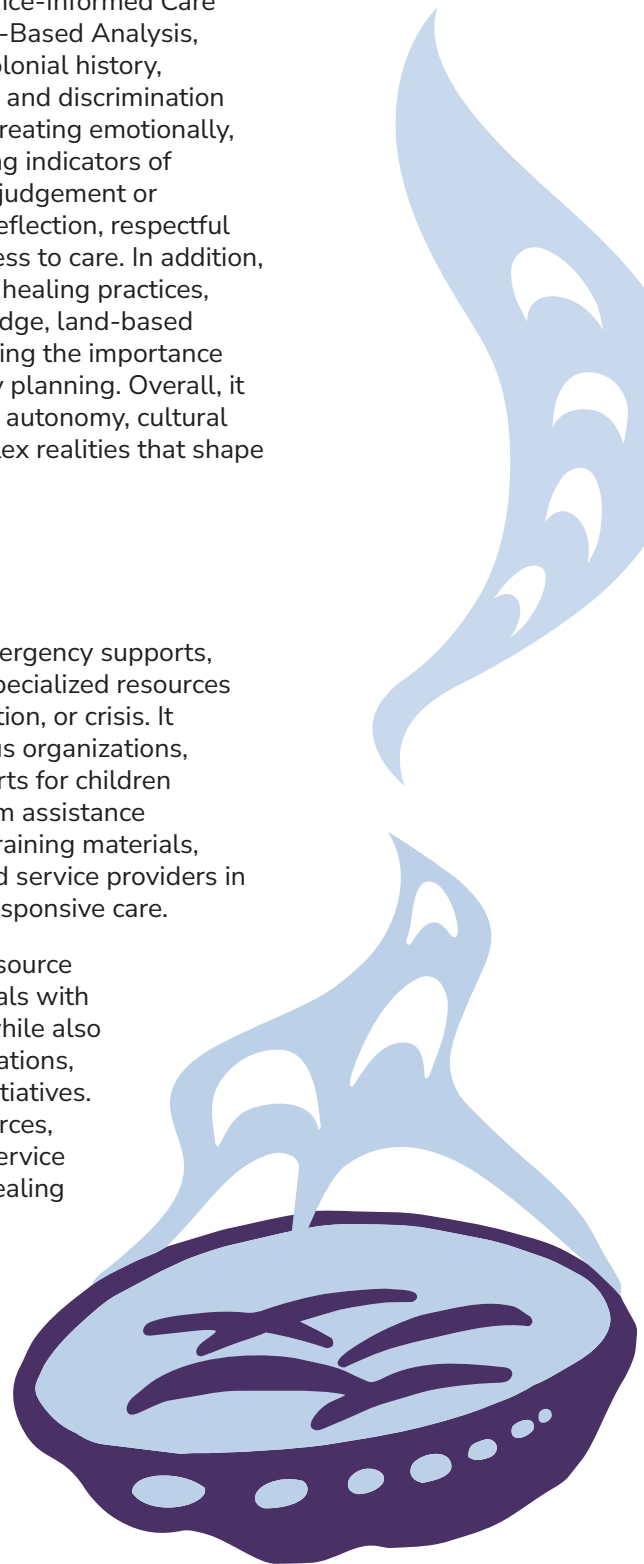
The third section provides practical guidance for service providers on how to support Indigenous individuals experiencing violence using trauma- and violence-informed, culturally safe, and strengths-based approaches. It introduces key frameworks such as Trauma- and Violence-Informed Care (TVIC), culturally safe practice, and Indigenous Gender-Based Analysis, while emphasizing the importance of understanding colonial history, systemic inequities, and ongoing experiences of racism and discrimination in service settings. The section outlines strategies for creating emotionally, physically, and culturally safe environments, recognizing indicators of violence and coercive control, and responding without judgement or requiring disclosure. It also highlights the role of self-reflection, respectful communication, and barrier reduction in improving access to care. In addition, the section explores culturally grounded and wholistic healing practices, including the involvement of Elders, traditional knowledge, land-based healing, and community-led supports, while underscoring the importance of collaboration, referrals, and survivor-centered safety planning. Overall, it reinforces that effective support must prioritize dignity, autonomy, cultural identity, and resilience while acknowledging the complex realities that shape survivors' experiences.

4

Resource and Support Network

This section compiles a comprehensive directory of emergency supports, Indigenous-led services, general social services, and specialized resources available to individuals experiencing violence, exploitation, or crisis. It includes immediate helplines, culturally safe Indigenous organizations, services for women and gender-diverse people, supports for children and families, Inuit-specific services, and legal and victim assistance resources. The section also highlights online toolkits, training materials, and documentation designed to assist caseworkers and service providers in delivering trauma- and violence-informed, culturally responsive care.

Organized for quick reference and practical use, this resource network is intended to help providers connect individuals with timely, appropriate, and culturally relevant supports, while also strengthening collaboration across community organizations, justice systems, health services, and Indigenous-led initiatives. By centralizing accessible and survivor-informed resources, the section supports coordinated responses, reduces service navigation barriers, and promotes safer pathways to healing and long-term support.



Intergenerational Trauma and Systemic Context



Definition and Origins

“Intergenerational trauma” refers to the transmission of the impacts of historical and collective trauma across generations. While this concept applies to many communities affected by systemic violence, it is particularly relevant in Indigenous contexts due to the enduring impacts of colonization, forced displacement, loss of land, erosion of language and spiritual traditions, and the disruption of cultural identity.

Building on the historical context outlined earlier in this manual, colonial policies in Canada reshaped family systems, gender roles, and community structures in ways that continue to affect Indigenous well-being today. These systems did not only cause immediate harm but institutionalized family separation, cultural disconnection, and chronic exposure to violence across multiple generations, particularly through residential schools, the Sixties Scoop, and ongoing child welfare apprehensions. Children who were removed from their families and placed in institutions or non-Indigenous foster homes frequently experienced neglect, physical, and sexual abuse, while also being disconnected from language, culture, and kinship systems that traditionally supported healthy development and caregiving.

The legacy of forced child removal did not end with residential schools or the Sixties Scoop. Today, Indigenous children account for approximately 8% of Canada’s child population, yet represent over 52% of children in foster care. This overrepresentation reflects ongoing structural inequities and the continued surveillance and disruption of Indigenous family systems.³¹

Such disruptions affect attachment, emotional regulation, and models of safe caregiving. As a result, some individuals who use violence are themselves survivors of institutional and systemic abuse, illustrating how normalized exposure to violence, unresolved trauma, and disrupted parenting models can contribute to cycles of harm across generations. Research consistently demonstrates that “most perpetrators have themselves been victims of domestic violence, indicating a pernicious and self-perpetuating cycle involving domestic violence and its attendant mental health problems.”³² This does not excuse violence, but it underscores the importance of addressing root causes, including colonization, systemic racism, intergenerational trauma, and unresolved childhood abuse, in prevention and healing efforts.³³

For service providers, this context is not merely historical background. The cumulative effects of these policies influence present-day experiences of family violence, mistrust of institutions, overrepresentation in child welfare and justice systems, and heightened vulnerability to severe and lethal violence. Situating experiences of violence within this historical and structural context is essential for delivering culturally safe, trauma- and violence-informed, and person-centred support.³⁴ (See Appendix E.)



31 Fraser Mustard Institute, “Interventions for the Prevention of Family Violence,” 3.

32 GBV Learning Network, “Issue 25.”

33 “Indigenous people have internalized the oppression, neglect and abuse they have experienced over time and have passed this on to subsequent generations, resulting in enduring and perpetuating cycles of family violence and harm. As a result, Indigenous people have a higher risk of both experiencing maltreatment or exposure to violence during childhood, and experiencing or perpetrating IPV during adulthood.”

For more, see: Fraser Mustard Institute, “Interventions for the Prevention of Family Violence,” 20.

34 Native Women’s Association of Canada, *Bridging the Gap* (Ottawa: Native Women’s Association of Canada, 2025), https://nwac-afac.ca/assets-documents/SMS-Toolkit_EN_2025_2026-01-29-191311_yfao.pdf.



Ending Violence Against Indigenous Communities

Ending violence against Indigenous communities requires attention to the everyday realities they face, including past and ongoing experiences of violence, systemic barriers, and unsafe service environments. Service providers often find that the first and most important step to ending violence is creating a safe space where victims may speak about both past and present harm. Multiple interconnected issues can affect their safety and well-being, including:

- Family violence
- Sexual violence
- Human trafficking
- Child welfare involvement
- Justice system barriers
- Housing insecurity
- Health inequities

These issues do not exist separately; they are deeply interconnected and rooted in broader social and historical conditions.

Sexual violence is often described as a silent and deeply entrenched issue within many Indigenous communities. Its presence is closely tied to the historical legacy of colonization and the normalization of violence over time. Because of this, discussions about sexual violence must begin with care, safety, and respect for the individual, as well as for the family and community. Long-term, coordinated community healing processes are required, and addressing sexual violence is directly connected to healing from colonization itself.

There are many reasons why sexual violence may go unaddressed. In some communities, violence has become normalized for children and youth, particularly where multiple generations have lived with unresolved trauma and limited access to safe supports. When coercion, substance misuse, or intimate partner violence are common within one's surroundings, young people may lack models of healthy relationships and clear boundaries. Silence, minimization, or avoidance can become learned survival strategies, and over time the distinction between coercion and consent may be blurred.

Perpetrators are often known to the victim, including family members, partners, or acquaintances, which further complicates disclosure. Survivors may depend economically, socially, or emotionally on the person who harmed them. In small or remote communities, where housing is scarce and kinship networks are closely interconnected, leaving an abusive situation may mean losing shelter, family relationships, and community belonging at once. Concerns about confidentiality are heightened in such contexts, as seeking help can quickly become visible to others. The potential for gossip, retaliation, or stigma may weigh heavily in the decision to remain silent.

Many Indigenous individuals report having little confidence that authorities, including police and hospitals, will believe them or respond respectfully. This distrust is often reinforced by previous experiences of racism, dismissive treatment, or inaction. In some cases, survivors may fear that disclosure could trigger unintended consequences, such as child welfare involvement or increased surveillance rather than protection.

The service response itself can also be re-traumatizing. Lengthy wait times, repeated retellings of traumatic events to multiple providers, invasive forensic procedures, or interactions with professionals unfamiliar with Indigenous cultural contexts can compound harm. When services are delivered without cultural safety or trauma-informed practice, survivors may feel further disempowered, reinforcing reluctance to seek help in the future. Together, these intersecting barriers create a complex web that makes disclosure and access to meaningful support profoundly difficult.³⁵



³⁵ Ontario Native Women's Association, Reconciliation with Indigenous Women, https://b4e22b9b-d826-44fb-9a3f-afec0456de56.filesusr.com/ugd/4eaa9c_be059fe0cd844671839aef58558d893d.pdf, 33–34.

Human Trafficking of Indigenous Women, Girls, and Gender-Diverse People

Human trafficking further illustrates the intersection of systemic violence, poverty, and intergenerational trauma. Indigenous women and girls are disproportionately represented among those who are sexually exploited in Canada.³⁶ Many live in conditions marked by constant fear, economic instability, and housing precarity. They may experience violence from clients, traffickers, and others while simultaneously fearing that reports to police or health professionals will result in disbelief, blame, shame, or other further harm. Recruiters may manipulate young people gradually, sometimes posing as romantic partners or relying on existing social relationships, including friends or family members.

When Indigenous survivors of trafficking or violence seek help, they are often met with judgment, disbelief, or rigid service systems that are not designed with their realities in mind. Even well-intentioned services may be limited by complex procedures, long waitlists, or mandates that do not account for urgent safety needs. For many women, approaching a service agency involves significant personal risk, and being told to wait months for assistance can effectively mean receiving no support at all. Experiences of systemic racism and discrimination within institutions further contribute to reluctance in accessing services.

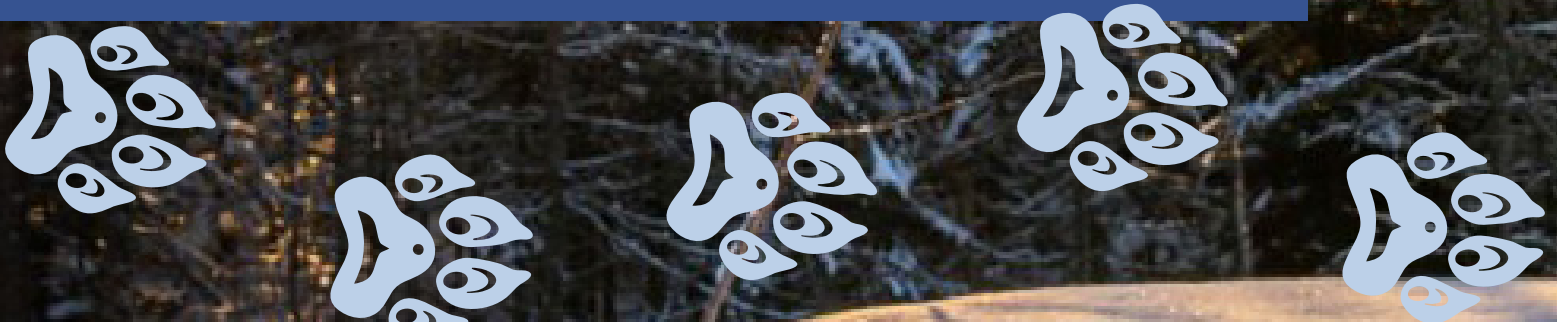
These patterns are not accidental. Reports consistently highlight that the violence and racism faced by Indigenous women and gender-diverse people are part of the legacy of colonization, which disrupted strong and stable Indigenous societies, governance systems, economies, and cultural foundations over generations.³⁷ The resulting intergenerational trauma is reflected today in higher rates of poverty, substance misuse, violence, and overrepresentation in child welfare and justice systems. These intersecting factors create environments where exploitation, including human trafficking, can more easily occur and persist.

For Inuit women specifically, the impacts of violence are compounded by layers of discrimination, limited access to culturally appropriate services, and geographic and linguistic barriers. Inuit women are overrepresented among those experiencing intimate partner violence and are at heightened risk of re-traumatization when interacting with mainstream justice and social service systems. A lack of culturally relevant supports can prevent survivors from receiving the help they need for themselves and their families. "Human trafficking," as the Ontario Native Women's Association puts it, "is like being caught in a spider web that you can't escape."³⁸

³⁶ Ontario Native Women's Association, *Journey to Safe Spaces*, https://www.onwa.ca/filesugd/33ed0c_1a2b7218396c4c71b2d4537052ca47cd.pdf, 2.

³⁷ *Ibid.*

³⁸ *Ibid.*, 7.





Understanding Historical and Contemporary Contexts

Organizations such as Pauktuutit Inuit Women of Canada emphasize the importance of understanding historical and contemporary contexts to respond effectively to violence. Building awareness of key historical events and their ongoing impacts helps service providers better understand the complexities of intimate partner violence and its far-reaching effects within Inuit communities. Training initiatives that engage justice professionals, youth, and community members highlight the importance of prevention, culturally grounded responses, and accountability in fostering healthier relationships and safer communities.³⁹

Inuit Historical Trauma, Risks, and Intergenerational Trauma⁴⁰

Trauma is a disturbing experience which can have multiple negative implications for a person, a family, and a community. When trauma is unresolved, it can be re-experienced over generations. This phenomenon can be referred to as historic or intergenerational trauma. Historical trauma is a complex and collective experience in Inuit communities resulting from colonization. It is essential for legal professionals working in Inuit communities to know how trauma experienced with IPV has links to historic and intergenerational trauma. Legal professionals also benefit from a greater understanding of Inuit-specific knowledge on gender-based violence and their strengths-focused perspectives on family relationships.

Inuit-Specific Knowledge around Gender-Based Violence

Gender-based violence was not a part of Inuit society and culture before colonial contact when Inuit communities relied on each other to survive. Gender roles were distinct, with men and women depending on each other for existence. Inuit parenting practices focus on leading by positive example for their children.

Behavioural norms for Inuit were historically communicated orally for generations. The behavioural standards include three elements of Qaujimajatuqangit:



When conflict occurred within communities, the overall focus was on community safety, not making matters worse. Elders and shamans intervened in instances when community members violated these expectations. Interventions would occur directly with the person involved, including individual or group counselling, to learn the truth and determine a suitable response. (Pauktuutit 2020, 6-13)

Adapted from Pauktuutit Saimaniik: Survivors of Intimate Partner Violence and the Family Justice System Response Training Resource 2023

³⁹ Pauktuutit Inuit Women of Canada, SAIMANIIC: Survivors of Intimate Partner Violence and the Family Justice System Response Training Resource, https://pauktuutit.ca/wp-content/uploads/2025/03/Saimaniik-Toolkit_ENG.pdf.

⁴⁰ Ibid., 13.



Impacts of Family Violence on Indigenous Communities

What Is IPV?

Family violence, including intimate partner violence (IPV), has far-reaching impacts that extend beyond individuals to affect children, families, and entire communities. IPV refers to abuse within romantic or dating relationships. It may include physical, sexual, emotional, financial, or coercive control.

Understanding the impacts of family violence requires recognizing its complexity. There is no single cause or explanation for why violence occurs or why survivors remain in unsafe relationships. Contributing factors can include:

- Structural inequality
- Colonial histories
- Lack of infrastructure and culturally safe supports
- Rigid gender roles
- Childhood trauma
- Mental health challenges
- Substance use
- Barriers related to communication and language

Access to services is not only about availability, but also about whether survivors can engage with them safely and effectively. In many regions, including parts of Quebec, Indigenous survivors may encounter services delivered primarily in French or English, despite some community members speaking minimal or no French, which can lead to misunderstanding, dismissal, or inadequate responses from authorities such as police, courts, and healthcare providers.

Survivors may remain in abusive relationships for many interconnected reasons, including:

- Fear
- Financial dependence
- Lack of safe housing
- Limited access to culturally and linguistically appropriate supports
- Concern for children
- Emotional attachment
- Normalization of violence
- Social or familial pressure to “keep the peace.”⁴¹



Risk is further intensified at the intersection of Indigenous identity with other marginalized identities. For example, 2SLGBTQIA+ Indigenous people report significantly higher lifetime IPV rates than non-2SLGBTQIA+ Indigenous people (86% vs. 59%), and Indigenous women with disabilities experience markedly higher rates of violence than those without disabilities (74% vs. 46%).⁴² These layered vulnerabilities underscore the need for intersectional approaches to prevention and support.

⁴¹ Ibid., 17–20.

⁴² Fraser Mustard Institute, “Interventions for the Prevention of Family Violence,” 13.



Physical, Emotional, and Long-Term Health Impacts

The effects of intimate partner and family violence are both immediate and long-term. In the short term, survivors may experience:

- Physical injuries
- Emotional distress
- Fear
- Sleep disruption
- Unplanned pregnancy
- Sexually transmitted infections

Over time, the impacts can deepen and include:

- Depression
- Anxiety
- Post-traumatic stress disorder
- Substance use disorder
- Self-harm
- Chronic pain
- Suicide

Survivors may also experience ongoing health problems linked to trauma, including gynecological disorders, pregnancy complications, digestive issues, and other stress-related conditions.

Some coping responses to trauma, such as substance use or engagement in high-risk behaviours, are often stigmatized rather than understood as survival strategies. This stigma can discourage survivors from seeking help. Open-minded, non-judgmental, and trauma-informed responses are therefore essential so that survivors feel safe accessing support now and in the future.

Violence Against Indigenous Women: Key Indicators

- ~3.5x higher rates of spousal violence
- Greater likelihood of severe violence (i.e., choking, weapon threats, sexual assault)
- Higher prevalence of emotional abuse by partners
- Disproportionate exposure to sexual violence at young ages
- Significantly elevated homicide and violence-related mortality rates

Fraser Mustard Institute, "Interventions for the Prevention of Family Violence," 8.

Impacts on Children and Intergenerational Well-Being

Family violence does not only affect adults. Children who grow up in environments marked by violence, coercion, tension, and fear are themselves victims, not merely witnesses. Exposure to controlling behaviours, intimidation, and abuse can shape children's emotional development, sense of safety, and future relationships. Abusive dynamics may involve using children to monitor or intimidate a parent, restricting their activities, belittling their caregiver in front of them, or limiting access to basic resources.

Growing up in such climates can normalize violence, reinforce fear and hypervigilance, and contribute to long-term emotional and behavioural challenges. These impacts may also contribute to cycles of violence across generations, particularly when combined with broader experiences of intergenerational trauma, systemic inequities, and community-level stressors.

The Hidden Impact of Coercive Control

A broader understanding of family violence includes coercive control, which refers to a continuum of manipulation, humiliation, isolation, and exploitation used to establish dominance and deprive victims of autonomy. This pattern is often gradual, cumulative, and difficult to recognize because it may not leave visible physical injuries.

Coercive control can include monitoring movements, controlling finances, isolating victims from family and community supports, regulating daily behaviours, and using threats, gaslighting, or humiliation. Survivors frequently describe living in a constant state of fear, “walking on eggshells,” doubting their own perceptions, and losing their sense of individuality and decision-making capacity. The cumulative psychological impact of threats, harassment, and isolation is often reported to be as devastating as, or more devastating than, physical violence.

Importantly, the risk of lethality can increase during periods of separation. Research on domestic homicides indicates that 67% occur while a relationship is ending or after separation, and the presence of coercive control is a significant indicator of danger, even in the absence of recent physical violence.⁴⁴ In many cases of intimate partner homicide, patterns of isolation, surveillance, and escalating threats were present long before physical violence intensified. Recognizing these warning signs can be a matter of life preservation.

⁴³ Regroupement des maisons pour femmes victimes de violence conjugale (RMFVVC), Main manifestations, and examples, of coercive control (Montréal: RMFVVC, 2022), 1, https://maisons-femmes.qc.ca/wp-content/uploads/2022/10/EN_napperon_coercive_control_web.pdf.

⁴⁴ Regroupement des maisons pour femmes victimes de violence conjugale (RMFVVC), Tool 1: Understanding Coercive Control (Short Version) (Montréal: Regroupement des maisons pour femmes victimes de violence conjugale, 2022), https://maisons-femmes.qc.ca/wp-content/uploads/2023/08/RMFVVC-Coercive-control-Outil1-version-courte-Web_compressed.pdf, 4.



Figure: 43

Main Manifestations, and Examples, of Coercive Control

Blaming

- Tells her he can't stay sober while living with a crazy woman like her
- He says that if she leaves him, he'll kill himself and it will be her fault
- Tells her that he wouldn't get angry if she could keep the kids quiet and in control

Humiliation

- Acts in ways that embarrass or humiliate her in public
- Compares her physically to other people

Gaslighting

- Throws tantrums, insults and assaults her, then when she confronts him about it accuses her of exaggeration or making up stories
- Keeps telling her that she spends her time imagining problems
- Hits her and later asks her how she got hurt

Monitoring and Interrogation

- Asks her who she met, when and why
- Asks her to text him where she is, text on arrival and departure, pedometer calculated, report required
- Accompanies her wherever she goes

Sexual Violence

- Pressures her for sex
- Forces her to watch pornography, asks her to do humiliating and degrading things
- Controls her contraception and pregnancies (keeping the baby or abortions)

Spiritual Violence

- Mocks her religious or spiritual beliefs
- Forces her to adopt practices and rituals that are not her own
- Distorts her beliefs to make her feel guilty, belittle her or impose rules on her

Isolation

- Prevents contact with loved ones by erasing new communications on her phone, forbidding her to see or talk to them
- Prevents her from leaving the house, confiscating car keys and shoes
- Prevents her from going to school or work

Physical Violence

- Pushing, hitting
- Strangulation
- Spitting on her

Threat

- Threatens to leave with children, to make her lose custody
- Threatens to kill her or her loved ones
- Threatens to take her to court or to alert social or immigrations services

Abuse Using Technology

- Logs into her account, reads her posts, impersonates her and interacts for her on social media
- Confiscates her phone, removes her SIM card
- Tracks her with geolocation apps

Financial Abuse

- Controls budget and access to bank and credit cards
- Threatens to deprive her of money and other essential items
- Prevents her from having access to the shower, bath, toilet, meals and the marital bed
- Controls her transportation

Harassment

- Stalks her, follows her or has her followed by friends
- Lurks or shows up at her home or place of work to make sure she is there
- Repeatedly sends her text messages, sometimes under the guise of child-related communications





Barriers and Risks in Remote and Northern Communities

Survivors living in isolated or remote Indigenous communities face additional and distinct challenges. Limited transportation, geographic isolation, and lack of infrastructure can make it extremely difficult to leave unsafe situations or access services in urban centres. Survivors may also hesitate to leave their communities due to cultural ties, social pressure, or fear of losing connection to family and land.

Accessing services can be further complicated by concerns about privacy and confidentiality in small communities, where service providers may be relatives or acquaintances. High turnover among support workers, lack of culturally safe services, unreliable internet and phone connectivity, and economic dependence on a partner due to housing shortages and employment disparities all create additional barriers. In some regions, easy access to firearms can further heighten risk and danger.

For Inuit communities in particular, geographic remoteness and fly-in access significantly limit service availability. Inuit women and gender-diverse Inuit experience some of the highest rates of violence in Canada, yet culturally appropriate and accessible services remain limited. This lack of safe options is linked to systemic, institutional, and structural factors, and the slow implementation of national Calls for Justice has left many Inuit voices and needs insufficiently addressed.

In summary, key barriers to violence prevention may include:

- Geographic isolation and lack of transportation
- Limited culturally safe services
- Confidentiality concerns in small communities
- Housing shortages
- Economic dependence on partners
- Language barriers and limited interpretation services



Disproportionate Rates of Violence Against Indigenous Women

Available data highlights the disproportionate impact of violence on Indigenous women and communities. According to the Assembly of First Nations:

- Indigenous women are four times more likely than non-Indigenous women to be victims of violence.
- They are significantly overrepresented among homicide victims and missing women in Canada.
- They are approximately twice as likely to experience violence from a current or former partner.
- More than half report experiencing physical assault in their lifetimes.
- Nearly half report experiencing sexual assault in their lifetimes.
- Between 2001 and 2014, homicide rates involving Indigenous female victims were roughly four times higher than non-Indigenous women, with even greater overrepresentation in the territories.⁴⁵

These statistics reflect broader systemic realities rather than isolated incidents, and these patterns are not abstract disparities. They are reflected in the ongoing national crisis of Missing and Murdered Indigenous Women, Girls, and Two-Spirit (MMIWG2S+), in which thousands of Indigenous women, girls, and 2SLGBTQIA+ people have gone missing or been killed over recent decades.⁴⁶ National inquiries and community-led investigations have documented how systemic racism, police inaction, jurisdictional gaps, poverty, housing instability, and intergenerational trauma create conditions where violence becomes normalized, underreported, and insufficiently addressed. The resulting harm is not only psychological or social; it is frequently lethal.



⁴⁵ Assembly of First Nations, "Murdered & Missing Indigenous Women & Girls," accessed February 23, 2026, <https://afn.ca/rights-justice/murdered-missing-indigenous-women-girls/>.

⁴⁶ Human Rights Canada, "Missing and Murdered Indigenous Women, Girls and 2SLGBTQI+ People," Resource Guide, Canada Museum for Human Rights, accessed February 28, 2026, <https://humanrights.ca/resource-guide/missing-and-murdered-indigenous-women-girls-and-2slgbtqi-people>





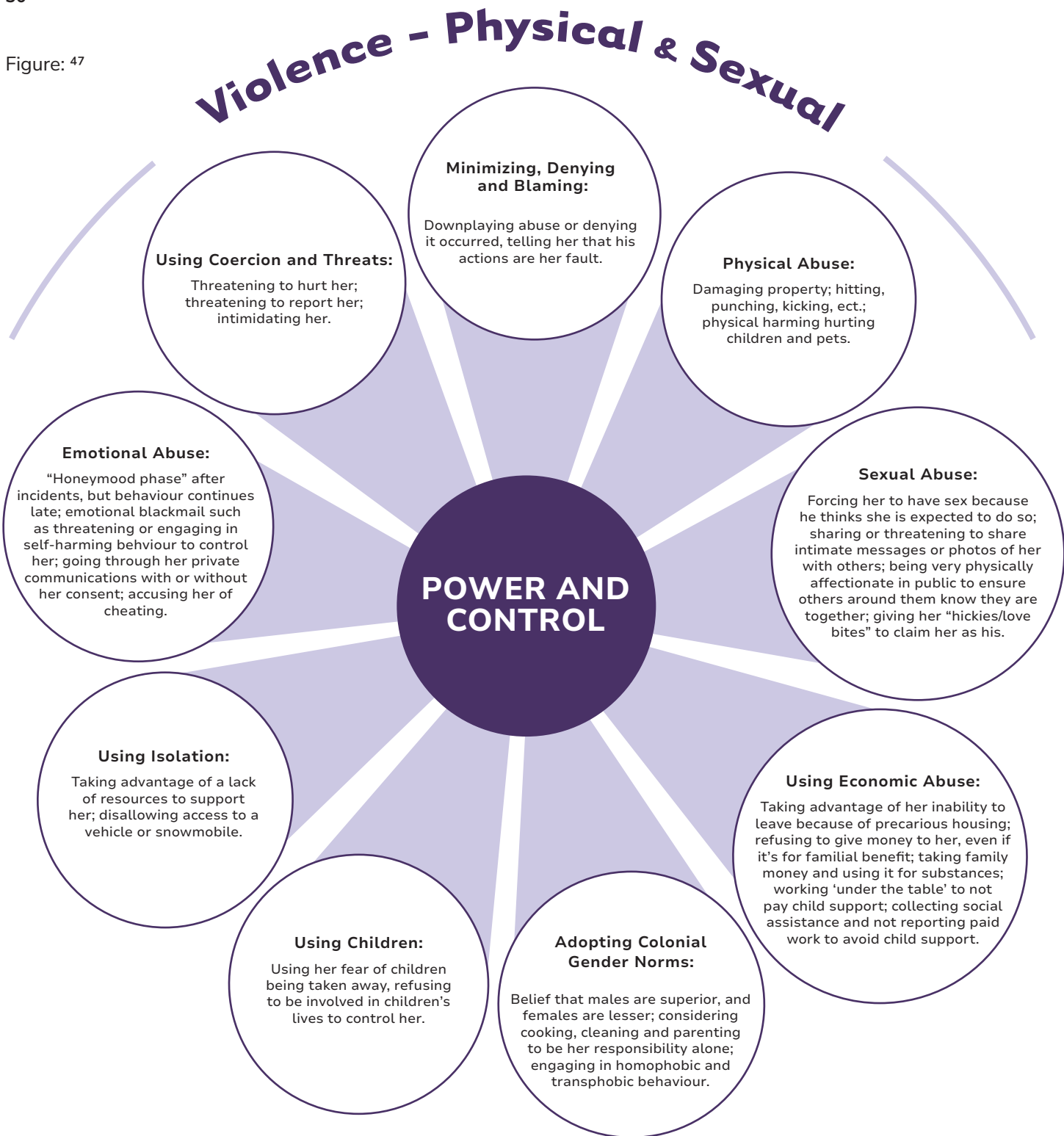
Community-Wide and Structural Impacts

The impacts of family violence ripple outward, affecting community safety, social cohesion, and long-term well-being. Violence contributes to cycles of trauma, poverty, housing instability, and involvement with child welfare and justice systems. In contexts shaped by colonization, systemic racism, and disrupted cultural and governance structures, these impacts are further intensified.

For many Indigenous survivors, interactions with justice and health systems can be retraumatizing due to discrimination, lack of cultural awareness, and inadequate resources. As noted by Pauktuutit Inuit Women of Canada, Inuit women who engage with justice systems often face layers of discrimination, limited culturally appropriate services, and a heightened risk of re-traumatization, which can prevent them and their families from receiving adequate support.

In closing, the impacts of family violence must be understood as interconnected— affecting physical, emotional, spiritual, and mental health, children's development, community safety, and cultural continuity. Addressing these impacts requires wholistic, culturally grounded, and community-based responses that recognize both the immediate harms of violence and the broader structural conditions that sustain it.

Figure: 47



Power and Control Wheel

Domestic Abuse Intervention Programs of Duluth, Minnesota, developed the Power and Control Wheel. It is a valuable tool in understanding IPV as it describes the multiple ways abuse can be experienced.

The wheel has been adapted to fit the unique experiences of various communities and contexts. The figure above is an adaptation for Inuit communities.

Adapted from *Power and Control Wheel* approved by *The Domestic Abuse Intervention Programs* - www.theduluthmodel.org

Supporting Indigenous Community Members

“The issues of violence, abuse, harassment and bullying can create fear about how to respond and how to cope with the risks of liability and criminal charges. The best antidotes to these fears are awareness of the problem, knowledge of the issues, risk management, and preventative actions.” ⁴⁹

How Providers May Support Those Experiencing Violence

Supporting Indigenous community members who are experiencing violence requires approaches that are trauma- and violence-informed, culturally safe, and grounded in an understanding of colonial history, systemic inequities, and community strengths. Service providers often do not know whether a person has experienced violence, and therefore should assume that trauma- and violence-informed care is appropriate in all interactions. As guidance from EQUIP Healthcare notes, “good care does not require a disclosure of such experience; the goal is safe care for all.” ⁵⁰

Core principles for culturally safe support:

- Assume trauma- and violence-informed care in all interactions
- Avoid requiring disclosure of violence
- Prioritize emotional, physical, and cultural safety
- Respect autonomy and pace of decision-making
- Recognize systemic and colonial contexts shaping experiences



“Trauma is not a distant chapter in history—it’s a daily reality shaped by the lasting effects of colonialism, systemic racism, intergenerational violence, and the erosion of traditional support systems. These realities are compounded by challenges such as overcrowded housing, limited access to emergency services, and barriers to culturally safe resources.” ⁵¹

⁴⁹ Canadian Red Cross, Ten Steps Manual, https://cdn.redcross.ca/prodmedia/crc/documents/Where-We-Work/Canada/Yukon-%20NWT-%20Nunavut/Ten-Steps-Manual_English-PDF.pdf, 5.

⁵⁰ EQUIP Health Care, Top Things to Consider: Supporting People Who Have Experienced Violence, Trauma, or Abuse (Vancouver: EQUIP Health Care, 2018), <https://equiphealthcare.ca/files/2019/12/Top-things-support-people-Jan-15-2018-1.pdf>.

⁵¹ Street Safe Self Defence Canada, “Indigenous Self Defence Training,” accessed February 23, 2026, <https://streetsafeselfdefence.com/indigenous-self-defence/>.

Top Things

Any Provider Can Do to Support People Experiencing Violence

Usually you do not know if a person has a history of, or is currently experiencing violence. Trauma-and-violence-informed care is an appropriate approach to use whether or not you know. Good care does not require a disclosure of such experience; the goal is safe care for all.

Signs that a person may be experiencing violence:

Injuries | Mental health symptoms | Alcohol/drug misuse | Financial strain | Recent separation | Client cancels visits, uses health services more frequently, or defers to partner in visit | Partner or parent is always present; answers for client.

For All People

Assume that a majority of clients will have a history of abuse of some form and that any client may be currently experiencing abuse.

Be alert for signs that a person is currently experiencing abuse.

Create emotionally and physically safe environments for all patients and service providers; care for all that is suitable for those who have experiences of abuse.

Demonstrate knowledge that mental health issues and substance use issues are often connected to histories of violence, and that events such as pregnancy may be a time when violence begins or escalates.

Engage respectfully with all.

Foster opportunities for choice and control by clients.

For those who may have or are currently experiencing violence

Listen Listen to the person closely, with empathy and without judging; be alert to the signs suggesting they are experiencing violence.

“That sounds terrible”

Inquire about needs and concerns Assess and respond to their various needs and concerns e.g. emotional, physical, social, and practical (e.g. childcare).

Validate Show them that you understand and believe their EXPERIENCE. If they disclose violence, assure them that they are not to blame.

“You have really survived a lot”

“No one deserves...”

Enhance safety

Discuss a plan to protect themselves from further harm if violence occurs again.

“I’m really concerned for your safety”

“I’d like to help you make a safety plan”

Support

Support them by helping them connect to information, services and social support.

“Would it be OK if I got us some advice from...?”

For Yourself

Examine your own **privileges and assumptions** - e.g., education, position, power, wealth, experiences of violence.

Learn about **health effects** of violence, danger assessment, safety planning.

Within Your Organization

Challenge language that objectifies, judges or blames.

Use “woman”, “man”, “people” (instead of “battered woman”, “abuser”, “IDU”, “at risk”)

Switch “she doesn’t want help” → “our help isn’t meeting her needs”;

Switch “non-compliant patient” → “unsuitable care”

Design and tailor care to support and empower.

E.g. evaluate routine instructions to undress; cancellation policies, waiting spaces

Contribute to organizational conditions to support good care.

E.g. provider/patient ratios; policies, culture



Trauma- and Violence-Informed Care (TVIC)

Trauma- and violence-informed care (TVIC) is a foundational framework for supporting survivors of violence. TVIC explicitly recognizes that trauma is not limited to singular events but may include repeated exposure to violence, discrimination, and structural harm. TVIC “strives to make practices and policies safe, especially by preventing further harm,” while linking trauma and violence to broader social and structural determinants of health.⁵³

The framework is guided by four core principles:

1. Understanding trauma and violence, especially structural violence and its impacts;
2. Creating emotionally, culturally, and physically safe environments;
3. Fostering opportunities for choice, collaboration, and connection;
4. Providing strengths-based and capacity-building support⁵⁴

The Principles of TVIC below show how this can be enacted at organizational and individual levels.

Focus : Structural & Systemic Violence

1 Understand trauma, violence and its impacts on people’s lives and behavior

Organizational Policies & Procedures

- Develop policies and processes to build a culture based on understanding of trauma and violence
- Provide staff training on health effects of violence/trauma, and vicarious trauma

Individual Interactions

- Be mindful of potential histories and effects (‘red flags’)
- Handle disclosures appropriately: believe the experience, affirm and validate, express concern for safety and well-being

Focus : Actively Countering Discrimination & Stigma

2 Create emotionally, culturally, and physically safe environments for all clients and providers

Organizational Policies & Procedures

- Create welcoming space and intake processes; emphasize confidentiality and the person’s priorities
- Seek service user input about safe and inclusive strategies
- Support staff at-risk of vicarious trauma (e.g. peer support, check-ins, self-care programs)

Individual Interactions

- Take a non-judgmental approach (make people feel accepted and deserving)
- Foster connection and trust
- Provide clear information and expectations

3 Foster opportunities for choice, collaboration and connection

Organizational Policies & Procedures

- Have policies and processes that allow for flexibility and encourage shared decision-making and participation
- Involve service users in identifying ways to implement services and programs

Individual Interactions

- Provide real and meaningful care choices
- Consider choices collaboratively
- Actively listen, and privilege the person’s voice

4 Use a strengths-based and capacity-building approach to support clients

Organizational Policies & Procedures

- Allow sufficient time for meaningful engagement
- Provide program options that can be tailored to people’s needs, strengths and contexts

Individual Interactions

- Recognize and help people identify strengths
- Acknowledge the effects of historical and structural conditions
- Teach skills for calming, centering and recognizing triggers

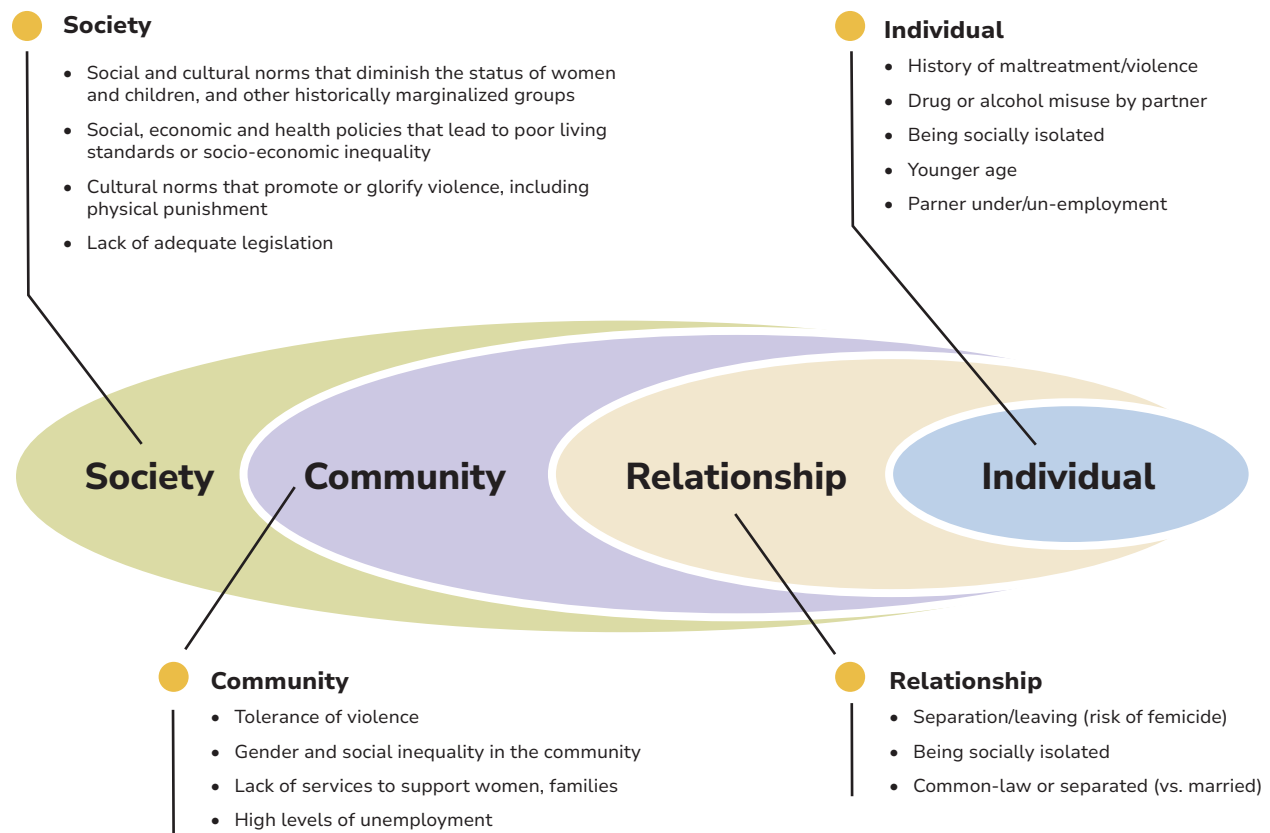
⁵³ EQUIP Health Care, Trauma- and Violence-Informed Care (TVIC) Backgrounder (Vancouver: University of British Columbia, 2024), <https://shorturl.at/j4OMZ, 1>.

⁵⁴ Ibid., 5.

Trauma may profoundly affect behaviour and health. Indeed, it may be “more than everyday ‘stress’” and can involve experiences of shock, terror, shame, and powerlessness. It may also “re-wire the brain and our bodies,” affecting stress regulation and resulting in hyperarousal, withdrawal, or coping responses such as substance use. These reactions should be understood as expected effects of trauma and violence rather than signs of non-compliance or unwillingness to engage in care.⁵⁵

Importantly, trauma also operates on collective levels. Policies and practices can themselves be forms of violence; systemic racism, sexism, ableism, poverty, and insecure housing are identified as structural conditions that exacerbate health and social inequities.

The World Health Organization’s (WHO) Ecological Model, adapted as follows, may prove helpful. Figure: ⁵⁶



“The literature suggests that a multi-pronged approach is required, including the engagement of men as role models, leaders and allies in working with other men and boys to promote healthy and positive constructs of masculinity.”⁵⁷

⁵⁵ EQUIP Health Care, “Trauma and Violence,” accessed February 23, 2026, <https://equiphealthcare.ca/resources/equity-essentials/trauma-and-violence/>.

⁵⁶ EQUIP Health Care, TVIC Backgrounder, 2.

⁵⁷ Shift: The Project to End Domestic Violence, “Engaging Men and Boys in Domestic Violence Prevention: Opportunities and Promising Approaches” (Calgary: University of Calgary, 2013),



Creating Culturally Safe Spaces and Removing Barriers to Care

Creating culturally safe environments is essential for supporting Indigenous community members. Indigenous peoples in Canada continue to face racism and discrimination when accessing healthcare and social services, which directly affects health outcomes and willingness to seek care. The Native Women's Association of Canada notes that Indigenous patients often report their concerns being “dismissed, ignored or misunderstood by healthcare practitioners,” leading many to delay or avoid treatment.⁵⁸

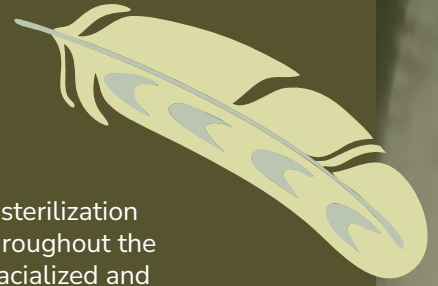
Respect for Indigenous languages is a critical component of culturally safe care. Language is deeply connected to identity, culture, healing, and trust. When services are delivered only in English or French, community members, including Indigenous peoples, may experience exclusion, misunderstanding, or diminished access to support. Whenever possible, service providers should facilitate interpretation, use plain and respectful language, and recognize that communicating in one's own language can be essential to emotional safety and meaningful engagement.

Research also shows that stereotyping remains pervasive. Many studies document Indigenous patients being stereotyped by healthcare providers, who sometimes incorrectly assume substance use, violence, or non-compliance. Gender further compounds these experiences, with Indigenous women and girls often facing misogynistic stereotypes such as being perceived as bad mothers, sexually irresponsible, or incapable of making informed decisions about their own bodies.⁵⁹

Providing culturally safe services is not a “nice to have”; it is a professional and ethical responsibility. For service providers working in Canada, cultural safety represents one of the minimum actions required to begin addressing and repairing the ongoing harms caused by colonization, systemic racism, and institutional violence against Indigenous peoples.



⁵⁸ Native Women's Association of Canada, Bridging the Gap, 16.



These narratives have had profound consequences. The forced and coerced sterilization of Indigenous women and pregnant people—documented across Canada throughout the twentieth century and reported by survivors in recent years—reflects how racialized and gendered assumptions about Indigenous motherhood have translated into violations of reproductive autonomy. Survivors have described not consenting – or being pressured to consent – to tubal ligations while in labour or immediately postpartum, at moments of heightened vulnerability, sometimes under threat of child apprehension or framed as routine contraception.⁶⁰

Such experiences do not exist in isolation. They contribute to deep and ongoing distrust of Western health systems, particularly when services are not reflective of Indigenous cultural needs and when informed consent processes are undermined. When healthcare settings are associated with coercion, dismissal, or disregard for bodily autonomy, survivors may be understandably reluctant to seek care, disclose violence, or engage with support services.⁶¹

In summation, culturally safe care environments should include:

- Respectful, non-judgmental communication
- Recognition of colonial history and trauma
- Flexible policies that reduce barriers to access
- Inclusion of Indigenous healing options when requested
- Respect for cultural identity, language, and spirituality

⁵⁹ Ibid.

⁶⁰ Kate Kyle and Juanita Taylor, “A Pregnancy Almost Denied,” CBC News, May 20, 2025, <https://www.cbc.ca/newsinteractives/features/forced-sterilization>.

⁶¹ Indeed, barriers to safety are compounded by cultural obstacles, inaccessibility of services, and widespread mistrust of the police, criminal justice system, and other institutions intended to provide protection. This mistrust is rooted in long histories of discriminatory enforcement, child apprehension, and systemic neglect.

For more, see: Fraser Mustard Institute, “Interventions for the Prevention of Family Violence,” 12.



Reflective and Respectful Practice for Service Providers

Supporting Indigenous survivors begins with self-reflection and intentional practice. Providers are encouraged to examine their own assumptions, privileges, and institutional power, including how factors such as education, position, and social status shape interactions with clients. Challenging stigmatizing language is also critical. For example, guidance recommends shifting from phrases such as “non-compliant patient” to recognizing “unsuitable care,” or from “she doesn’t want help” to “our help isn’t meeting her needs.”⁶²

Providers should also be attentive to potential indicators of violence or coercion, including frequent cancellations, increased service use, financial strain, recent separation, or situations where a partner consistently speaks for the client or remains present during appointments. These patterns may reflect not only relational control, but also practical barriers that limit a survivor’s ability to access care safely and consistently. Transportation challenges, lack of childcare, food insecurity, and unstable housing can all affect attendance and follow-through.⁶³

Where possible, organizations can reduce these barriers through small but meaningful interventions, such as:

- Offering bus tickets or transportation vouchers
- Assisting with appointment scheduling
- Connecting clients to nearby food banks or emergency financial supports
- Helping clients navigate housing or income assistance systems.

These interventions should be approached with sensitivity rather than assumptions, and without requiring disclosure. Designing empowering services involves tailoring policies and environments to reduce vulnerability. This may include evaluating intake procedures, expectations around undressing, waiting room layouts, confidentiality practices, and cancellation policies to ensure they do not unintentionally create fear or barriers to access.⁶⁴

⁶² EQUIP Health Care, *Top Things to Consider*.

⁶³ *Ibid.*

⁶⁴ *Ibid.*

Culturally Grounded and Wholistic Healing Practices

Culturally appropriate healing practices are central to supporting Indigenous community members. Prior to European contact, Indigenous communities used wholistic healing systems that addressed emotional, physical, spiritual, and mental well-being. However, colonial policies disrupted the transmission of traditional knowledge and practices. As noted by the Native Women's Association of Canada, "through the enforcement of destructive colonial policies, Indigenous knowledge and practices halted and the transmission of traditional healing knowledge was greatly impeded."⁶⁵

Today, many communities are restoring traditional practices as part of cultural revitalization and healing. These spiritual, emotional, physical, and mental practices may include:

- Meeting with Elders and Traditional Healers
- Sharing circles and storytelling
- Ceremonies, such as smudging, drumming, sweat lodge, or cedar lodge
- Use of traditional medicines and sacred items
- Connection with nature and land-based healing
- Cultural reconnection, language learning, and community support
- Individual and group counselling⁶⁶

It is essential to emphasize that these practices should serve as guiding approaches rather than prescriptive models, as healing methods vary significantly across First Nations, Inuit, and Métis communities. The inclusion of culturally appropriate healing within mainstream services can improve trust and accessibility, as Indigenous approaches to healing are often absent in conventional healthcare systems.⁶⁷



⁶⁵ Native Women's Association of Canada, *Bridging the Gap*, 8.

⁶⁶ *Ibid.*, 10.

⁶⁷ *Ibid.*

Figure: 68



Decolonizing and Community-Led Approaches

Many Canadian institutions were not designed with Indigenous knowledge systems in mind. A decolonizing approach involves being knowledgeable about the impacts of colonization, honouring multiple forms of knowledge, and respecting community processes.⁶⁹

This approach emphasizes strengthening family and community connections, collaborating with community leaders and Knowledge Keepers, and supporting the intergenerational transmission of Indigenous knowledge, values, and healing practices. It is important to include Inuit knowledge and consult Elders and other Knowledge Keepers to ensure culturally grounded support. At the same time, practitioners should recognize that not all Indigenous clients may be connected to or interested in traditional approaches. Person-centered care requires deferring to the individual's preferences and offering Indigenous healing practices as available options, rather than assumptions, thereby respecting autonomy and choice.⁷⁰

Intersectional and Indigenous Gender-Based Analysis

Intersectional frameworks are essential when supporting Indigenous women and gender-diverse people. A Gender-Based Analysis+ (GBA+) framework emphasizes that identity is shaped by multiple intersecting factors, including age, language, geography, sexuality, and historical experience. This framework places Inuit cultural values and worldviews at its core and encourages person-centered responses tailored to each survivor's context.⁷¹

Moreover, the Ontario Native Women's Association's Indigenous Gender-Based Analysis (IGBA) provides a lens for understanding how colonial systems shape Indigenous women's lived experiences. IGBA "looks beyond one view while acknowledging intersectionalities that compound Indigenous women's experiences," and the Association requires service providers to question how policies and programs affect Indigenous women specifically.⁷² Complementing this, the concept of Two-Eyed Seeing, introduced by Elder Albert Marshall, encourages practitioners to integrate the strengths of both Indigenous knowledge and Western approaches. By seeing the insights of Indigenous ways of knowing "through one eye" and the strengths of Western science "through the other", service providers can achieve a more wholistic and culturally responsive understanding of complex social and health issues, enhancing the application of IGBA in practice.⁷³

Importantly, IGBA stresses that Indigenous women are not a homogenous group and that generic approaches are not respectful. Instead, programs must consider who is accessing services, what barriers they face, and how systems can be redesigned to meet their unique needs.⁷⁴

⁶⁹ Pauktuutit Inuit Women of Canada, SAIMANIUK, 25.

⁷⁰ Ibid.

⁷¹ Ontario Native Women's Association, Reconciliation, 7-9.

⁷² Ibid.

⁷³ Native Women's Association of Canada, Bridging the Gap, 11.

⁷⁴ Ontario Native Women's Association, Reconciliation, 7-9.

Supporting Survivors Experiencing Intimate Partner or Sexual Violence

Supporting survivors requires understanding the complexity of decision-making within abusive relationships. Victims may remain in or return to abusive partners for a variety of reasons, including:

- Financial dependency
- Fear of retaliation
- Concern for children
- Community pressures
- Low self-esteem
- Threats to family members

For a victim, decision-making is a much more complex process, particularly when safety risks increase during separation. Rather than asking why a survivor does not leave, trauma-informed practice emphasizes:

- Focusing on safety
- Validating fears
- Supporting autonomy
- Encouraging survivors to verbalize fears
- Exploring safety planning
- Reassuring survivors that support will be available when they are ready to seek help ⁷⁵

Recognizing coercive control is critical: abuse often extends beyond physical violence into patterns that isolate, intimidate, and dominate victims. Indicators may include:

- Monitoring communications
- Financial restriction
- Humiliation
- Stalking
- Controlling daily activities

Documentation can involve:

- Victim statements
- Medical reports
- Witness accounts
- Digital evidence
- Records of isolation and service use

To support victims safely, professionals and community members should be aware of practical approaches, including:

- Understanding patterns of coercive control rather than isolated incidents
- Asking about the partner's behaviour and the victim's fears, without pressuring action
- Systematically documenting controlling behaviours, even if non-criminal, to support future interventions
- Connecting victims to specialized support services (i.e., shelters, counselling, victim advocacy, legal aid)
- Offering logistical support, such as assistance with transportation or referrals to food banks, when appropriate
- Maintaining a non-judgmental and supportive presence, and respecting the victim's pace and decisions ⁷⁶

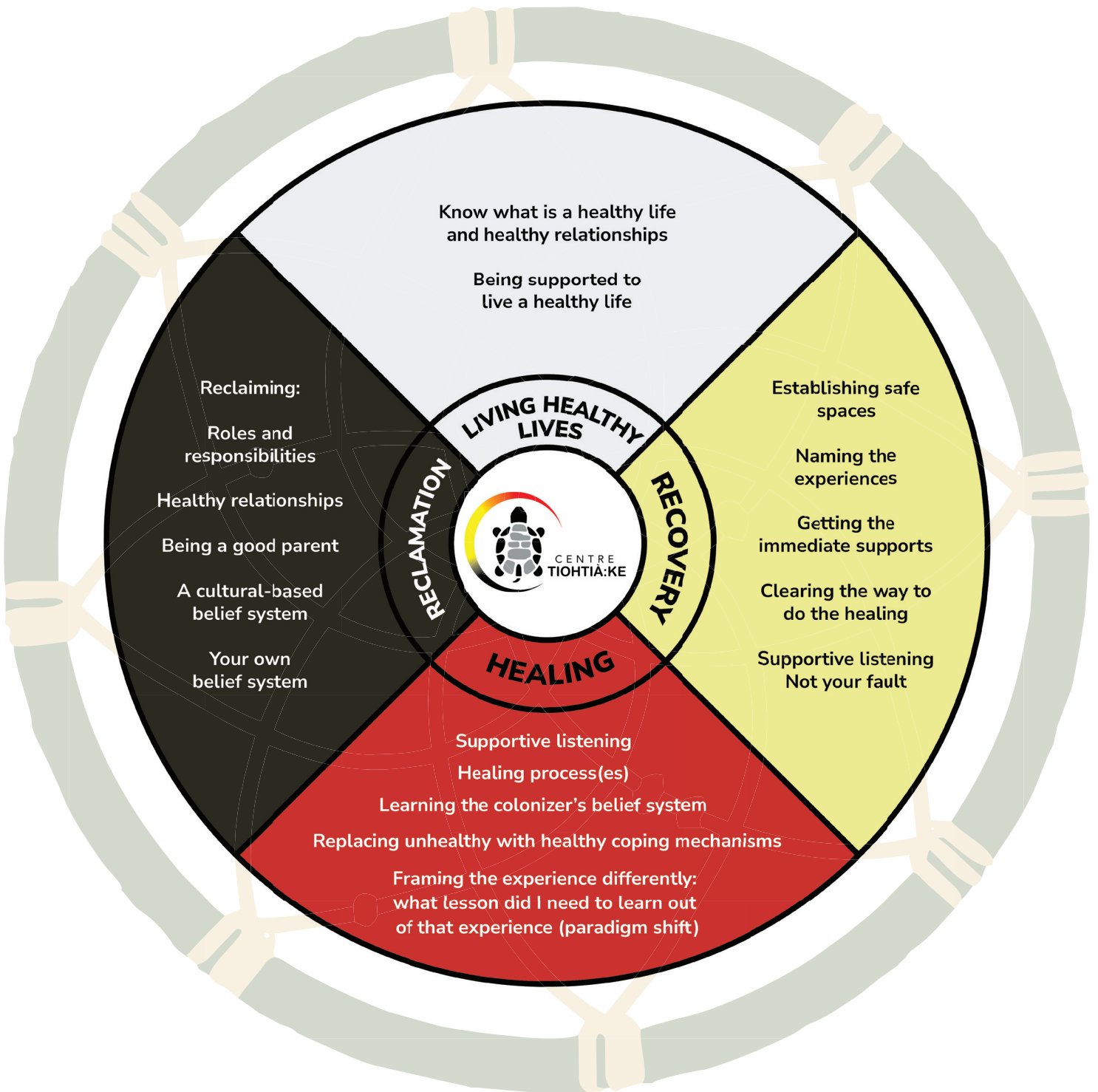
These measures focus on creating safety, awareness, and access to resources, rather than instructing untrained individuals to intervene directly. By providing these tools, communities and professionals can better support victims should intervention become necessary.

⁷⁵ Regroupement des maisons pour femmes victimes de violence conjugale, Le contrôle coercitif: Outil 2 – Police (Montréal: RMFVVC, 2023) https://maisons-femmes.qc.ca/wp-content/uploads/2023/08/RMFVVC-Coercive-control-Outil2-police_web_compressed.pdf, 11.

⁷⁶ Ibid., 1–22.

Figure: 77

Adapted from the Ontario Native Women's Association Indigenous framework for Healing from Sexual Violence





Collaboration, Referrals, and Ongoing Support

Effective support requires strong collaboration with culturally appropriate and specialized services. Providers should be knowledgeable about local victim services, shelters, Indigenous organizations, counselling supports, and community resources (see Appendix A). Survivors should be informed that services are free, confidential, and respectful of their pace, and that accessing support does not require leaving a partner immediately (see Appendix D).

Above all, supporting Indigenous community members means listening without judgement, fostering choice and connection, and centering strengths and resilience. As Indigenous organizations emphasize, Indigenous women's voices must be included in program and policy development, since they are "the experts in their lives."⁷⁸ When services acknowledge historical trauma, cultural identity, and systemic barriers while promoting dignity and self-determination, they become more accessible, effective, and healing for Indigenous individuals, families, and communities.⁷⁹

The following excerpt is taken from a report by The Task Group on Mental Wellness, from 2023. Although the report was developed with a focus on remote communities, the principles and observations outlined remain broadly relevant to urban contexts, including the Montreal area:

Use culture as foundation and intervention

Culturally-based approaches need to inform all aspects of family violence prevention programs and services. Colonialism, including the dismantling of First Nations, Inuit, and Métis cultures, families, and traditional practices, the removal of people from their traditional lands, and ongoing systemic racism is at the root of modern family violence issues. To help communities heal, culture should be used as an intervention and to inform the work in the family violence sector.

Enhance equitable, long-term, flexible funding

While some immediate government funding was available to help family violence organizations through the pandemic, ongoing and equitable funding is required to sustainably support family violence programs, services, and the workforce. This includes support for family violence organizations to help enhance data collection and evaluation so they can quantify their needs for government funding proposals.

Use multi-sectoral, collaborative approaches

Family violence is complex, intersects with multiple sectors, and requires a collaborative multi-sectoral approach. Enhanced collaboration between different government sectors and partners is needed to advance sustainable funding options, enhance system navigation, and to provide stable and consistent wrap-around programs and services.

⁷⁸ Ibid., 7–9.

⁷⁹ While no single intervention appropriate for all Indigenous communities, as healing traditions and social structures vary across Nations, several approaches have been widely embraced, including healing circles and storytelling practices.

For more, see: Fraser Mustard Institute, "Interventions for the Prevention of Family Violence," 35–37.





Expand on the work done by the National Inquiry on MMIWG

During the pandemic, all shelters within First Nations, Inuit, and Métis communities operated from the lens of MMIWG and protecting women. There is a need to expand this work throughout remote and isolated communities by learning from the success of other organizations on how to best operationalize funding and other opportunities that arose from the National Inquiry into MMIWG.

Prioritize accessibility

The need for increased support and funding to ensure accessibility to programs and services was highlighted as a key issue within the family violence sector across First Nations, Métis, and Inuit communities. Remote and isolated communities need additional support from government and partners to enhance the navigation of and accessibility to supports and shelters for affected individuals. It can be challenging to access shelters and services due to the limited understanding of the available services and the lack of available shelters. Accessibility is also an important consideration for individuals with disabilities. Additional funding for supports and/or navigators is needed to ensure people with disabilities have equitable access to services. Navigation needs to be inclusive of ²SLGBTQQIA+ people, and men, who may not be the traditional population at a shelter, may have issues navigating and accessing the support and safety they need.”⁸⁰

This manual serves as a primer for understanding the historical and ongoing contexts of family violence for Indigenous communities in Canada. We hope it will assist you in building or adapting programs, policies, and systems that not only adequately respond to, but actively prevent, situations of family violence within Indigenous communities.

At its core, supporting our Indigenous community members requires using our individual and/or organizational positions and social locations to listen to and amplify Indigenous voices. We must ensure that approaches remain grounded in community experiences and are tailored to unique, evolving needs.

Healing and support begin by sitting and listening to the person in front of you; there is immense power in simply treating each person with humanity and dignity.



80 Task Group on Mental Wellness, “Family Violence Prevention,” 24.



Resource and Support Network

NOTE: Accessing the following resources can be overwhelming or re-traumatizing for community members. When possible, offer to support clients in connecting with services (e.g., sitting together to call) to help ensure their psychological safety and well-being.

Helpful Resources and Organizations

1.1. Emergency and Crisis Supports

These services provide immediate, confidential support for individuals experiencing violence, crisis, or exploitation:

Resource	Service	Contact
SOS Violence Conjugale (24/7, bilingual)		Call: 514-873-9010 (local Montréal, 24/7, bilingual) Call: 1-800-363-9010 (toll-free, 24/7, bilingual) Text: 438-601-1211 (24/7, bilingual) Email: sos@sosviolenceconjugale.ca
LAFU* (Ligne d'aide financière d'urgence)	Emergency Financial Assistance Hotline for persons escaping violence situations:	Call: 1-833-363-5238 <i>*Only a fieldworker in direct contact with a victim of domestic violence or sexual violence can make a request for Emergency Financial Assistance (visit: https://lafu.ca/en)</i>
Hope for Wellness Help Line	Immediate mental health counselling and crisis intervention	Phone: 1-855-242-3310 (24/7) Website & Online Chat: www.hopeforwellness.ca Support also available in: Cree; Ojibway (Anishinaabemowin); Inuktitut (not 24/7)
Sexual Violence Helpline:		Call: 1-888-933-9007 Website: https://sexualviolencehelpline.ca/
Canadian Human Trafficking Hotline:		1-833-900-1010
Crime Victims Assistance Centres (CAVAC):	Post-traumatic and psycho-judicial intervention, information on rights and recourse services, technical assistance such as help in completing CVAC forms, accompaniment and referral to specialized services.	1-866-532-2822
Shelter Movers	Free moving and storage services to survivors of abuse across Canada	https://sheltermovers.com/montreal-region/
Kids Help Phone:	Offers 24/7 mental health support across Canada for kids, teens and young adults.	Call 1-800-668-6868 (toll-free) Text CONNECT to 686868
Québec Community and Social Services Helpline		(Info-Social 211): Dial 211

Resource	Service	Contact
Child and Youth Protection Services:		1-800-567-6810
The Mistreatment Helpline (for Elders):		1-888-489-2287
Women Aware Support Line:		1-866-489-1110 Website: https://www.womenaware.ca/

If you suspect you or someone you know may be a victim of trafficking, control, or exploitation:

Call the Canadian Human Trafficking Hotline: 1-833-900-1010

Find a trusted support service that can offer a safe space

Connect with survivor-informed support networks

Website: <https://safe-passage.ca/>

1.2. Indigenous-Led Services in Montreal

These organizations provide culturally safe, Indigenous-led, and community-based services:

Resource	Service	Contact
The Network: INDEX (Montreal)	The INDEX is a community database that provides essential information on Indigenous programs and programs that serve Indigenous peoples in Tiohtià:ke/ Montreal.	Website: https://reseauumtlnetwork.com/index/
Native Women's Shelter of Montreal	Shelter and support to First Nations, Inuit and Métis women and their children	Website: https://www.nwsm.info/ Phone: (514) 933-4688; Toll Free: 1-866-403-4688 Email: contactus@nwsm.info
Iskweu Project	Indigenous women's safety and outreach, addressing MMIWG2S+ in Quebec	Website: https://www.nwsm.info/en/iskweu-project Email: projectcoordinator.iskweu@nwsm.info Tip Line (Anonymous, Non-Urgent): 1-855-547-5938
Cabot Square Project	Urban Indigenous outreach, mediation, and support in Cabot Square (Atwater Metro)	Website: https://www.nwsm.info/en/cabot-square-project
Miyoskamin (second stage, transitional housing for Indigenous women and their children)		Website: https://www.miyoskamin.com/ Email: info@miyoskamin.com
Saralikitaaq (Community Social Pediatric Centre for Indigenous children; in partnership with Miyoskamin)		Website: https://www.miyoskamin.com/saralikitaaq-clinic Phone: (438) 380-6476 Email: info@saralikitaaq.com

Resource	Service	Contact
First Peoples Justice Centre	Justice system support & navigation for Montreal's Indigenous population, healing and restorative justice programs, Elder-led support circles	Website: https://reseautlnetwork.com/en/organisations/first-peoples-justice-center-of-tiohtiake-montreal/ Phone: (514) 840-9485 Address: 3500 Av. Laval, Montréal, QC H2X 3C8
Indigenous Health Centre of Tiohtià:ke (IHCT)	Indigenous-led urgent care clinic, including access to: Physicians, nurses, health navigation, intervention programs, 60s Scoop Healing program, addictions counselling, Elder-led programs, traditional healing services, etc.	Hours: Monday to Friday, 9:00am-4:00pm Website: https://www.ihct.ca/
Native Friendship Centre of Montréal	Community services, cultural supports, Indigenous health clinic	Website: https://www.nfcm.org/en/
P.A.Q. (Projet Autochtone du Québec)	Shelter, housing, and supportive services rooted in empowerment and harm reduction	Website: https://www.paqc.org/ Phone: 514-879-3310 To contact a psychosocial worker: 514-879-3310 #202 Email: info@paqc.org
Indigenous Health Clinic, Médecins du Monde (Doctors of the World)		Locations: Native Friendship Centre of Montreal; PAQ 1 Shelter Website: https://www.nfcm.org/en/our-work/indigenous-health-clinic/ ; https://doctorsoftheworld.ca/help/indigenous-navigators
Tshuapamitin	Create culturally safe spaces where Indigenous youth find support, opportunities, and a sense of belonging	Website: https://www.tshuapamitin.ca/

1.3. Services for Everyone (General Support Services)

These services are available to the broader population, including survivors of violence and their families:

Resource	Service	Contact
Montreal Sexual Assault Centre		Website: https://cvasm.org/en/
GAIHST Inc.	Helps people who have been subjected to sexual and/or psychological harassment at work	Website: https://gaihst.qc.ca/en/home
Sidalys	Various types of shelters for vulnerable and marginalized people afflicted with sexually transmitted or blood-borne diseases, including HIV/AIDS	Website : https://sidalys.org/en/
Crime Victims Assistance Centres (CAVAC):		1-866-532-2822
Fédération des maisons d'hébergement pour femmes		514 878-9757
Fédération québécoise des organismes communautaires Famille		Website: https://fqocf.org/
Montreal Network		Website https://reseautlnetwork.com/index/

1.4. Services for Women and Gender-Diverse People

These organizations provide shelter, counselling, accompaniment, and long-term recovery support for survivors of gender-based and sexual violence:

Resource	Service	Contact
Native Women's Shelter of Montreal	Shelter and support to First Nations, Inuit and Métis women and their children	Website: https://www.nwsm.info/ Phone: (514) 933-4688; Toll Free: 1-866-403-4688 Email: contactus@nwsm.info
LogiFem	Support and accommodation to women and children, equipping and empowering women and children to break the cycle of homelessness and rebuild their lives.	Phone: 514-939-3172 Website : https://logifem.org/
Women Aware		Support Line: 1-866-489-1110 Website: https://www.womenaware.ca/
Consent Collective (formerly West Island CALACS)	Sexual Assault Support and Advocacy Centre	Website: https://collectifconsenti.ca/en/
CALACS Trêve pour Elles	Sexual Assault Support and Advocacy Centre	Website: https://trevepourelles.org/ Call : 514-251-0323
Regroupement québécois des centres d'aide et de lutte contre les agressions à caractère sexuel (CALACS)		Website: https://rqcalacs.qc.ca/en CALACS in Montreal: http://agressionsexuellemontreal.ca/reseau-des-services-en/reseau-communautaire-en/calacs-en
Sheltersafe.ca:	Provides information and a clickable map to help connect women and their children across Canada with the nearest shelter for safety and support.	
iHEAL app	A free, private and secure app to help Canadian women who have experienced abuse from a current or past partner find personalized ways to stay safe and be well.	

1.5 Services for Children, Youth, and Families

These services support children and families affected by violence, trauma, and exploitation, including culturally grounded services for Indigenous youth:

Resource	Service	Contact
Saralikitaaq	Community Social Pediatric Centre for Indigenous children; in partnership with Miyoskamin)	Website: www.miyoskamin.com/saralikitaaq-clinic Phone: (438) 380-6476 Email: info@saralikitaaq.com
Sphères Program (Programme sphères)	Supporting youth (aged 12-24) in Montreal who have experienced sexual exploitation (past or present)	Website: www.programmespheres.ca/en/
Ékip Jeunesse	Supplies and materials for vulnerable youth ages 16-25, including those transitioning out of Youth Protection. Provides clothing, transit passes, food, starter kit for an apartment, hygiene products, referrals for all their needs.	Address: 5498 rue Hochelaga, porte B, local 575, Montréal, QC Website: www.ekipseunesse.ca/fr/ More info: montreal.citynews.ca/2026/02/26/ekipseunesse-montreal-youth-transition-protection-services/

Resource	Service	Contact
Maison Oxygène Montreal (Men/Fathers)	Temporary housing and psychosocial support for fathers experiencing personal, social, family, or relationship crises, with a focus on strengthening their relationship with their children.	Website: www.carrefourfamilial.com/maison-oxygene-montreal/ Call: 514 655-6625 Email: oxygene@carrefourfamilial.com
Parents Anonymous	Offers a listening service for parents having trouble dealing with their children (24/7)	Tel: (514) 288-5555
Kids Help Phone:	Offers 24/7 mental health support across Canada for kids, teens and young adults.	Call: 1-800-668-6868 (toll-free) Text: CONNECT to 686868
NeedHelpNow.ca	Helps teens stop the spread of sexual pictures or videos and provides support along the way.	Website: www.needhelpnow.ca/en/
Child and Youth Protection Services (DYP)	Inform the DYP about a situation that you are concerned about or that causes you to believe that a child's security or development is in danger.	Website: www.quebec.ca/en/family-and-support-for-individuals/childhood/youth-protection Call: 514-935-6196
En Marge 12-17	Individual or group services for parents of runaway youth affected by prostitution and/or substance abuse. Youth program offers support, housing and supervised apartments (Montreal). Phone consultations are not restricted to the territory.	Call: 1 (514) 849-7117 Website: www.enmarge1217.ca/
Marie-Vincent Foundation	Counselling services to refer a child in need of therapeutic services for children who are victims of sexual violence.	Call: 1 877 285-0505 Website: https://marie-vincent.org/en
Important Helplines – Montreal Children Hospital		Website: https://montrealchildrenshospital.ca/helplines/
Tshuapamitin	create culturally safe spaces where Indigenous youth find support, opportunities, and a sense of belonging	Website: https://www.tshuapamitin.ca/

1.6 Services for Men

Resource	Service	Contact
Elder-led Sharing Circles and Support Programs in Montreal		Don Barnaby – Addictions and Trauma Support Services, IHCT Email: don.barnaby@icloud.com Call: 514-434-8136; or 514-482-8557 (IHCT) Mike Standup – Traditional Healer/Teacher Call: 514-482-8557 (IHCT) Delbert Sampson & Jean Stevenson Call: 514-840-9485 (First Peoples Justice Centre)
À cœur d'homme	Network of 46 community-based organizations offering support to men dealing with violent behaviour in domestic and family settings. Referrals to clinics in different regions in Quebec. Ask for the English-speaking clinics.	Call: 1 877 660-7799 Website: https://www.acoeurdhomme.com/

Resource	Service	Contact
Criphase	Resource and intervention centre for male victims of sexual abuse and their loved ones	Website: https://criphase.org/en
Centre de ressources pour hommes de Montréal (in French only)	Welcoming and supporting men who are experiencing difficulties	Website: https://www.crhmontreal.ca/ Call: 514-355-8300
Groupe Amorce (in French only)	Prevention, assessment, therapy, and peer support for men who have committed sexual offences or who experience sexual attraction to children or adolescents, whether or not they have acted on these urges.	Website: https://groupeamorce.com/ Call: 514 355-8064
Maison Oxygène Montreal	Temporary housing and psychosocial support for fathers experiencing personal, social, family, or relationship crises, with a focus on strengthening their relationship with their children.	Website: https://carrefourfamilial.com/maison-oxygene-montreal/ Call: 514 655-6625 Email: oxygene@carrefourfamilial.com
Option	Support, follow-up, and psychotherapy for adults (men and women) who use violence in intimate partner or family relationships.	Website: https://optionalternative.org/ Call: 514-527-1657
PRO-GAM	Helps men take responsibility for violent behaviours with their partner and children. Psychotherapy sessions aim to support them with finding alternatives to violence. In person, located in Montreal.	Website: http://www.pro-gam.ca/en/home.html Call: 1 514 270-8462
Regroupement des organismes pour hommes de l'île de Montréal (in French only)	Brings together organizations across Montréal that provide services for men to strengthen collaboration, amplify a shared voice around men's needs, and improve support for men in need.	Website: https://www.rohim.net/
Separated Fathers Inc.	Referral and support for men and separated fathers navigating family transitions after a breakup, with a focus on wellbeing, co-parenting, and strengthening the father-child relationship.	Website: https://www.peres-separes.qc.ca/home
Service d'Aide au Conjoints	For men experiencing relationship problems such as breakups, conflicts, jealousy and domestic violence.	Website: https://www.serviceaideconjoints.org/en/ Call: 514-384-6296
Réseau Maisons Oxygène	Fathers and their children can access emergency housing, support, and referrals to other services. Services and shelters located across the province. Some locations offer services in English, depending on the teams in place.	Website: https://maisonsoxygene.ca/nous-contacter/ Telephone: 438-504-4000 Email: reseau@maisonsoxygene.ca

1.7. Inuit-Specific Services

These services offer culturally relevant supports tailored to Inuit individuals and communities:

Resource	Service	Contact
Qavvivik, Inuit Family and Community Health Centre	For Inuit living in southern Quebec. Qavvivik is dedicated to improving the health of Siqinirmiut (Inuit living in the south) by providing and facilitating access to services that are culturally adapted, safe and responsible to the community.	Website: https://www.qavvivik.ca/ Email: infoqavvivik@gmail.com Call: 514-373-4596
Hope for Wellness Help Line		Phone: 1-855-242-3310 Online Chat: hopeforwellness.ca
Tunggasuvvinga Inuit	Cultural programming, social services, health and community support	Phone: 613-565-5885 Email: info@tunggasuvvingatinuit.ca
Inuit Tapiriit Kanatami (ITK)	National advocacy, health initiatives, and cultural programs for Inuit communities	
National Sixties Scoop Healing Foundation of Canada	Focus: trauma healing, cultural reclamation, wholistic wellness	Phone: 866-848-0025 Email: info@60sscoopfoundation.ca

1.8. Legal, Justice, and Victim Assistance Services

These services assist with legal navigation, court accompaniment, victim advocacy, and justice processes:

Resource	Service	Contact
First Peoples Justice Centre	Justice system support & navigation for Montreal's Indigenous population, victim services, healing and restorative justice programs, Elder-led sharing circles	Website: https://cjppm.org/ Phone: 514 840-9485 Email: info@justicemontreal.ca Address: 3500 avenue Laval, Montréal/Tiohtià:ke (Québec), H2X 3C8
SPVM (Montreal Police Service) – Indigenous Liaison Officer		Alexandre Blouin-Dussault (mat. 7659), Prevention and Urban Safety Division Email: a.blouindussault@spvm.qc.ca Cellphone: (514) 502 – 4873 Address: 1441, rue Saint-Urbain, 6th floor, Montreal, QC, H2X 2M6
Infocrime	Anonymous and confidential way to signal an incident to police	Website: https://www.infocrimemontreal.ca/en/
Rebâtir	4 hours of FREE, confidential legal advice for victims of sexual abuse and domestic violence	Website: https://www.rebatir.ca/index-1.htm?lang=en By phone: 1-833-REBÂTIR (1-833-732-2847) By email: projet@rebatir.ca
Jordan's Principle	Jordan's Principle is a child-first principle to ensure First Nations children get the services they need when they need them.	Call: 1-855-JP-CHILD (1-855-572-4453) Website: https://www.sac-isc.gc.ca/eng/1568396296543/1582657596387
Bureau de Consultation de Jeunesse	Helpline for youth in difficulty who want information or who want to know their rights.	Call: (514) 270-9760 or Call: (514) 274-9887
Commission des services juridiques (Legal Aid Québec)		Website : https://www.csj.qc.ca/commission-des-services-juridiques/lang/en

Resource	Service	Contact
Crime Victims Assistance Centres (CAVAC)		Website : https://cavac.qc.ca/en/ Call : 1 866 532-2822
Plaidoyer-Victimes	Defend and promote the collective rights and interests of persons who are victims of criminal offenses	Website: https://en.aqpv.ca/en/welcome-to-the-aqpv/
À cœur d'homme	Network of 46 community-based organizations offering support to men dealing with violent behaviour in domestic and family settings. Referrals to clinics in different regions in Quebec. Ask for the English-speaking clinics.	Call: 1 877 660-7799 Website: https://www.aceurdhomme.com/

1.9. Resources and Support Links for 60s Scoop Survivors

Resource	Service	Contact
National Sixties Scoop Healing Foundation	Healing and reconciliation programs, cultural support, mental health services, and educational initiatives.	Website: https://www.sixtiesscoophealingfoundation.ca Phone: 1-866-848-0025 Email: info@60sscoopfoundation.com
Sixties Scoop Indigenous Society of Alberta	Program Details: Provides education, advocacy, and community for survivors.	Website: https://www.ssisa.ca/ Phone: 587-520-5910
The 60's Scoop Network	Program Details: Provides resources for survivors to share their stories and connect with others.	Website: https://sixtiesscoopnetwork.org/60scoopmap Email: info@60sscoop.com
The Indigenous Foundation	Program Details: Provides education and resources on Indigenous issues.	Website: https://www.theindigenousfoundation.org/ Contact: Use website's contact form.
National Indian Residential School Crisis Line	Crisis intervention, emotional support, and referral services for survivors of the Sixties Scoop and residential schools.	Phone: 1-866-925-4419 (24/7)
Indigenous Services Canada - First Nations and Inuit Hope for Wellness Help Line	Immediate mental health counselling and crisis intervention.	Website: www.hopeforwellness.ca Phone: 1-855-242-3310 (24/7)
Native Women's Association of Canada (NWAC)	Advocacy, cultural programs, health and wellness services, and legal support for Indigenous women and their families.	Website: www.nwac.ca Phone: 1-800-461-4043 Email: reception@nwac.ca
The Canadian Centre for Child Protection	Support and resources for survivors of child exploitation, including those affected by the Sixties Scoop.	Website: www.protectchildren.ca Phone: 1-800-532-9135 Email: contact@protectchildren.ca
Assembly of First Nations (AFN)	Advocacy, policy development, and support services for First Nations communities, including Sixties Scoop survivors	Website: www.afn.ca Phone: 1-866-869-6789 Email: info@afn.ca
Truth and Reconciliation Commission of Canada	Resources and educational materials related to the impacts of the Sixties Scoop and other colonial policies.	Website: www.trc.ca Phone: 1-888-872-5554 Email: info@trc.ca

Resource	Service	Contact
First Nations Health Authority (FNHA)	Health and wellness programs, mental health services, and cultural support for First Nations communities.	Website: www.fnha.ca Phone: 1-844-364-7878 Email: info@fnha.ca
Inuit Tapiriit Kanatami	Advocacy, health programs, and cultural support for Inuit communities.	Website: www.itk.ca Phone: 1-613-238-8181 Email: info@itk.ca
Legacy of Hope Foundation	Educational resources, exhibits, and healing initiatives related to the Sixties Scoop and residential schools.	Website: https://legacyofhope.ca/ Phone: 1-877-553-7177 Email: info@legacyofhope.ca
BearPaw Legal Education & Resource Centre	Legal education, resources, and support for Indigenous people, including Sixties Scoop survivors.	Website: www.bearpawlegalresources.ca Phone: 1-780-451-4002 Email: info@bearpawlegalresources.ca
Tungasuvvingat Inuit	Health and social services, cultural support, and community programs for Inuit people.	Website: https://tiontario.ca/ Phone: 1-613-565-5885 Email: info@tungasuvvingatinuit.ca

Online Toolkits and Resource Hubs

1.10. Anti-Trafficking Resources

These resources provide guidance for identifying trafficking, supporting survivors, and connecting individuals to safe services:

Resource	Contact
Safe Passage Resource Hub	Website: https://safe-passage.ca/safe-passage-resource-hub/
Community Violence Prevention Booklet (Anti-Trafficking Toolkit)	Website: https://safe-passage.ca/wp-content/uploads/2022/09/violence-prevention-community_member_booklet.pdf

1.11. Guides and Resource Directories

Resource	Service	Contact
Non-Violence Resources, Quebec Native Women		Website: https://faq-qnw.org/en/projects/non-violence/
Quebec Native Women – Family Violence Prevention Resource Guide for Quebec First Nations (bilingual)		Website: Family violence prevention resources guide for Quebec First Nations
211 Grand Montreal Guide: Organizations for Indigenous Peoples	Category of Services: Health and Social Services, Housing, Community Support, Employment, Government Services	Website: https://www.211qc.ca/en/indigenous-peoples
First Nations of Quebec and Labrador Health and Social Services Commission		Website: www.cssspnql.com
Domestic Violence Supports, Government of Quebec		Website: https://www.quebec.ca/en/family-and-support-for-individuals/violence/conjugal-violence

Resource	Contact
Public Health Agency of Canada – Family Violence Services Directory	Website: https://www.canada.ca/en/public-health/services/health-promotion/stop-family-violence/services.html
Regroupement des maisons pour femmes victimes de violence conjugale	Website: https://www.maisons-femmes.qc.ca/violence-conjugale/
Coercive Control – Visual Tools (free to print)	Website: https://www.maisons-femmes.qc.ca/publications/
Fédération des maisons d'hébergement pour femmes (shelters network)	Website: https://fmhf.ca/
Criphase – Resource and intervention centre for male victims of sexual abuse and their loved ones	Website: https://criphase.org/en

Training and Documentation for Caseworkers

1.12. Intervention Guides and Toolkits

Resource	Contact
You Are Not Alone: A Toolkit for Indigenous Women, Girls, and Gender-Diverse People Escaping Domestic Violence	Website (PDF): https://ncpei.com/wp-content/uploads/2023/01/2018-Yana-Handbook-English-Final-1.pdf
Native Women's Association of Canada	Safe Passage Website: https://nwac.ca/wg2stgd/mmiwg2s/safe-passage/ General Website: https://nwac.ca/
Safe Passage Anti-Trafficking Toolkit (PDF)	Link: https://safe-passage.ca/wp-content/uploads/2022/09/violence-prevention-community_member_booklet.pdf
Sexual Violence Helpline	Website: https://sexualviolencehelpline.ca/
Terminating a Lease in Quebec as a Tenant in a Situation of Sexual Violence, Spousal Violence, or Violence Towards a Child	Website: https://www.quebec.ca/en/housing-territory/renting/leases/terminate-lease-domestic-violence-sexual-assault
NWAC's Housing Toolkit For Pets:	Website (PDF): https://nwac.ca/wp-content/uploads/2025/05/Safe-Passage-Pets.pdf

1.13. Readings and Reference Documents (For In-Depth Learning)

These documents support culturally safe, trauma-informed, and survivor-centred intervention practices:

Resource	Contact
Coercive Control Toolbox, by the Regroupement des maisons pour femmes victimes de violence conjugale	Website (documents available for download): https://maisons-femmes.qc.ca/campagnes-de-sensibilisation/improving-justice-system-practices-to-increase-the-safety-of-women-who-are-victims-of-intimate-partner-violence/
Quebec Native Women	Website: https://faq-qnw.org/en/projects/non-violence/
Guidance for Creating Safer Environments for Indigenous Peoples:	Website: https://iphcc.ca/wp-content/uploads/2022/08/NE_IKKAANIGAANA_TOOLKIT.pdf .
Anishinabek Nation toolkit	Website: https://www.anishinabek.ca/Flipbooks/Nshiimenhiig.html
Book – Indigenous Relations: Insights, Tips & Suggestions to Make Reconciliation a Reality, by Bob Joseph (2019).	

NOTE: The 'References and Resources Consulted' section below can be consulted for additional in-depth reading recommendations.

1.14. Training Opportunities for Organization Staff

In addition to written toolkits and reference documents, ongoing staff training is essential to ensure that organizations respond to family violence in culturally safe, trauma- and violence-informed, and survivor-centred ways.

These training opportunities support staff capacity-building in trauma- and violence-informed care, cultural safety, family violence awareness, and survivor-centred practices. Organizations are encouraged to engage in ongoing professional development to ensure safe, culturally responsive, and effective service delivery:

Resource	Contact
Marie-Vincent – Training for Professionals working with children and teenagers	Website: https://marie-vincent.org/en/train/training-for-professionals/
CAAN: Honouring Our Spirits Gender-Based Violence Prevention (in-person training)	Website: https://www.caan.ca/honouring-our-spirits-gender-base-violence-framework-project/
Public Health Agency of Canada: Education and awareness materials for clients and others who are dealing with family violence	Website: https://www.canada.ca/en/public-health/services/health-promotion/stop-family-violence/education-awareness-materials-clients-family-violence.html
RISE (Recognizing and Responding to Human Trafficking) Training Module	Website: https://rise.articulate.com/share/KwyBpdzzOST8L1D9K5aNyQINcJecGfM8#/
Western University – Gender-Based Violence and Prevention Certificate	Website: https://wcs.uwo.ca/public/category/courseCategoryCertificateProfile.do?method=load&certificateId=36588957
VEGA Project (Violence, Evidence, Guidance, Action) Workshops – McMaster University	Website: https://vegaproject.mcmaster.ca/workshops/
Luna Child and Youth Advocacy Centre – Training and Resource Hub	Website: https://www.lunacentre.ca/resources
Criphase Training (Training for working with men, aimed at better equipping professionals/ organizations to address the issue of sexual abuse experienced by men)	Website: https://criphase.org/en/services/training-sessions
Partners in Prevention – Emotional and Verbal Abuse eBook (Dr. Jeanne King)	Website: https://partners-in-prevention.org/wp-content/uploads/2025/12/Emotional_Verbal_Abuse_eBook_DrJeanneKing_2009c.pdf
Public Health Agency of Canada – Learn About Family Violence	Website: https://www.canada.ca/en/public-health/services/health-promotion/stop-family-violence/learn-about-family-violence.html
Option – Conjugal Violence Training and Clinical Seminars	Website: https://optionalternative.org/formations-et-seminaires-cliniques/

Non-Insured Health Benefits (NIHB)

Resource	Service	Contact
Non-insured health benefits for First Nations and Inuit	Coverage for a range of health benefits for eligible First Nations and Inuit clients who are not covered by social programs, private insurance plans or provincial or territorial health insurance plans.	Website: www.sac-isc.gc.ca/eng/1572537161086/1572537234517 Phone: 1 877 483-1575
<p>Reimbursement process: www.sac-isc.gc.ca/eng/1579811474530/1579811499194 *</p> <p>How to appeal a decision: www.sac-isc.gc.ca/eng/1579792696583/1579792732972</p> <p>Eligibility: First Nations, Inuit, children under 2 years of age with a parent eligible for the NIHB program</p> <p>Coverage area: Canada</p> <p>Hours: Monday to Friday 9h00 to 18h00</p> <p>Financing: federal</p> <p>Legal status: federal government agency</p>		

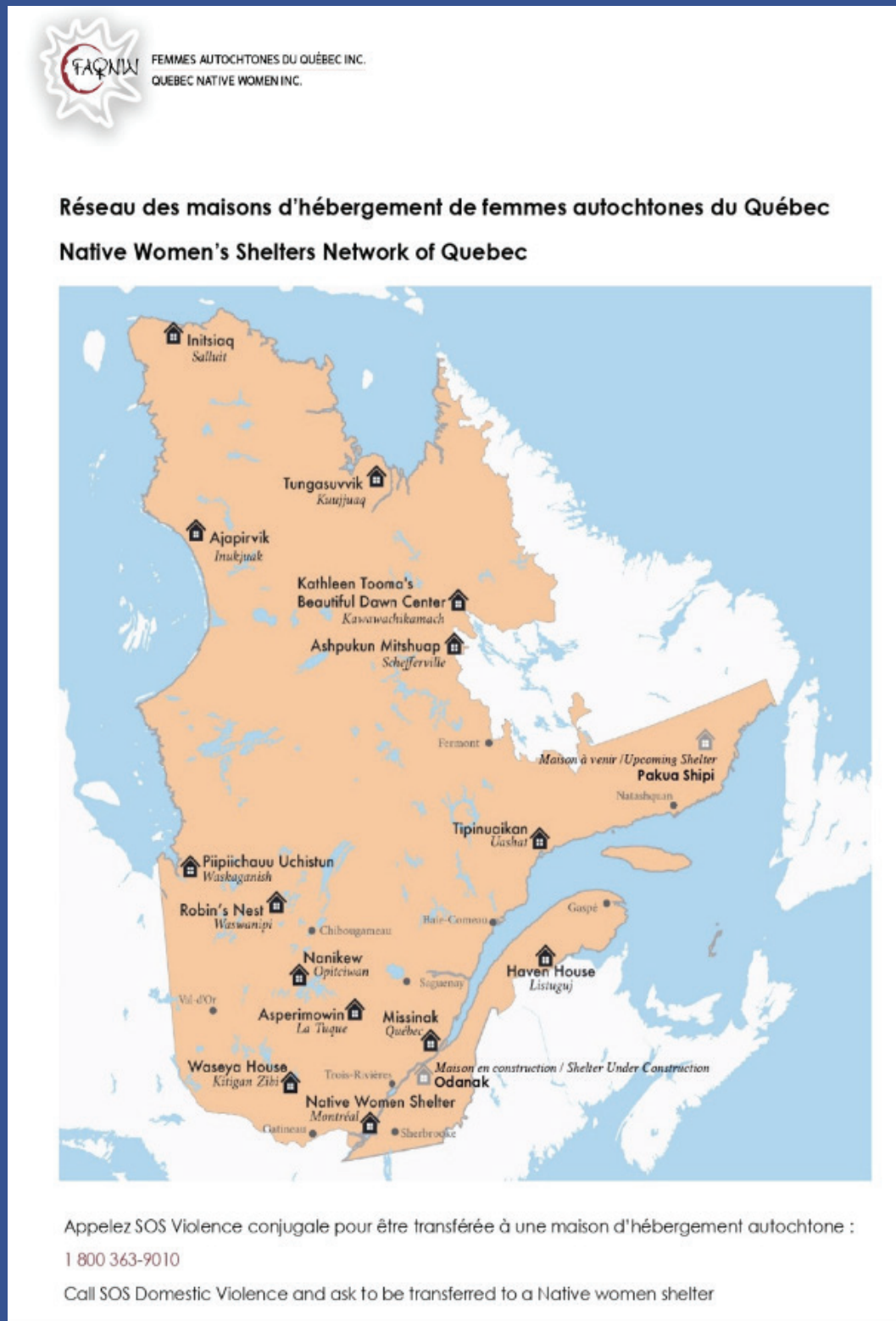
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Appendix A

Map of Native Women's Shelters In Quebec

Figure: <https://faq-qnw.org/en/projects/non-violence/>



Appendix B

Glossary of Relevant Terms (1/2)

Figure: 81

GLOSSARY	
Cultural Safety	A state whereby a service provider recognizes and strives to address power imbalances inherent in the system. It results in an environment free of racism and discrimination, where people feel safe receiving services.
Coercive Control	Fear-producing types of control and abuse are used by one person, including using threats and force, to influence another person's behaviour or regulate another's behaviour; this may include restricting a person's access to school, work, or health services and isolating a person from friends and family.
Community Intervention Order (CIO)	A tool within the Family Abuse Intervention Act (FAIA) may require perpetrators and victims to undergo community interventions such as traditional Inuit counselling.
Criminal Harassment	Repeated behaviour that produces fear for a person's safety or the safety of their loved one, including behaviours like following, watching, and tracking a person or unwanted, abusive, and repeated contact through phone calls, texts, email, and social media; also referred to as stalking.
Cyber Violence	The use of technologies to cause harm either in person or virtually, including observing and tracking a person's location to humiliate, intimidate, or otherwise harm a person; also referred to as technology-facilitated violence.
Decolonization	There is no standard definition of decolonization, yet in the context of Inuit communities and intimate partner violence (IPV), decolonization may be understood as actions that recognize and move away from harmful ideas and behaviours about Inuit created by colonization. Decolonization also involves a reclamation of power and control by the colonized population.
Emergency Protection Order (EPO)	A tool within the Family Abuse Intervention Act which restrains the abuser from engaging in certain behaviours and prohibits contact with the victim(s).
Emotional Abuse	It also refers to psychological abuse and includes insulting, humiliating, intimidating, threatening, and belittling a person.
Family Abuse Intervention Act (FAIA)	Civil legislation was created in Nunavut in 2008, which is aimed at preventing and minimizing the escalation of family abuse. The Act is based on Inuit values and principles and provides tools and opportunities to address abuse separate from the mainstream criminal justice system.
Financial Abuse	Control or misuse of money, property, or other economic assets through financial means, including controlling a partner's ability to gain access to employment or school.
Free, Prior, and Informed Consent (FPIC)	FPIC is the specific right of Indigenous peoples to give or withhold consent for interventions that may impact them and their territories. FPIC is recognized and affirmed in the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP). Free implies consent is given in the absence of coercion, manipulation, or intimidation; Prior implies consent is sought well in advance of the proposed start of the activities; Informed means information about the proposed project or activity is shared before and throughout the action; Consent is understood as a collective decision made by rights-holders reached by a process determined by the community.
Gender-Based Violence (GBV)	GBV is the harm inflicted upon someone based on their gender, gender identity, gender expression, or perceived gender.
Gladue Principle	A principle applied in criminal court where the unique circumstances and experiences of the Indigenous person accused are considered when deciding on a sentence, such as their background and the impact of colonialism and discrimination. Gladue Principles mandate judges to consider alternative options to incarceration appropriate to Indigenous heritage and connection, such as restorative justice; this can include indictments related to physical, sexual, spiritual, financial, and emotional (psychological) abuse, and controlling behaviours by an intimate partner.

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81. Pauktuutit Inuit Women of Canada, SAIMANIIK: Survivors of Intimate Partner Violence and the Family Justice System Response Training Resource, https://pauktuutit.ca/wp-content/uploads/2025/03/Saimaniik-Toolkit_ENG.pdf, 6.

Appendix C

Glossary of Relevant Terms (2/2)

Figure: ⁸²

Homophobia	Hatred or other forms of disgust are expressed toward people who are gay or perceived as gay. Examples of homophobia can include disparaging comments, exclusion, and targeted violence.	Sexual Violence	Sexual acts undertaken without consent, threats of negative consequences for not wanting to participate in sexual activity, use of belittling sexual comments, and sexually degrading language.
Intersectionality	Refers to the complex ways people's lives are shaped by social identities, systems of oppression, and how they overlap.	Systemic Racism	This is the highest level of racism, also known as structural or institutional racism. Systemic racism creates an unequal distribution of power and resources for racialized people, including Inuit. Examples include access to safe housing, clean water, nutritious food, safety, educational opportunities, and health care.
Intimate Partner Violence (IPV)	This can include physical, sexual, spiritual, financial, and emotional (psychological) abuse and controlling behaviours by an intimate partner.	Transphobia	Hatred and dislike toward people who are transgender or those who express their gender outside of rigid social norms. Examples of transphobic behaviour can include denying their identity and asking overly personal questions about targeted violence.
Inuit Nunangat	Inuit homeland in Canada encompasses the land claims regions of Nunavut, Nunavik in Northern Quebec, Nunatsiavut in Northern Labrador, and the Inuvialuit Settlement Region of the Northwest Territories. It is inclusive of land, water, and ice.	Trauma-Informed	Being aware of, understanding, anticipating, and responding to the unique needs of trauma survivors, including steps to reduce the retraumatization risks, such as promoting environments of healing and recovery. Trauma-informed care shifts the focus of service providers from "What is wrong with you?" to "What happened to you?"
Inuit Qaujimagajuqangit (IQ)	Inuit Traditional Knowledge includes beliefs, laws, principles, values, skills, and ways of being.	Trauma-and Violence-Informed Care (TVIC)	This is an expanded version of trauma-informed care. TVIC takes particular care to understand and be inclusive of contexts of past, ongoing, and institutional violence.
Physical Abuse	Abuse is either using physical force such as hitting, punching, shoving, cutting, strangulation, etc., or the threatened use of physical force to harm a person.	Warm Handoff	This is a care transfer between professionals, including the person accessing services. Examples of a warm handoff include introducing the person to the next service provider and supporting them to attend appointments as much as possible. People supported by a warm handoff are more likely to engage in services.
Qallunaat	Inuktitut word used to describe white colonizers and white settler descendants.		
Reproductive Coercion	Control of reproductive choices such as pregnancy outcomes and access to reproductive health services.		
Restorative Justice	A set of principles and approaches to justice that focus on repairing harm through enabling the person(s) who caused the damage, the persons(s) who were affected by the harm, and the community to create an appropriate and meaningful solution.		

Appendix D

What happens if...?

What happens if you report the person who abused you?

If you have been assaulted, you should tell the police about the abuse. They might charge the person who assaulted you.

The police might arrest the person if they believe the person has broken the law. If this is the case, the person who abused you might stay in jail a few hours until the bail hearing, or maybe longer, depending on what the judge decides.

If you are afraid for your safety, ask the police to notify you before the person is let go. Make sure the police know how to contact you.

The judge may set out rules for the release of the person who abused you. For example, the judge may order that the person is not allowed to call or see you. If they do not obey the rules, they can be arrested again.

If you are afraid of being hurt when the person is released from jail, you may want to find a safe place to stay, such as a shelter.

In some provinces and territories, you may be able to get a noncriminal family violence order, such as a court order that tells the person who was abusive that they must not communicate or contact you. The order might give you use of the family home for a period of time. You can ask for legal help for more information on how to go about this.

What happens if the police charge the person who abused you?

If the person who abused you pleads guilty to assault, the judge will decide on a sentence. The sentence may be a fine or probation. The person who abused you might also have to get counselling. The judge might also order time in jail. In deciding whether to order a jail sentence, the judge will consider many things. For example, the judge will consider whether this is a first offence and the severity of the abuse.

If you are afraid, tell the Crown attorney or your victim services worker. If the person who abused you gets probation, the judge might release them with conditions.

If the person who abused you tells the judge that they are not guilty, then there will be a trial. It may be several months before the trial starts. You will have to be a witness at the trial. You may be allowed to speak to the judge from behind a screen or from another room by closed-circuit television so that you do not have to see the person who abused you. You may also have a support person, such as a friend or family member, near you while you testify if their presence would make you feel more comfortable.

If the person who abused you is found guilty, then the judge will decide on a sentence, such as a fine, probation or jail time.

You can ask the Crown attorney about victim services in your province or territory to help you and to explain the court process.

Appendix E

Two-pager Guide for Supporting Victims of Violence in Urgent Situations

1. Ensure Immediate Safety

If someone is in immediate danger, call 911.

If the situation is urgent but not life-threatening, help the individual connect with specialised crisis services.

Key Emergency Supports:

SOS Violence conjugale (24/7) – Crisis support, referrals to shelters, and safety planning

- Call: 1-800-363-9010 (toll-free, 24/7, bilingual)
- Text: 438-601-1211 (24/7, bilingual)
- LAFU* (Ligne d'aide financière d'urgence)
- Services: Emergency Financial Assistance Hotline for persons escaping violence situations:
 - Call: 1-833-363-5238
 - *Only a fieldworker in direct contact with a victim of domestic violence or sexual violence can make a request for Emergency Financial Assistance (visit: <https://lafu.ca/en>)

Sexual Violence Helpline

- Call: 514-933-9007 (local Montréal, 24/7, bilingual)
- Call: 1-888-933-9007 (toll-free, 24/7, bilingual)
- Online chat (24/7)

Hope for Wellness Helpline – 24/7 support for Indigenous peoples across Canada

- Call: 1-855-242-3310
- Online chat: www.hopeforwellness.ca

CAVAC (Centre d'aide aux victimes d'actes criminels) – Free and confidential support for victims of crime

- Call: 1-866-532-2822

Recommended Resource:

- You Are Not Alone: A Toolkit for Indigenous Women, Girls, and Gender-Diverse People Escaping Domestic Violence
- Website (PDF): <https://ncpei.com/wp-content/uploads/2023/01/2018-Yana-Handbook-English-Final-1.pdf>

Appendix E

2. Use the ‘LIVES’ Approach

When someone discloses violence, providers can use the LIVES approach to guide their response:

Listen

- Listen closely, with empathy and without judgment. Be attentive to signs that the person may be experiencing violence.
- Example responses: “That sounds really difficult.”

Inquire

- Assess and respond to the person’s needs and concerns (emotional, physical, social, and practical — i.e., childcare).
- Example responses: “What do you need right now?”, “How can I best support you?”

Validate

- Show that you understand and believe their experiences. If they disclose violence, reassure them that they are not to blame.
- Example responses: “You’ve survived a lot.”, “No one deserves to be treated this way.”

Enhance safety

- Discuss ways to reduce the risk of further harm.
- Example responses: “I’m really concerned for your safety.”, “I’d like to help you make a safety plan.”

Support

- Help connect them to information, services, and social supports.
- Example response: “Would it be okay if we contacted someone who could help support you?”⁸⁴

3. Connect to Ongoing Supports

Once immediate safety needs are addressed, help connect the individual with stable, culturally safe supports that can provide ongoing care and guidance (see Resource and Support Network).

These may include:

- **Indigenous Health Centre of Tiohtià:ke** – Offers Indigenous and Western healing approaches, including access to Elders, physicians, nurses, mental health specialists, and social workers. Call: 514-482-8557
- **Miyoskamin** – Transitional housing service for Indigenous women
- **First Peoples Justice Centre** – Support for those involved in the justice system (e.g., Victim Services Program).
- **Native Friendship Centre of Montréal** – Community services and cultural programs.
- **INDex** – A community database providing information on Indigenous programs and services in Tiohtià:ke/Montréal.

⁸⁴ Organisation mondiale de la santé, Responding to Children and Adolescents Who Have Been Sexually Abused: WHO Clinical Guidelines (Geneva: World Health Organization, 2017), <https://www.who.int/publications/i/item/9789241517102>.



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