



..... INITIATIVE TO END
GENDER-BASED VIOLENCE



FACILITATOR TRAINING AND WORKSHOP ON GBV FOR NEWCOMERS

**National Gender-Based violence (GBV) Strategy for
Agencies Serving Immigrants**

November 25th, 2024



GBV STRATEGY PARTNERSHIP PROJECT OVERVIEW

The National Gender-Based violence (GBV) Strategy for Agencies Serving Immigrants is a collaborative partnership between the anti-violence and settlement sectors to address GBV for newcomers, immigrants and refugees.

While there is much work to be done to prevent GBV, this strategy focuses on five key priorities for the settlement sector in collaboration with the anti-violence sector across Canada.

Priorities:

1. Increase access to information and resources about GBV
2. Challenge victim-blaming attitudes and beliefs
3. Enhance client centered services
4. Establish a common base of knowledge for service providers
5. Engage men and boys in GBV awareness



CONTENT WARNING



This presentation addresses sensitive topics related to gender-based violence, which may be distressing or triggering for some.

SELF-CARE

Please feel free to take breaks, move around or step out if needed during our presentation and also reach out for supports if you need to.

Prioritize setting boundaries, be kind to yourself, and pay attention to signs of burnout and compassion fatigue. Taking care of your well-being is essential to maintaining balance and resilience.

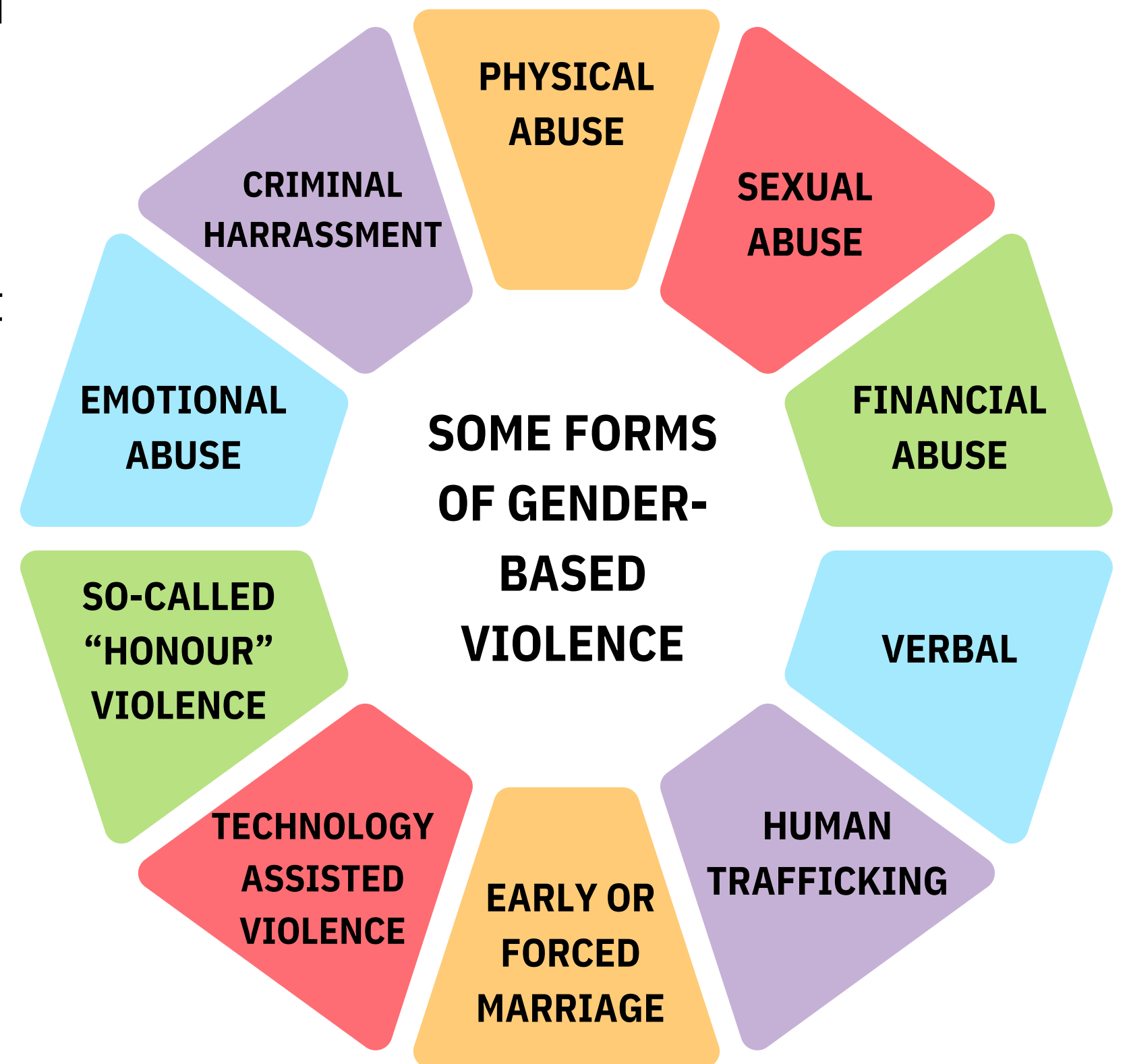


GBV DEFINITION & FORMS OF GBV

Gender-based violence (GBV) is violence that is committed against someone based on their gender identity, gender expression or perceived gender.

Sexual and gender-based violence (SGBV) refers to any act that is perpetrated against a person's will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion.

United Nations High Commission for Refugees UNHCR



THE IMPACTS OF GENDER-BASED VIOLENCE

Gender-based violence knows no bounds – it takes place in every community, every culture, and every sector of society. **It crosses all socio-economic backgrounds, races, ethnicities, cultures, abilities, sexual orientations, gender identities and occupations.** GBV affects everyone.

However, women and girls, indigenous people, 2SLGBTQIA+, those in rural areas, people with disabilities, racialized people, newcomers, children and youth, seniors are at a higher risk of experiencing violence and/or facing barriers to accessing services.

Engaging with this National Strategy empowers us to address GBV in our community organizations.

GBV IS AN URGENT PRIORITY

GBV DISPROPORTIONALLY IMPACTS WOMEN & GIRLS AND THOSE WITHIN THE 2SLGBTQIA+ COMMUNITY



1 in 3 (35%) of women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime. (WHO)

Every 6 Days a Women Is killer by her partner in Canada

One women or girl is killed every other day on average in Canada. From 2011 to 2021 93% were committed by a male intimate partner or family member of the victim

59% of LGBTQ+ people in Canada have experienced physical or sexual assault since the age of 15 (Stats Canada)

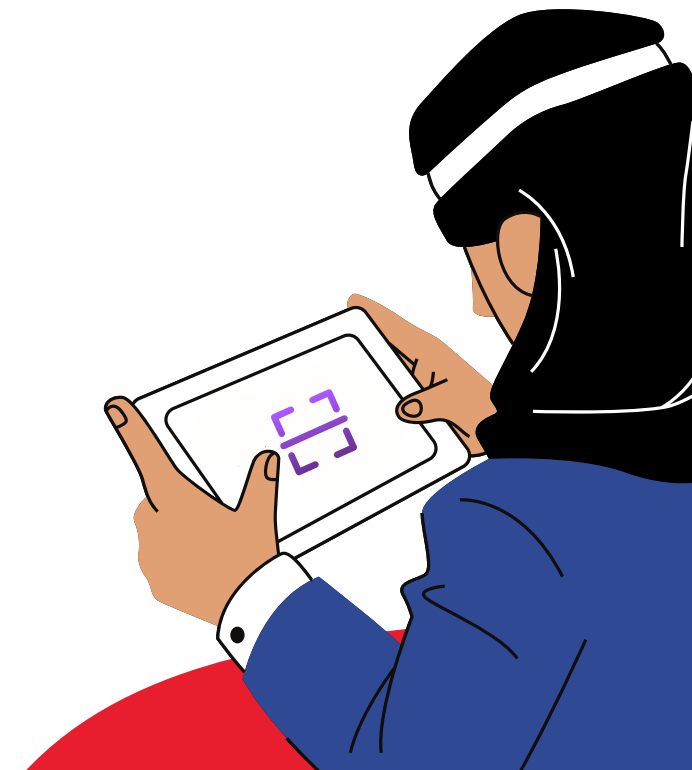
Men and Boys are less likely to report IPV/DV due to the stigma however Men and Boys can also be victims of GBV.

ACTIVITY

Question 1: What is your current understanding of gender-based violence?

Question 2: Do you have pre-made materials for GBV and newcomers?

Question 4: Why is having pre-made materials helpful for you or for the onboarding of new staff



NATIONAL FREE GBV NEWCOMER CLIENT WORKSHOP

1 Explain what gender-based violence (GBV) is and why it is an important issue in Canada.	2 Challenge common myths about GBV that rely on stereotypes about gender, race, and culture.
3 Identify 2 or 3 specific actions they can take to prevent, identify, or respond to GBV as a neighbour, friend, or family member.	4 Name 2 or 3 services available in their communities that can help newcomer families prevent GBV or access safety and healing from GBV.

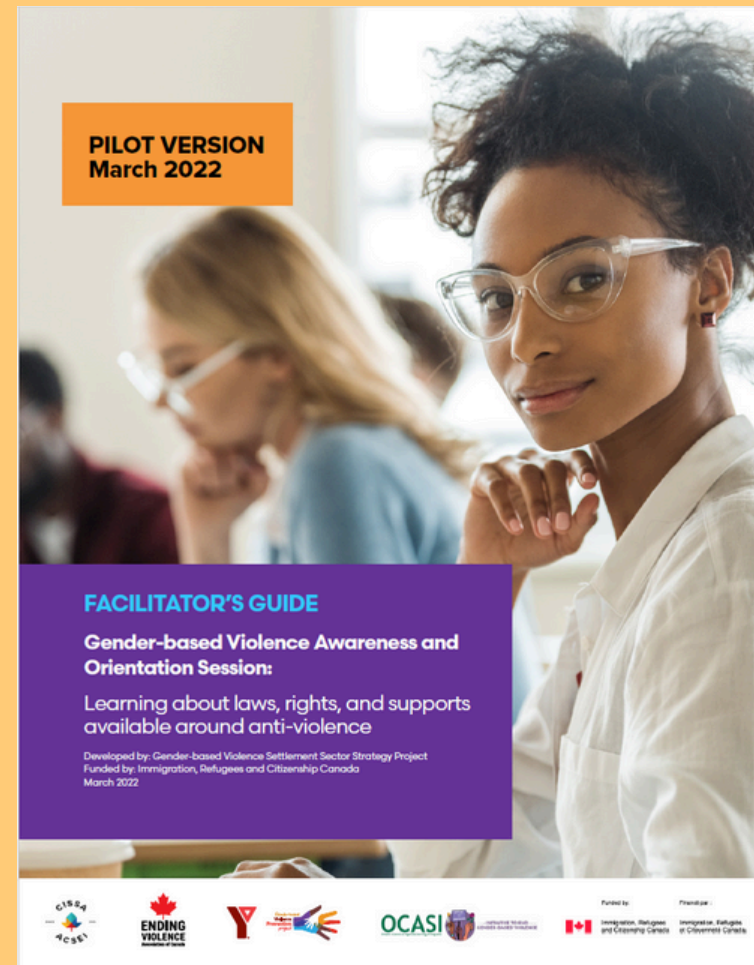
SESSION TOPICS



WORKSHOP DETAILS

- How and why it was created
- Who is it for?
- The launch of the Pilot
- Ongoing Delivery
- How to access the resources

CLIENT WORKSHOP MATERIAL



FACILITATOR GUIDE



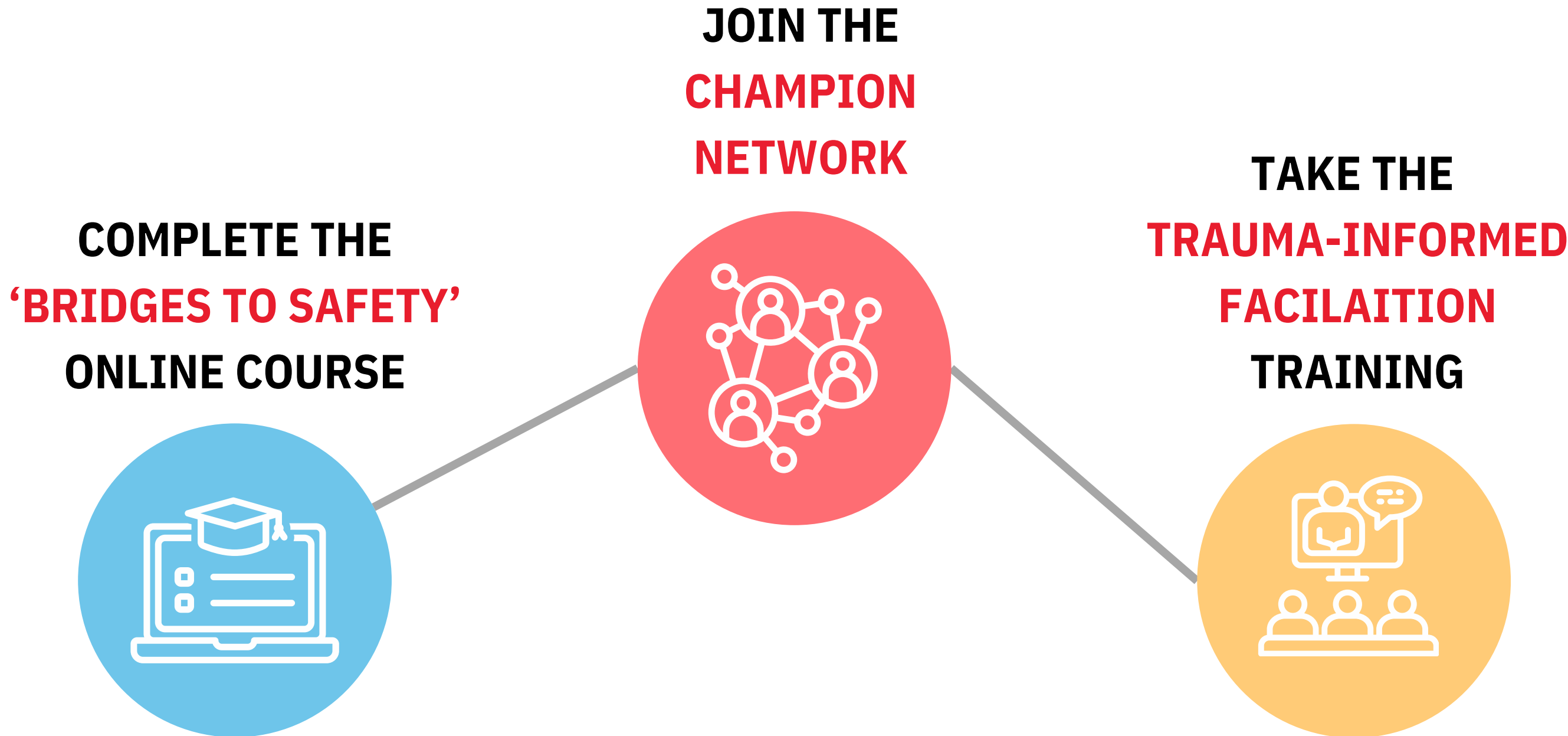
PPT- NEWCOMER WORKSHOP

Feedback Survey Suggested Questions

1. On a scale of 1 to 10, how confident do you feel about your knowledge of Gender-Based Violence (GBV) after attending the workshop?
2. Do you feel better informed about laws and regulations related to GBV after attending the workshop? (Scale of 1 to 10)
3. What was your favorite part of the workshop? Or please share one key concept or insight that you gained from the workshop.
4. What is something we can improve or suggestions for the future?
5. How likely are you to recommend this workshop to others who may benefit from it? (Scale of 1 to 10)
6. Other comments

SURVEY

BECOMING A FACILITATOR: PART 1



THIS WILL BE A SAMPLE AND INTRODUCTION INTO SOME KEY ELEMENTS



BECOMING A FACILITATOR: PART 2



TRAUMA-INFORMED FACILITATION

Strategies for enhancing safety and responding to disclosures



In Our training we provide the following:

- Explain what trauma-informed facilitation means.
- Describe steps you can take to prepare for any disclosures of violence that participants may share during or following the session.
- Identify strategies you can use to ensure confidentiality, create emotionally safe spaces, and avoid victim-blaming language.

UNDERSTANDING TRAUMA

“A traumatic event involves a single experience, or enduring repeated or multiple experiences, that completely overwhelm the individual’s ability to cope or integrate the ideas and emotions involved in that experience” (Toolkit 2013).

- Not determined by the event, but by an individual’s experience of the event.
- Often causes feelings of shame, due to sense of powerlessness that it creates.
- Can result in “triggers” and “fight, flight, freeze” responses
- Services that are not trauma-informed can mirror dynamics of power and control experienced.



BEING TRAUMA-INFORMED



- Goal is to minimize harm, not to treat trauma.
- Understanding how trauma impacts individuals and how it may impact participants
- Work to enhance safety, control, and resilience as a universal practice for all programs and services.
- “These approaches benefit everyone, whether or not they’ve experienced trauma in their lives or their personal history is known to service providers” (PHAC, 2018).

Key Components of Trauma Informed Care Principles

1. **Safety** - both physically and emotionally.
2. **Trust**- builds over time
3. **Empowerment**- Strength-based, lifting people up to make their own choices
4. **Collaboration**- with clients centered
5. **Choices** - connects back to impacts of trauma and give power and control back through agency and choice.

TRAUMA-INFORMED FACILITATION AND CREATING EMOTIONALLY SAFER SPACES



What steps can we take to prepare?

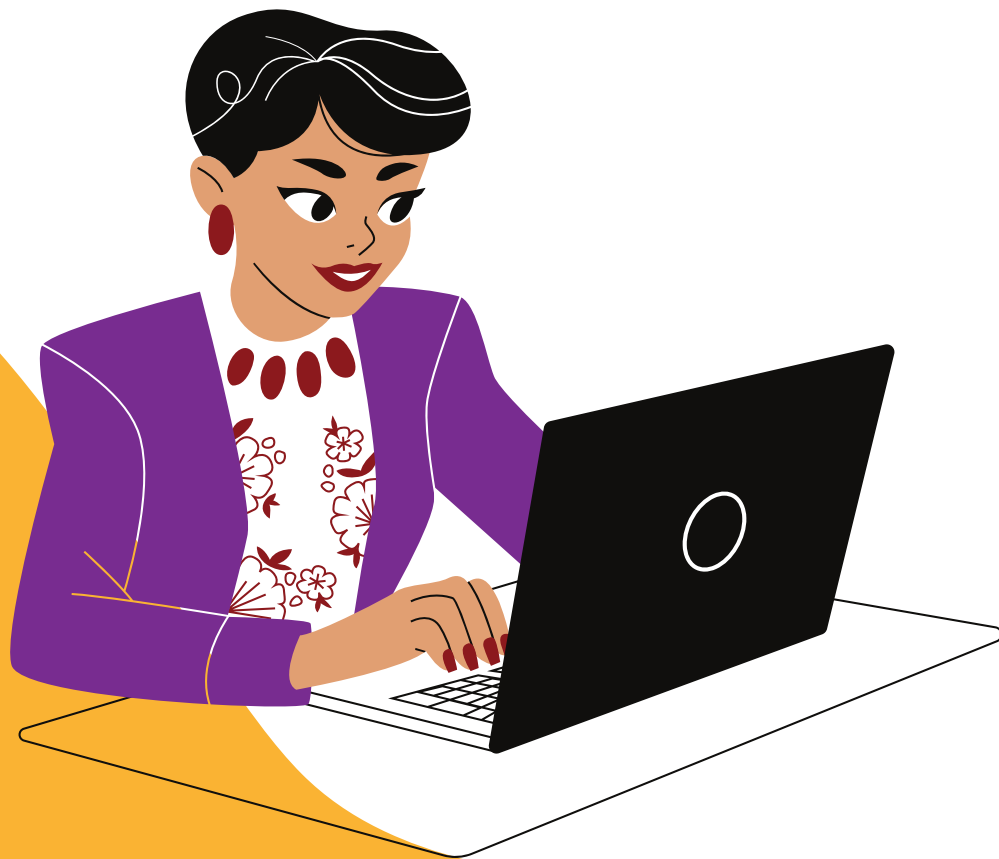
1. Self-awareness
2. Acknowledge the pervasiveness of trauma in society
3. Making the training universally accessible
4. Take steps to avoid re-traumatizing participants
5. Empowering Agency and Choice in participation
6. Recognizing how trauma may show up in groups
7. Being prepared for disclosures
8. Letting clients be informed of what material will be covered (content warning)
9. Plan for what to do if someone feels triggered
10. Have supports available and a plan for if someone does need support.

NAVIGATING DISCLOSURES

1. Reach out to the participant to encourage a private discussion. Ideally, there are two facilitators to allow follow-up facilitation. You can:

- Offer to call them after the workshop and check if a number, email, or contact is safe to use
- Use a breakout room to speak with the individual privately

2. Discuss the limits of confidentiality as you begin to address the disclosure. Inform the participant that if there is a threat of harm to a child, you may have a duty to report.



RESPONDING IN A TRAUMA- AND VIOLENCE- INFORMED MANNER

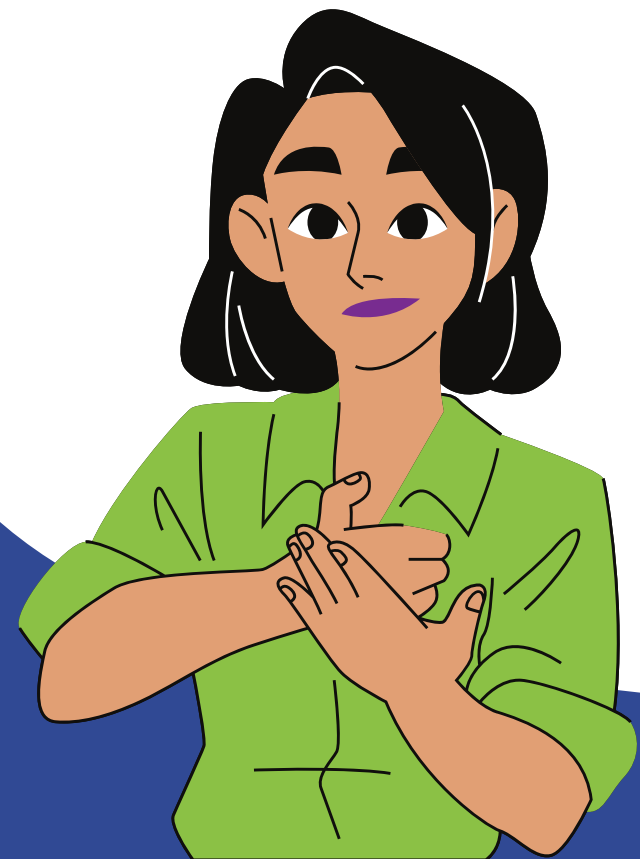


1. **Listen** without judgment
2. **Believe** and validate them
3. **Stay calm**, avoid strong emotional reactions
4. **Tell them** it is not their fault
5. **Provide choices**
 - Resist the urge to ‘rescue’ them, avoid replicating controlling behaviors
 - Empower the client to make their own choices by providing options
6. **Reduce** the number of times a client has to tell their story

RESPONDING IN A TRAUMA- AND VIOLENCE- INFORMED MANNER

7. Be patient and respect the client's rhythm

- they may not want to call the police
- they may not want to leave the relationship
- recognize the complexity of relationship dynamics, power, and control
- average number of times someone goes back to an abusive relationship: 6 times
- gaslighting (they may not see the situation clearly, blame themselves)
- stigma and shame



**What might happen if we do not follow the client's rhythm?
How do you feel when someone has a ready-made solution to all your problems?**

USE OF LANGUAGE

Be mindful of the language you use. Certain terms can unintentionally reinforce harmful myths and stereotypes.

1. Consider the Canadian Language Benchmark (CLB) level of participants and offer interpretation if possible
2. Keep language simple and straightforward
3. Match the language the client uses to refer to themselves and the perpetrator.
4. They are unlikely to use terms such as 'victim', 'survivor', 'abuser', 'attacker'
5. They are likely to use words such as 'my ex', 'my spouse'
6. When in doubt, use neutral, person-centered language such as 'partner', 'person who caused you harm', 'person who experienced violence', 'spouse', 'they', etc
7. Use interpreter when possible (avoid using family) and provide choice of gender and names of interpreters in advance.



Let's say a client talks about the perpetrator this way: 'This friend I was kind of seeing'. How could you refer to the perpetrator when speaking with the client in this situation?

QUESTIONS AND ASSUMPTIONS TO AVOID

Re-enforcing harmful stereotypes or myths such as:

Rape can't happen
if two people are
married

“Why didn't you
just leave?”

“Why were you
out at night by
yourself?”

“Why didn't you
fight back?”

“Why was he
angry at you?”

“The perpetrator is
such a nice guy and
wouldn't do that”

“It is better for the
children if the family
stays together”

“Violence cannot be
committed in same-gender
relationships, against men
or with seniors”

Avoid ‘Why’ type questions can reinforce harmful myths, victim-blaming and may cause further harm

RISK ASSESSMENT AND SAFETY PLANNING



Key Components:

- Exploring the client's current situation
- Safe place to go
- Safety tips in case of a violent incident in the home
- Preparing to leave safely
- Cyber safety
- Safety for children
- Safety in public/at work
- Knowing who to call

CONNECTING TO RESOURCES

YOU MAY BE THE FIRST CONNECTION OR INFORMATION THEY LEARN ABOUT THESE SERVICES.

- Get to know your local resources
- Make warm referrals when possible
- Have pamphlets ready
- Offer to call the client or connect directly with a service provider you have connections to
- Use helplines

*** We strongly encourage those not in the anti-violence field to always partner with or seek advice from Domestic Violence organizations. You can often do this without disclosing client identifying information if they do not want to connect directly but you can still get guidance in how to best support the client.*

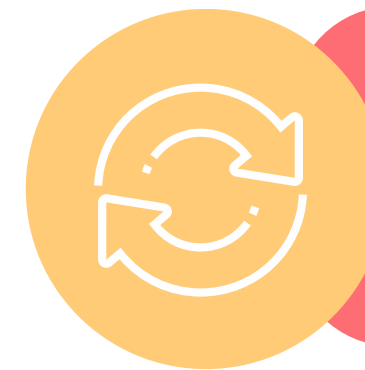
PROMISING PRACTICES WHEN DELIVERING THIS WORKSHOP



How you advertise and recruit for the workshop



Language level and interpretation



Work with pre-existing programs



Navigating heated discussions or critiques in a group when justifications use 'beliefs or culture'.

CONSIDERATIONS AROUND BARRIERS TO ACCESSING SUPPORTS

Isolation

Racism

**Language
& Cultural
Barriers**

**Economic
Issues**

**Lack of
knowledge
about
community
resources**

**Long
working
hours**

**Concern for
their family
in a new
community**

**Spiritual
Beliefs**

**Fear of
stigma
from their
community**

**Immigration
Status
concerns**

**Recognizing
Abuse**

REMINDER OF NEXT STEPS

**COMPLETE THE
'BRIDGES TO SAFETY'
ONLINE COURSE**



**JOIN THE
CHAMPION
NETWORK**



**TAKE THE
TRAUMA-INFORMED
FACILAITION
TRAINING**



ANY QUESTIONS?



**FOR A FULL LIST OF OUR
RESOURCES:
PLEASE VISIT OUR
WEBSITE: [NGBV.CA](https://www.ngbv.ca)**

**SIGN UP FOR THE
BRIDGES TO SAFETY
COURSE!**