

Closing Written Submissions
Ending Violence Association of British Columbia (EVA BC)

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Appendix A: Order in Council

Closing Written Submissions

Ending Violence Association of British Columbia

The Ending Violence Association of BC (EVA BC) is a dynamic, solutions-based provincial association that trains and supports over 300 anti-violence programs and cross sector initiatives across BC that respond to sexual and domestic violence, child abuse, and criminal and workplace sexual harassment. Our programs include BC's Community Based Victim Assistance, Stopping the Violence Counselling and Outreach, Multi-Cultural Outreach, and Sexual Assault/Woman Assault programs. Among our cross-sectoral initiatives are Violence Against Women Coordination Committees, Inter-Agency Case Assessment Teams (ICATs), Community Coordination for Women's Safety, Be More Than a Bystander, Indigenous Community Safety and the LGBT2SQ Safe Choices program.

Our goals are to: provide support and training to the staff of community-based victim support programs in BC; undertake research, develop and distribute resources and tools to community programs serving victims; educate the public on the needs of victims of violence/abuse/harassment; develop and maintain standards for the provision of service to those who have been victimized; foster the development of relevant cross sectoral initiatives across BC and support communities to maintain them; provide related education and training to criminal justice, health and social service system personnel; work in partnership with other provincial organizations, educational institutions and other key organizations in related fields to ensure cross sectoral collaboration and information exchange at the provincial level; engage in projects and programs that work toward the prevention of violence.

Prior to the creation of EVA BC (formerly the BC Association of Specialized Victim Assistance and Counselling Programs) in 1992, the province's sexual assault centres and other specialized victim assistance programs struggled in isolation to resolve the same issues. At the time, sexual assault centres received provincial funding to meet and exchange ideas annually. Hoping to improve coordination and information sharing, reduce duplication of effort and encourage

networking, the centres began examining the possibility of forming a provincial association similar to those already in place for police-based victim assistance programs, women's centres and transition houses. A Secretary of State grant enabled centre representatives and their specialized victim assistance program counterparts to conduct a formal feasibility assessment. In March 1992, the BC Association of Specialized Victim Assistance and Counselling Programs was established. Membership was extended to Stopping the Violence Counselling Programs in 1994 and to Stopping the Violence Outreach Programs in 2008. Later that year, the BC Association of Specialized Victim Assistance and Counselling Programs changed its name to the Ending Violence Association of British Columbia (EVA BC).

In 2012, EVA BC established an Indigenous Communities Safety Project (ICSP) which provided knowledge sharing to Aboriginal leadership (including governance leadership, service providers and the natural leadership) in Aboriginal communities (First Nations and urban Aboriginal communities) related to criminal justice, family justice and child protection laws, policies and practices that directly affect police and government responses to domestic and sexual violence, child abuse and neglect. The purpose of the project was to empower Aboriginal service providers to assist Aboriginal communities – and especially women and children – to become safer, to be aware of their legal rights, to understand the lethal risk factors and to access services and the justice system if they become victimized. Another purpose of this project was to foster connections and relations between Aboriginal leadership and service providers with anti-violence service providers in the various regions of British Columbia. It was highly successful in providing more than 20 workshops reaching over 1000 Indigenous leaders with a goal to assist Indigenous communities to develop their own safety plans for women for over six years.

EVA BC received standing as a party to Parts I, II and III to the National Inquiry; however, the organization did not request funding. EVA BC consulted with Indigenous women who are lawyers, frontline workers and members of EVA BC and the voices of these Indigenous women guided these submissions.

EVA BC wishes to highlight that the Province of British Columbia has the highest number of documented MMIWG in Canada. The Native Women’s Association of Canada noted in its research that “the majority of known cases occurred in the western provinces, with British Columbia being the site of the most incidents” (137 out of 520 or 26%).¹

EVA BC’s final submissions are provided in two Parts. The first part highlights and summarizes important and relevant reports, including various literature reviews and recommendations to end violence against Indigenous women and girls, that were undertaken in the Province of BC specifically. Part II summarizes the most recent consultations with Indigenous women who provided further recommendations.

PART I – Highlights and Summaries of Relevant Reports Involving EVA BC

1) START OF SOMETHING POWERFUL: STRATEGIZING FOR SAFER COMMUNITIES FOR BC ABORIGINAL WOMEN, 2003, Pacific Association of First Nations Women, BC Women’s Hospital & Health Centre, Ending Violence Association of BC²

This report evolved from a two-day forum called Strategizing for Safer Communities for BC Aboriginal Women. This forum involved Aboriginal women collaborating with provincial health and anti-violence organizations. The participation of the ministries was needed to efficiently improve the health and safety needs for Indigenous women. Unlike the other reports, this report documented the concerns raised by Aboriginal women about government funding cuts and its impact on their communities’ services. It described how the impact of the reduction or elimination of funding on rural and remote Aboriginal communities in BC is compounded when there are no other available services or options available to them.

¹ Native Women’s Association of Canada, *Voices of Our Sisters In Spirit: A Report to Families and Communities* 2nd Edition, March 2009 at 92. https://www.nwac.ca/wp-content/uploads/2015/05/NWAC_Voices-of-Our-Sisters-In-Spirit_2nd-Edition_March-2009.pdf

² Pacific Association of First Nations Women, BC Women’s Hospital & Health Centre, Ending Violence Association of BC. “Start Of Something Powerful: Strategizing For Safer Communities For BC Aboriginal Women”, 2003, <http://endingviolence.org/files/uploads/SaferCommforBCAboriginalWom.pdf>

The need for this forum was identified in 2002, during a regulatory BC Women's Violence Against Women Provincial Health Initiative Advisory Committee meeting. The members of the regulatory BC Women's Violence Against Women Provincial Health Initiative Advisory Committee consist of; the Pacific Association of First Nations Women (PAFNW), BC Women's Hospital and Health Centre (BCW's) and Aboriginal Health Program and the BC Association of Specialized Victim Assistance and Counselling Programs (BCASVACP) now EVA BC. Each of these organizations work province-wide, specifically with Aboriginal women who work within Indigenous communities providing services dealing with sexual assault, adult survivors of sexual abuse and violence against women in relationships.

This meeting was specifically held to review the "provincial evaluation report of the Sexual Assault Service, Sexual Assault Nurse Examiner Program and the Women Abuse Response Program."³ This review identified the deficiency "of accessible and appropriate services for Aboriginal women throughout BC who experience violence and the critical need for non-Aboriginal anti-violence, health, and related legal and social services to address these issues." Secondly, the BC Association of Specialized Victim Assistance and Counselling Programs (now EVA BC) identified that:

...police not responding to 911 calls on reserve; Aboriginal women not reporting violence to police due to racism and/or court closures; non-Aboriginal programs reporting few Aboriginal women accessing their services; Violence Against Women Coordination Committees reporting the absence of Aboriginal organizations as part of their committees; and significant cuts to the Aboriginal community based victim assistance programs resulting in some Bands closing programs entirely or reducing programs to 3 hours per day.⁴

During the two-day forum over 25 Aboriginal women representing at least 25 different organizations and community groups, and from approximately 20 different communities across

³ *Ibid* at 3.

⁴ *Ibid*.

BC, convened on Day One to identify gaps, barriers regarding safety and healing from violence. Many of these women work on a daily basis with other Aboriginal women and speak from both personal and professional perspectives. An additional 25 participants representing relevant social policy ministries, provincial health organizations and anti-violence organizations, joined on Day Two to listen to the issues and solutions identified.

Summary of Day One

Healing from Violence Against Women: Issues, Gaps and Barriers

Violence and Racism in Aboriginal Women's Lives

The legacy of colonization, as well as systemic racism compounded by sexism and poverty have resulted in insurmountable barriers to Aboriginal women seeking and receiving anti-violence and related health, social and legal services.⁵

Inadequate and/or Inaccessible Anti-Violence and Related Services for Aboriginal Women

They reported that they encountered an unacceptable lack of specific services for Aboriginal women experiencing abuse. Compounding the effects of this historic lack of accessible services is the further reduction and cuts to the already inadequate number of specialized services for Aboriginal women. Forum participants stated that these reductions are especially critical in isolated communities where the elimination of funding to a program often results in the elimination of an entire service to the community.⁶

Lack of Provincial Representation for Aboriginal Women

The Aboriginal women who participated in the forum uniformly agreed that Aboriginal women's interests are inadequately represented by either non-Aboriginal women's organizations or by Aboriginal men. Aboriginal women's voices are routinely minimized, discounted and/or ignored regarding issues of violence and are rarely included in government consultations. Aboriginal women spoke of the urgent need for both Aboriginal women's

⁵ *Ibid* at 6.

⁶ *Ibid* at 7.

services, as well as a provincial Aboriginal women's organization that would work on their behalf.⁷

Summary of Day Two Solutions to Gaps And Barriers

Programs and Services

Based on the gaps in services for Aboriginal women, a number of key program and service areas were identified to support Aboriginal women in transition and crisis:

- Core funding for ongoing anti-violence intervention programs, managed by Aboriginal women
- Community counselling support programs managed by Aboriginal women
- Safe houses specifically for Aboriginal women both on and off-reserve
- Mentorship programs
- Holistic wellness⁸

Provincial Aboriginal Women's Organization

Development of a provincial Aboriginal women's organization is necessary to ensure that Aboriginal women's interests are represented at all levels of discussion and decision making regarding violence against women in general and that Aboriginal women are active participants in determining responses, strategies and directions regarding violence against Aboriginal women specifically. Establishment of a provincial women's network was also discussed.⁹

Training and Education

There are two parts to this component: a) training and education for service providers and b) training and education for Aboriginal women

a. Training and education for service providers

⁷ *Ibid* at 9.

⁸ *Ibid* at 10.

⁹ *Ibid* at 11.

Meaningful, effective training, must provide service providers with a historical context of violence against Aboriginal women and people, address specific dynamics of violence and healing in Aboriginal families, as well as in Aboriginal and non-Aboriginal communities, and actively work to de-normalize the violence pervasive in Aboriginal women's lives. As well, training must be both culturally and geographically relevant to meet the diverse needs of different Aboriginal peoples.¹⁰

b. Additional training and education topics to be developed include:

- A provincial campaign raising awareness about the occurrences of family violence in Aboriginal communities and its impact on the family unit, as well as the entire community
- Awareness and development of community protocols
- Healing and healthy living
- Leadership training
- Negotiating skills
- Revival of cultural practices
- Computer literacy¹¹

c. Training and education for Aboriginal women who have experienced violence

This type of program must be designed, developed and led by Aboriginal women. Aboriginal women must also be included in all levels of intersectoral and interministerial policy making, as well as long-term research in the area of violence against Aboriginal women. Funding needs to be provided on provincial and federal government levels with equitable and accessible funding available to Aboriginal people and women.

¹⁰ *Ibid* at 11-12.

¹¹ *Ibid* at 12.

Recommendations

Programs and services

1. Funds be allocated to the development of anti-violence programs managed and staffed by Aboriginal women.
2. Funds be allocated for a transition house program for Aboriginal women in the North to be funded by Ministry of Community, Aboriginal and Women's Services.
3. Funds be allocated for a new community-based victim assistance program located in a region with high Aboriginal population, utilizing funds from the Ministry of Public Safety & Solicitor General.

Provincial Aboriginal women's organization

4. Core funding be provided by the Provincial Health Services Authority to develop a provincial Aboriginal women's organization with Aboriginal women's health and safety as a primary mandate.
5. The Pacific Association of First Nations Women take a lead role to initiate this organization.

Training and education

6. The Ministry of Public Safety & Solicitor General provide funds to develop and implement education and training on variety of topics related to violence in Aboriginal communities delivered by Aboriginal women.
7. Training be developed and provided by Aboriginal women focused on capacity building within Aboriginal communities on topics such as leadership, intersectoral coordination, policy and protocol development, etc.

Policy and research

8. As all issues impact violence against Aboriginal women, Aboriginal women's involvement in policy making must extend beyond "violence against women" to include treaty and all other issues impacting Aboriginal peoples.

9. All social policy ministries in BC review existing research about Aboriginal women and violence to expand knowledge and inform policy, programs and services.
10. The Ministries of Public Safety & Solicitor General and Community, Aboriginal and Women's Services take the lead role in this initiative and provide funds for Aboriginal women to review the existing literature related to Aboriginal women and violence, aggregate the findings and recommendations and the Ministries begin to fund programs based on the recommendations.

Funding issues and requirements

11. The Ministries of Public Safety & Solicitor General, Community, Aboriginal and Women's Services, Health Planning and Health Services allocate core funding directly to Aboriginal organizations and programs in the areas of anti-violence and health related services.
12. The Ministry of Public Safety & Solicitor General review and alter their population-based funding formula to ensure that women in remote communities have access to services.
13. The Ministries of Public Safety & Solicitor General, Community, Aboriginal and Women's Services, Health Planning, Health Services and Children and Family Development review current government funding criteria to ensure that it is accessible, relevant and equitable to aboriginal women and people.

2. RESEARCHED TO DEATH: B.C. ABORIGINAL WOMEN AND VIOLENCE. FINAL REPORT SEPTEMBER 9, 2005. Pacific Association of First Nations Women, BC Women's Hospital & Health Centre, Ending Violence Association of BC¹²

The purpose of this report was to examine eleven sources (ten reports and one book) and identify the vast recommendations of remedying violence against Indigenous women. The report also identifies recommendations that have been implemented.

¹² Pacific Association of First Nations Women et al, Researched to Death: BC Aboriginal Women And Violence Final Report 2015 at 7. <http://endingviolence.org/files/uploads/FinalReportSeptember2005.pdf>

- **Royal Commission on Aboriginal People, 1996:**

The Commission of Inquiry argues that the government policies that removed Aboriginal people from their land, withdrew their right to govern themselves, to raise their own children, to maintain their right to speak their language and live their culture, and to monitor and control them all contributed to the violence existing in Aboriginal people's lives.¹³

- **Amnesty International, *Stolen Sisters: Discrimination and Violence Against Indigenous Women in Canada*, 2004:**

Aboriginal people's history of colonialism and assimilation measures and its compounding affect that it has had on Aboriginal peoples and specifically on Aboriginal women have lead to the current reality of poverty, racism and sexism against Aboriginal people. These are key factors that place Aboriginal women at extreme risk of violation, victimization and death. The report concludes that there is no support or protection being offered to Aboriginal women who are or could be victimized or murdered in Canada.¹⁴

- **The Aboriginal Healing Foundation, *Aboriginal Domestic Violence In Canada*, 2003:**

Family violence is described as an intergenerational 'syndrome'. This syndrome impacts every aspect of the Aboriginal communities from its individual members to its' political structures...Government policies and programs that are not developed in collaboration with Aboriginal communities is a factor that aids in the continuation of violence. The report concludes that the short term solutions offered through government programming is a barrier to achieving long-term solutions.¹⁵

- **Edna Leaks, *Hear First Nations Women Speak*, 1993:**

At the core of the challenges is the continuing social acceptance of racism and sexism that supports the continued victimization of Aboriginal women. The challenges identified are: justice systems lack of intervention and support; inadequate programming and uneducated service

¹³ *Ibid* at 7.

¹⁴ *Ibid* at 8.

¹⁵ *Ibid* at 8.

providers; creation of programming without direct input of and supported Aboriginal family violence and victimization.¹⁶

- **Kim Anderson and Bonita Lawrence, *Strong Women's Stories: Native Vision and Community Survival*, 2003:**

Similar to the other reports, this book explains colonialism's present impact on traditionalism, community and Aboriginal government.¹⁷

- **Karen Green, *Family Violence in Aboriginal Communities: An Aboriginal Perspective*, 1996:**

...discusses the various forms of family violence, including physical, psychological, sexual financial and spiritual abuse. The report describes what Aboriginal communities are doing to address family violence and what tools they are using to counteract it.¹⁸

- **Emma D, LaRocque, *Violence In Aboriginal Communities*, 1994:**

The report argues, 'sexual violence is related to racism in that racism sets up or strengthens a situation where Aboriginal women are viewed and treated as sex objects.'¹⁹ The report parallels the other reports' understanding that the dominant social beliefs about Aboriginal people can then in turn become internalized colonialism...The overarching belief like the other summarized reports is that change needs to occur in non-Aboriginal communities, and specifically by those in 'positions of power.'²⁰

- **David McTimoney, *A Resource Guide on Family Violence Issues for Aboriginal Communities*, 1994**

The report acknowledges residential school, loss of culture and women's roles in society, an absence of parental and Elder's teachings, internalized colonialism and oppression, and also an

¹⁶ *Ibid* at 9.

¹⁷ *Ibid* at 11.

¹⁸ *Ibid* at 11.

¹⁹ *Ibid* at 73.

²⁰ *Ibid* at 12.

adapting of “non-functional, non-Aboriginal attitudes, beliefs and values” (Ibid; pp.1) as key factors in the rise of violence against women.²¹

- **Marcia Krawll, *Understanding the Role of Healing in Aboriginal Communities*, 1994**

The government’s role needs to be clear and established with respect for the community’s knowledge and culture. This working relationship needs to be guided by the community itself with a long-term healing plan put into place. A pro-active solution is for the government to “listen more effectively and observe first hand.”²²

- **Aboriginal Justice Implementation Commission, 2001**

Like the other articles, the report details the residential schools, racism, and sexism’s past and present impact on Aboriginal communities. The report argues that the media portrayal and society’s perception of Aboriginal women supports their present sexual and physical abuse. The report’s examination of the justice systems role leads to the conclusion that this system plays a large role in the continuation of Aboriginal women’s violence and abuse. The report provides a detailed template for Aboriginal community involvement and non-community involvement in seeking solutions to family violence. It proposes an alliance between the judicial systems to create “abuse teams” that would aid in family violence incidences.²³

There were hundreds of Aboriginal women interviewed in the above-noted research reports and the following are summarized recommendations from those reports:

²¹ *Ibid* at 12.

²² *Ibid* at 13.

²³ *Ibid* at 14-15.

Recommendations

- 1. Aboriginal Women's Contribution To Social Policy Development:** there needs to a Provincial Aboriginal women's organization that offers support, training, and education to Aboriginal women.
- 2. Programs and Services:** on-going funding to support culturally relevant Aboriginal programming and services that are designed, delivered and implemented by healthy, Aboriginal women, Elders and community workers. The programming and services need to include a counseling component specific to intergenerational trauma issues and be delivered from a holistic approach to healing, meaning, that the victim, offender, the victims' and offender's family would all need support in their healing to create long term community change.
- 3. Training and Education:** The Aboriginal community and non-Aboriginal people, organizations, law enforcement, legal society, judicial system and government agencies receive education on the history of colonialism, cultural genocide, sexism, racism, forced assimilation, family violence, and violence against women in the sex trade. Workshops and conferences are needed for Aboriginal community members, workers and leaders that are directed towards family violence, including sexual violence. Family violence, personal safety (prevention), and sex education also need to be delivered in Aboriginal schools.
- 4. Policy and Research:** The need for policy reform and culturally safe and relevant research, ranging from the United Nations to the Canadian and provincial front such as:
 1. To implement recommendations of the Royal Commission on Aboriginal People and the United Nations human rights treaty bodies that relate to "poverty and social marginalization of Indigenous peoples in Canada."²⁴

²⁴ Canada, Georges Erasmus, and René Dussault. *Report of the Royal Commission on Aboriginal Peoples*. (Ottawa: The Commission, 1996) at 8.

2. The Canadian government needs to work with Aboriginal women to work towards solutions to stop the violence and include them in any policy discussions that will directly affect them.
3. Specific actions and protocols need to be implemented, designed and supported by the federal and provincial government for missing Aboriginal women and youth cases.
4. Request the United Nations to study and document violence against Aboriginal women. This study needs to determine if there are specific measures being taken by Canada to address the violence against Aboriginal women.
5. The Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women needs to also be included to ensure Canada is honoring the International human rights for the prevention of violence against Aboriginal women.
6. A transformation in Canadian perspective and law needs to be a priority. Canadian laws need to be changed that currently support “domination” and the continued victimization of women.
7. A provision needs to be included in the Indian Act that allows for the same equal division of property for Aboriginal women on reserve.

3. EXCERPTS FROM: PARLIAMENTARY STANDING COMMITTEE ON THE STATUS OF WOMEN, STUDY OF VIOLENCE AGAINST ABORIGINAL WOMEN, 2011 EVIDENCE²⁵

The following are some excerpts from evidence presented at a Parliamentary Standing Committee on the Status of Women on January 18, 2011. The purpose of this hearing was to study violence against aboriginal women, pursuant to Standing Order 108(2). The study consists of finding “the root causes of violence against aboriginal women...the extent of violence ...the types of violence. And we're looking at ways in which to resolve that violence.

²⁵ Canada. Standing Committee on the Status of Women. Evidence. January 18, 2011. <http://www.ourcommons.ca/DocumentViewer/en/40-3/FEWO/meeting-49/evidence>

Also, establishing resolutions to end that violence,”²⁶ with the intention of providing the House of Commons and Parliament with a report consisting of recommendations to assist in ending violence against aboriginal women.

Excerpts from some of the witness testimony is summarized here:

The first witness was Marilyn George, Outreach Service Coordinator and representative from EVA BC. Her work included solely responding to violence against women comprising of sexual violence, child sexual abuse, domestic violence and criminal harassment. Aboriginal women have suffered violence to the extent of “been sexually abused as girls, gang-raped as adolescents, or raped and/or beaten as adults.”²⁷ Recommendations to assist is funding long-term solutions. Creating anti-violence programs and services designed and managed by aboriginal women for aboriginal women. For existing off-reserve shelters, provide cultural sensitivity and training to all employees and have aboriginal women on staff.

Tracy Porteous, Executive Director for EVA BC, identified all types of racism; as an act of violence within the healthcare system and racism towards Aboriginal women who are seeking help after being sexually assaulted. Her specific recommendations were 1) to provide police with anti-oppression and anti-racism training and 2) funding for appropriate supports for Aboriginal women in order for them to feel safe so they can then use their voice.

Asia Czpska, Advocacy Director for Justice for Girls, described her organization which promotes social justice for teen girls living in poverty, freedom from violence and equality. She noted that Aboriginal girls are vulnerable and more susceptible to acts of violence such as extreme sexual violence, physical violence and “constitute the number of murder victims in BC.”²⁸ A recent report in B.C. in which over 400 Aboriginal youth in nine communities were interviewed found that about 60% of Aboriginal girls had experienced sexual violence. In BC, many Aboriginal girls do not report the acts of violence because of the distrust caused by

²⁶ *Ibid.*

²⁷ *Ibid* at 1.

²⁸ *Ibid* at 3.

professionals like police officers and judges. She highlighted the specific sexual assault cases involving Prince George ex-judge David Ramsey, Prince George police officers and a defence lawyer. She also highlighted that Aboriginal girls are criminalized for defending themselves from violence and stated that “Aboriginal girls are 40% to 50% of the girls in the prisons in B.C.”²⁹ Ms. Czpska provided recommendations to ensure that victimized Aboriginal girls are not re-victimized again in the process of responding to violence. She insisted that separate organizations are needed to investigate police violence, misconducts and under-investigations and to reinforces and implement recommendations given by the United Nations. Ms. Czpska noted that there is no national office that addresses violence against Aboriginal women or any organization to gather detailed statistics. Gathering national data would put in clear perspective of statistics that relate to Aboriginal women. For example, those who are jailed for protecting themselves from violence or children who are being sexually exploited are important issues to be aware of.

Ms. Lisa Yellow-Quill, Battered Women's Support Services, provided a list of the following recommendations:

- Women named on every agenda and their voices included in all the planning and decision-making processes of Canada and its provinces.
- Socio-political attitudinal change.
- The focus of women's experience of violence placed on the perpetrator, not the women.
- Structural change in governments, law enforcement, and other institutions that maintain the status quo of gender inequality.
- Anti-violence services rooted in historical understandings of colonial violence and informed by Aboriginal women.

Ms. Darla Laughlin, Aboriginal Outreach Coordinator and Youth Counsellor, Women Against Violence Against Women identified the types of women she sees as a frontline worker: Aboriginal women experiencing rape, being sexually assaulted and exploited as well as physical,

²⁹ *Ibid* at 4.

emotional and mental abuse. The extent of the violence she sees Aboriginal women facing is death and the greatest form of violence she has seen is the systemic violence, the oppression, sexism and racism. Her recommendations include that the government recognize traditional healing for Aboriginal women and that there is a need for a change of safety and quality of life for Aboriginal women.

Ms. Nancy Cameron, Program Manager, Crabtree Corner Community Program, YWCA of Vancouver stated that "Abuse is interwoven into about 99% of the women who come to Crabtree, and of our clients at Crabtree, I'd say about 70% are Aboriginal women."³⁰ Poverty is an issue for women going to Crabtree Corner. Women have no money to leave their abusive partner, to go and live on their own with their children. Women are punished for protecting themselves when calling the police. As a result of the domestic violence her children are taken away thus making her silent and continue to live in the abuse. Recommendations are the need for resources. Funding is an issue with such magnitude. It is needed to provide the programs and services for Aboriginal women in violence. From anti-violence prevention programs, to the traditional healing of an Aboriginal women who has survived violence, to the training and education needed to eliminate the systemic acts of violence in all levels of government, police services and healthcare systems. The federal government funded \$28 million dollars to share amongst 500 band councils in Canada, that is approximately \$56,000.00 each. Abuse is interwoven into about 99% of the women who come to Crabtree, and of our clients at Crabtree, 70% are Aboriginal women. More funding is needed to eliminate violence against women.

Mr. Russell Wallace, Vice-President, Board of Directors, Warriors Against Violence Society presented about this specific program. This is a men's program developed in the late 90's geared towards traditional healing from violence. They expanded to include a women's and youth program. They provide aboriginal women with support. The types of violence they see is social, economic, and systemic violence. For example: women encounter is threats from social workers, threatening to take their children under certain circumstances.

³⁰ *Ibid* at 13.

Professor Jane Miller-Ashton, Criminology Department, Kwantlen Polytechnic University recommended reintegration of women who have been imprisoned into the community. She stated that these women need a sense of belonging back into their community, return back to their culture, and a welcoming society.

Beverley Jacobs, former President of the Native Women's Association of Canada, brought forth the concern of the MMIWG families about the Standing Committee itself. She identified the families anger and hurt that another study is being done without their input. She reiterated the hundreds of recommendations already addressed to the government. She stated that Aboriginal women experience all types of violence; physical, mental, emotional, sexual, spiritual etc. She recommended a call to action for the government to implement these recommendations. As well as, she recommended that the committee itself should directly meet the families of Missing and Murdered Indigenous Women. She recommended that there be a review of the services that are available in communities, to determine what is working and what isn't. "There are different needs for families of the missing and families of the murdered. Resources for the families of the missing are resources for searches, rewards, travel when families receive tips, publicity, healing services, loss and grieving counselling, and family gatherings. Needs for resources for families of the murdered are for assistance in court, knowledge of the process, victim services with training on cultural knowledge about what is needed for families, healing services resources, and family gatherings."³¹ Finally, she recommended that the government enact legislation to end violence against Aboriginal women.

Ms. Darlene Rigo, Collective Member of the Aboriginal Women's Action Network, recommended the need to not re-traumatize abused women. Recovery centres are needed designed to give women cultural tools to recover and to educate them concerning the origins of violence in their lives, with consciousness-raising so they can fight to end prostitution. We want

³¹ *Ibid* at 25.

comprehensive and compassionate medical services, a guaranteed livable income, job training, and adequate housing for women and their families.

Evidence presented in this Parliamentary Standing Committee on the Status of Women was coordinated into an interim report noted next.

4. PARLIAMENTARY STANDING COMMITTEE ON THE STATUS OF WOMEN REPORT ENTITLED “INTERIM REPORT. CALL INTO THE NIGHT: AN OVERVIEW OF VIOLENCE AGAINST ABORIGINAL WOMEN”³²

An important Standing Committee report that was shelved was the Status of Women Interim Report entitled “Call Into The Night: An Overview of Violence Against Aboriginal Women.” The Committee brought together the frontline and grassroots advocates as well as those organizations that had focused on ending violence against Aboriginal women. It highlighted the various important areas directly related to the underlying root causes of MMIWG. Specifically, it highlighted many forms of violence against Aboriginal women and in moving forward the Committee utilized the *United Nations (UN) Declaration on the Rights of Indigenous Peoples* as a guide to “highlight the principles of a holistic and Aboriginal-led approach as it develops recommendations for its final report on violence against Aboriginal women.”³³ The issues that the Committee highlighted that were directly connected to violence against Aboriginal women were poverty, child welfare, missing and murdered Aboriginal women, the response of the justice system, supporting opportunities for healing, continuum of housing, recognizing and supporting Aboriginal women as leaders and racism.

With respect to the specific issue of MMIWG, the Committee highlighted the Native Women’s Association of Canada’s Sisters in Spirit and Evidence to Action initiatives, Amnesty International’s Stolen Sisters report and the United Nation’s Committee on the Elimination of

³² Canada. Standing Committee on the Status of Women. *Interim Report. Call Into The Night: An Overview Of Violence Against Aboriginal Women* (Ottawa: Standing Committee, 2011)

http://publications.gc.ca/collections/collection_2011/parl/XC71-403-1-1-04-eng.pdf

³³ *Ibid* at 7.

Discrimination against Women report, which “called upon Canada to examine the cases of missing and murdered Aboriginal women and to remedy the system deficiencies related to failed investigations.”³⁴ The Committee highlighted witnesses comments “that the indifference of society to the fate of these Aboriginal women renders Aboriginal women more vulnerable to targeted acts of violence against them, by strangers or acquaintances.”³⁵ The Committee then highlighted Marilyn George’s statement that “being an Aboriginal woman is ‘like walking around with an X on your back.’”³⁶ The Committee also highlighted the troubling issues with the investigations (or lack of investigations) of MMIWG and policing as well as the responses from police organizations that highlighted initiatives that aimed to prevent more deaths or disappearances and to investigate unsolved cases.³⁷

5. PAIGE’S STORY: ABUSE, INDIFFERENCE AND A YOUNG LIFE DISCARDED, Representative of Children and Youth BC.³⁸

The overall finding of this report was identified by the Representative of Children and Youth BC, Mary Ellen Turpel-Lafonde, as follows:

Despite the absolute predictability of this tragedy, the child protection system, health care system, social service agencies, the education system and police consistently failed in their responsibility to this child and passively recorded her life’s downward spiral. The social workers tasked with caring for Paige clearly foresaw what would inevitably happen to her but seemed unable or unwilling to do what would have been necessary to alter the trajectory of her life. They failed to register or respond to the compounding trauma in her life and provided no meaningful assistance, leaving her in a dangerous situation that led to her death. Any supports offered were utterly inadequate to address the scope and scale of her life challenges, which included being the victim of regular abuse, neglect and maltreatment, having serious mental and physical health needs

³⁴ *Ibid* at 14.

³⁵ *Ibid*.

³⁶ *Ibid*.

³⁷ *Ibid* at 15-16.

³⁸ https://rcybc.ca/sites/default/files/documents/pdf/reports_publications/rcy-pg-report-final.pdf

largely unmet and high-risk use of alcohol and substances to self-medicate her horrific pain.³⁹

The Representative was “unable to understand the pervasive system-wide professional indifference to this young Aboriginal girl when the challenges to her vulnerable cohort were so well-known to the ministry and other professionals. The system has no learning from this tragic death and shows little insight into its responsibility for her or other youth in similar circumstances.”⁴⁰ The Representative specifically found that “health care professionals, hospitals, police, outreach workers and staff at shelters and SROs repeatedly failed in their duty to report child protection concerns to the ministry, as required by s. 14 of the *CFCS Act*, when a child is in need of protection.”⁴¹ She stated:

Despite the cynicism expressed by some witnesses about the ministry’s ability to effectively respond, failure to report is an offence under the *CFCS Act*. The repeated failures to act on this legal duty meant that critical information was not made available to the ministry workers responsible for Paige, even though this information could potentially have triggered some intervention or response.

The ministry repeatedly failed to provide reports to the Representative as required by s. 11(1) of the *RCY Act* about the multiple critical injuries sustained by Paige while she was in ministry care or receiving ministry services.⁴²

This is a very sad and tragic death of a young Aboriginal girl whose life was horrifically painful from the time she was born. All of the systems that were supposed to assist her, failed her. Despite the fact that Paige overdosed from drugs and alcohol only 4 months after turning 19 and “aging out” of the system, Paige was effectively “murdered” by all of the systems; the child protection system, health care system, social service agencies, the education system and police,

³⁹ *Ibid* at 36.

⁴⁰ *Ibid*.

⁴¹ *Ibid* at 42.

⁴² *Ibid*.

as noted by the Representative. The failure to report by those professionals within the system and the failure to abide by their own legal duties is against the law; against the *CFCS Act*. The ministry itself failed to abide by its duty to report to the Representative. This is utterly beyond the failure of legislative duties and responsibilities of a provincial system. This effectively means she was “murdered” by the Province of BC – by the state. Can the state be charged with murder? No it can’t, then it should be charged with genocide as this has happened to far too many young Aboriginal youth like Paige.

We can’t ignore or forget that the state, whether it is hospital workers, government workers, etc., they are also responsible for the number of missing and murdered Aboriginal women. Wherever they go, they don’t get the proper help. It’s not just the churches and the police, it is all state institutions. We can’t ignore the abuse of the state, police, society, hospitals; they need to get called out too. This is not just a systemic problem of police or government institution.

Repeatedly, numerous Deputy Ministers, Chiefs and other political leaders have stated their desire to reduce the number of Aboriginal children in care. Paige’s short life should be considered a stinging rebuttal to that political posturing; the real issue is to eliminate or reduce the abuse and neglect of Aboriginal children.

PART II – Recent Recommendations from BC Indigenous Women

Part II summarizes the most recent consultations EVA BC facilitated with Indigenous women from across BC who provided further recommendations to include in these final submissions. Some recommendations duplicate recommendations already made in the above-noted reports. They are included here to reiterate the importance of them and to highlight the fact that those recommendations have not been followed up on or implemented.

CRITICAL ISSUES ABOUT THE NATIONAL INQUIRY ON MMIWG

A concern was brought up that there was an Order in Council for BC (a copy of which is attached as Appendix A, along with letters from the Attorney Generals of Canada and British Columbia) that states participants in the Inquiry from the Province of BC were not able to call on any actions of any person, which would include the police, into question. The question that needs to be answered is: Why was there an Order in Council that prevented police conduct from being reviewed by the Inquiry? Indigenous women who participated in these final submissions want to know what the reasons were behind this Order in Council. Indigenous women feel that there is heinous police brutality against Indigenous peoples and communities in the Province of British Columbia and they feel that they have been silenced to not be able to address this issue.

One of the Indigenous women who participated in these final submissions had firsthand experience in participating in the Inquiry process. She felt it was really rushed and felt that it was not trauma informed. The example provided was the meeting that was held in Smithers. She had attended as part of her work and felt really unsafe because Smithers is the heart of the Highway of Tears. The meeting took place at the friendship centre and the hotel [Sandman Inn] was near the highway. There were men partying outside the hotel room both nights. She felt totally unsafe. The Indigenous women felt the deadlines were stressful. They felt that the community was not properly represented and that the Inquiry lawyer had own agenda. In regard to the Inquiry process, they did not give support ahead of time to the families. Two families did not attend but might have if they had felt they had the support; if someone had talked to them ahead of time to provide details of the process, to go over how things were going to take place and to ensure families would feel supported. Another suggestion would have been that if the government told Indigenous nation's governments what the process was, and then they could then tell the community, families might have felt more comfortable participating.

Recommendation:

1. The final report of the MMIWG must provide details about the limitations within the National Inquiry process to address police conduct and its brutality against Indigenous peoples and communities, as well as the difficulties in developing positive relationships with families to ensure their participation.

CULTURAL COMPETENCY AND CULTURAL SAFETY

Systems and institutions require cultural competency and cultural safety within them to repair the systemic racism and discrimination. It has to be a comprehensive system which involves teaching about theories to mentorship with elders.

Recommendations:

2. Systems and institutions can also address systemic racism by ensuring Indigenous peoples are in decision-making positions.
3. The Provincial Health Authority model is a good one to start with but it is not comprehensive enough. It requires protocols to learn how to connect/engage with local communities, to learn about specific nations and local nations, to learn about protocols, how to connect with elders.
4. All systems need to be more diverse and hire more Indigenous staff.

CHILD WELFARE AND CHILD PROTECTION

There are long standing issues regarding the child welfare system and there is more harm being done by the system. It has been reiterated over and over again that Indigenous mothers are being targeted. Removing children is more traumatic than dealing with a mom with addiction. Child protection should focus on helping moms and parents. The focus on child protection should not be on punishing mothers who were not able to protect their children. It should be a partnership and not punitive. Babies are being removed at birth from Indigenous moms which leads to further trauma to both the baby and the mom. There has been an increase in the number of babies being taken at birth. Even when they are engaged in processes, moms felt

that they were doing everything they were told to do and still the ministries are removing the babies. It is not as high for any other non-Indigenous moms. What supports were provided to the Indigenous mom when she was pregnant?

For a woman who is trying to protect her kids, they're getting \$600 month whereas foster parents are getting \$600 a day. A "special needs home" gets hundreds of thousands of dollars a year to take care of the Indigenous children. Indigenous carers step up the most and get paid the least. In group homes there are horrendous caretakers with no oversight (they're abusing the kids, buying drugs and doing drugs with them) the owners are making millions (by collecting the money given to them for housing the highest risk kids) and they pay workers the least. There is a case where the children's dad, who was white, murdered their mom who was Indigenous, and then he killed himself. The maternal Indigenous sister stepped in, but the kids had to stay in foster care for 2 years because the white family on the dad's side wanted to take the kids. The Indigenous family was treated so poorly compared to the white family.

Recommendations:

5. A complete overhaul of the Indigenous child welfare systems is needed.
6. Implement a national Indigenous child welfare advocate to ensure there is a high level of standardized care across the country.
7. The Ministry return at least 10% of the funds to Indigenous families [referring to the funds that would otherwise be used to pay for foster care or outside caring services such as a group home]. Most Indigenous kids are considered special/high needs which means non-Indigenous foster parents and private care institutions are getting hundreds of thousands per child to care for Indigenous kids, while Indigenous families/caregivers get pennies.
8. Focus on supporting moms and parents to better support their Indigenous children.
9. No child should be apprehended due to residential school trauma or poverty.
10. Funding to create child welfare centres in nations with indigenous specific parenting courses. With support to parents, the province needs Indigenous specific parenting

courses because parents and grandparents ability to parent and care were disrupted because of residential school. Services need to be specific to indigenous women and are conscious about the cultural needs

11. Create and implement an Indigenous specific, culturally relevant parenting after separation course.

POLICING

There was a common theme in the Indigenous women's discussions regarding Indigenous peoples' relationship with the RCMP. First, some felt that there had been excellent relationships built with RCMP and then they are transferred out of the community. There was also a need to address barriers to those who want to join the police force.

There was a need to look at police perpetuated violence. It was felt that police do not do Indigenous women justice and that this is a direct attack on Indigenous women on behalf of the colonial state.

Recommendations:

12. The Independent Investigations Office of BC responsible for investigating RCMP must also investigate sexual assault.
13. The RCMP should follow up and report out about the Indigenous members recruitment program – is the government actively pursuing this?
14. Keep RCMP officers in community that have developed positive relationships.
15. The RCMP should be accountable - when they function well, they can be a real support to communities.

PROPER INVESTIGATIONS OF MURDERED INDIGENOUS WOMEN

RE: CORONOR'S OFFICE

There have been homicides, alleged suicides, and alleged overdoses on three Carrier women. They were not investigated by the Coroner and we don't know whether those overdoses or

suicides were actually homicides because the coroner isn't stepping up to the plate where First Nations communities have identified that there should be an investigation. The Coroner's office needs to be transparent and reporting out on it. There needs to be more diversity in the Coroner's office i.e. need more Indigenous Coroners.

Indigenous women are not investigated to the same extent as white women. For example, a white woman, who was a tourist, was found in the Hope area. Her death was immediately called a homicide. Within a month, they found an Indigenous woman in a ditch in Merritt with no coat, no shoes and no socks but they said that she died from natural causes. But who would go out like that - on a walk by yourself in the bush, with no coat, socks or shoes? Who's making the decision to investigate? Who determines whether it is a suspicious death?

With respect to communicating with the coroner, one of the Indigenous women who was part of these final submissions, spoke to a woman whose daughter allegedly committed suicide. The coroner and police came, but to this day that mother still doesn't know how her daughter died or where she died. They never even ribboned off her house or anything. The police told her to leave her house and she had no idea what they did while they were in her house. How many deaths are being written off as a suicide when they really aren't?

Recommendations:

16. Coroners should investigate until they know why she died. For instance, was it because of sexual violence, dealing with a gang rape, dealing with everyday systemic racism. When someone takes their own life, an investigation should begin as to why they killed themselves.
17. Coroner should be making decisions to investigate in consultation with community members.
18. Coroner officials need to dig deeper to investigate actual cause of death
19. Coroner should have documentation regarding any context regarding the deaths. They must continue to investigate until it is known why the person died. For instance,

whether someone died as a result of experiencing systemic abuse, domestic violence, racism, gang rape. If they took their own life, why did they take their life?

20. If a Nation decides a death needs to be investigated, it should be investigated.

21. Many MMIW listed as suicides, overdoses, non-violent, non-suspicious, but the number of MMIW would be much higher if we accounted for those women who are, in actual fact, murdered.

PROTOCOLS FOR CONTACTING FAMILY MEMBERS OF MMIWG

Who is doing anything about MMIW after they are found? Another problem is that they don't have a protocol for contacting First Nations and their families. They don't automatically phone the band office and they'll just phone around. If they can't find the mother or next of kin, they just phone whoever they can contact. For example, they didn't know how to contact the family so they phoned a girl in jail to tell her that her brother died and then she had to call her family from jail. There's no protocol on what to do when they find an Indigenous person dead, in critical condition or when someone goes missing. Another issue related to this is in regards to those living on reserve and the only address they have are post office box numbers. Box number means that there are no physical addresses tied to a First Nations person, which makes it more difficult to contact families.

Recommendation

22. Systems should have protocols in place to contact the Nation office to get in contact with the families. All public services should have a protocol.

DATABASE

23. We would like to see geographical information to track sexual violence occurrences and Indigenous specific supports in place to target areas that have high levels of occurrences.

Recommendations:

24. Statistics should be gathered about reports of sexual violence based on geographic regions and made available to the public.
25. Indigenous specific programming should be funded and implemented in areas that have the highest levels of reporting.

CULTURALLY SAFE HEALTHY SEXUALITY TRAINING

We need to change the way sexual exploitation and prostitution is viewed in Canada because its obviously not what those folks had in mind growing up. We need to promote education so we know when to identify it. Most people have difficulty talking about sexual assault because it has to do with sex and there is such a cultural taboo about sex. There needs to be mass education on healthy sexuality and what that means. In the residential schools there are many cases that are so traumatic. The boys and girls that reported sexual assault were beaten and told they were dirty and wrong. Back in the 1960s, when girls got raped, they were sent to reformatory school. Girls were punished for reporting. Not a lot has changed in Canada for any First Nations girls and women.

Recommendation:

26. Implement culturally safe healthy sexuality trainings so people have the language to talk about and to address sexual assault, sexual exploitation and prostitution.

COMMUNITY-BASED VICTIM SERVICES

One of the strongest recommendations has been access to funding in every nation to have community-based victim services so that there are places for prevention, support, accompaniment to Court, etc. There were 13 specific Community Based Victim services for Indigenous victim assistance and many recommendations have been made to have these services run by Indigenous women in urban centres and on reserve. Police-based Victim services, where there is no CBVS, is so overwhelmed but they don't want to say anything

because they are afraid of losing the Victim Services program they do have. The silence and secrecy are being reinforced by the current lack of services.

Recommendation:

27. Reinstate Community Based Victim services for Indigenous victim assistance, run by Indigenous women and on reserves.

LATERAL VIOLENCE TRAINING

What has changed drastically is that peers are tearing each other down. Women are victim blaming other women which is an indication that the lack of services is really impacting other women.

Recommendation:

28. Lateral violence training should be funded and offered in all First Nations communities.

SPECIALIZED SERVICES TO ADDRESS SEXUAL VIOLENCE

We know that violence and abuse in First Nations communities thrive on silence. When a perpetrator passes away, the families stay silent, keep secrets, don't want to do anything and are terrified to move forward because there is are no support systems in place. More outreach, programs and specialized services to address sexual violence is required. Resources are needed in order for families, men, women and children can talk about violence without fear.

Recommendation:

29. Resources are required to implement specialized services for victims of sexual abuse/assault and their family support groups for youth, boys and girls in community and at school.

CONSULTATION WITH INDIGENOUS WOMEN

Current practices are replicating patriarchal systems and the colonial violence continues. For example, governments will consult with Indigenous governments but they are recreating the colonial system by only talking to Indigenous men. A male First Nations leader in BC stopped Indigenous women from creating a women's groups in the 1990s but now has been telling all the groups that they should have a women's group. It has to come out of a man's mouth for it to be taken seriously. The MeToo campaign hasn't hit Indigenous women in the same way. Indigenous women know the men who are perpetrating them but no one is speaking up. It is still recent history where these perpetrators still sit at the political tables. The sexism and the racism are rampant and they intersect. All levels of government that are consulting with Indigenous communities and nations need to be talking to the women in those communities as well. If governments are only talking to Indigenous men, sexual harassment and ongoing intergenerational pain and trauma of sexual violence and domestic violence will not be addressed.

Recommendation:

30. Governments need to consult not just the male leadership of Indigenous governments, they need to ensure they meet/speak with Indigenous women as well.

HEALING/TRAUMA CENTRES

Currently, there is nowhere for people who are living in trauma to go. Healing/Trauma centres should be accessible in rural communities and on reserve rather than in the bigger cities. Healing/Trauma centres can address the intergenerational trauma of residential schools, which are one of the root causes of violence in Indigenous communities. Healing/Trauma centres can assist in breaking walls down and educating families, parents, grandparents, children and grandchildren about intergenerational trauma. Long term supports and services are needed to address trauma. Healing lodges would be great to see in each territory, for each nation as it would assist in community-based healing. In Ontario, there are men lodges and women lodges that address sexual abuse, trauma, addiction, recovery, etc.

Recommendation:

31. Resources/Funding is required to build Healing/Trauma centres in rural and First Nations communities for Indigenous peoples who have experienced violence.

EDUCATION AND TRAINING**Recommendations:**

32. More education is needed for the public on sexual and relationship violence, awareness-raising – a province-wide campaign, such as an Indigenous Be More Than A Bystander program.
33. Education of our frontline workers, many are not native; need more native staff.
34. More education getting out to everyone – Indigenous people, as well as our visitors.
35. Police and law makers need to be more educated about colonization, impacts of multigenerational violence, deeper understanding of the true story and need to hear and know what we've talked about here today.

INDIGENOUS TRANSITION HOUSING

There are no resources in Indigenous communities to address domestic violence/intimate partner violence. There may be wellness centres but those workers are inundated with a lot beyond their own jobs.

Recommendations:

36. Emergency Indigenous housing/transition homes are required in Indigenous communities, especially for women in remote areas.

PROGRAMS AND SERVICES

There is a need for a decolonizing approach to programs and services, specifically, organizational practices. There is a need for support within the workplace to address discrimination and racism. It is important to work things through and educate those who are non-Indigenous. Programs and services need to meet people where they are, acknowledge

that healing needs to take place because of the intergenerational and systemic impacts. Nations should be seen and respected as those nations.

Recommendations:

- 37. Services and programs should look to foster connections to break down isolation.
- 38. Aftercare services/ aftercare funding for survivors of the 60s scoop.

FUNDING

Recommendations:

- 39. More multi-ministry funding (funding from all levels of government) and multi-year funding is required for community based survivor support and prevention rather than the piece-meal funding that every community competes against.
- 40. Operating grants to respond to violence are required to operate and sustain programs. Funding is also required for research, data management, administration, development of an infrastructure (i.e. governing body/board/committee and staff)

RESTORATION/REVITALIZATION OF LANGUAGE AND CULTURE

The largest resource Indigenous peoples have is their Elders and Knowledge Holders. Their knowledge must be preserved to ensure their teachings are provided to the next generations. These ways ensure that we have well rounded and healthy peoples, healthy families, healthy tribes and nations. Indigenous peoples need to relearn, reclaim and revitalize traditional knowledge to empower and to be proud of who they are and where they come from.

Recommendation:

- 41. Resources are required to preserve knowledge by digitizing interviews with knowledge holders and language speakers.

INCOME ASSISTANCE

Indigenous women should not have to jump through hoops to get assistance. If they are fleeing domestic or sexual violence, they should be automatically helped and not have to go through job checks, etc.

Recommendation:

42. Provinces should be instructed to fast track applications from Indigenous women and staff should coordinate services to ensure women don't fall through the cracks.

REMOTE COMMUNITIES

The needs are very different for those who live in remote communities. Everything they need requires travel dollars (ie. staying overnight somewhere in another town/city to attend to various services). This exposes elders and youth to life in the cities who may not be accustomed to the potential risks and harms away from home.

Recommendation:

43. All services to Indigenous women and families dealing with sexual or domestic violence should have funds to allow for the reality of cost of remote living as well as travel.

SUPPORT AND SERVICES FOR FAMILIES AND SURVIVORS OF MMIWG

Currently, there's a lack of support to provide assistance to survivors about the legal processes and legal languages utilized in court. There is also a lack of support for survivors who need aftercare.

Recommendations:

44. Resources to provide assistance to survivors about the legal processes and legal language should be accessible in the court process. Community anti violence advocates could provide this service.
45. Resources for aftercare should be a priority.

WELLNESS OF FRONTLINE WORKERS

If frontline workers are not well, they are unable to properly provide the necessary guidance to their clients. Many frontline workers have their own layers of trauma which requires healing. It was suggested that frontline workers have a whole department called 'life-givers' because they need to have life to guide others to life. Frontline workers understand that there is respect to all who walk through their doors. They require self-care services to continue to do the necessary work that they do.

Recommendation:

46. Resources for self-care for frontline workers should be attached to every contract for services.

SUMMARY OF RECOMMENDATIONS

1. The final report of the MMIWG must provide details about the limitations within the National Inquiry process to address police conduct and its brutality against Indigenous peoples and communities, as well as the difficulties in developing positive relationships with families to ensure their participation.
2. Systems and institutions can also address systemic racism by ensuring Indigenous peoples are in decision-making positions.
3. The Provincial Health Authority model is a good one to start with but it is not comprehensive enough. It requires protocols to learn how to connect/engage with local communities, to learn about specific nations and local nations, to learn about protocols, how to connect with elders.
4. All systems need to be more diverse and hire more Indigenous staff.
5. A complete overhaul of the Indigenous child welfare systems is needed.
6. Implement a national Indigenous child welfare advocate to ensure there is a high level of standardized care across the country
7. The Ministry return at least 10% of the funds to Indigenous families [referring to the funds that would otherwise be used to pay for foster care or outside caring services such as a group home]. Most Indigenous kids are considered special/high needs which means non-Indigenous foster parents and private care institutions are getting hundreds of thousands per child to care for Indigenous kids, while Indigenous families/caregivers get pennies.
8. Focus on supporting moms and parents to better support their Indigenous children.
9. No child should be apprehended due to residential school trauma or poverty.
10. Funding to create child welfare centres in nations with indigenous specific parenting courses. With support to parents, the province needs Indigenous specific parenting courses because parents and grandparents ability to parent and care were disrupted because of residential school. Services need to be specific to indigenous women and are conscious about the cultural needs

11. Create and implement an Indigenous specific, culturally relevant parenting after separation course.
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13. The RCMP should follow up and report out about the Indigenous members recruitment program – is the government actively pursuing this?
14. Keep RCMP officers in community that have developed positive relationships.
15. The RCMP should be accountable - when they function well, they can be a real support to communities.
16. Coroners should investigate until they know why she died. For instance, was it because of sexual violence, dealing with a gang rape, dealing with everyday systemic racism. When someone takes their own life, an investigation should begin as to why they killed themselves.
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33. Education of our frontline workers, many are not native; need more native staff.
34. More education getting out to everyone – Indigenous people, as well as our visitors.
35. Police and law makers need to be more educated about colonization, impacts of multigenerational violence, deeper understanding of the true story and need to hear and know what we've talked about here today.
36. Emergency Indigenous housing/transition homes are required in Indigenous communities, especially for women in remote areas.
37. Services and programs should look to foster connections to break down isolation.
38. Aftercare services/ aftercare funding for survivors of the 60s scoop.

39. More multi-ministry funding (funding from all levels of government) and multi-year funding is required for community based survivor support and prevention rather than the piece-meal funding that every community competes against.
40. Operating grants to respond to violence are required to operate and sustain programs. Funding is also required for research, data management, administration, development of an infrastructure (i.e. governing body/board/committee and staff)
41. Resources are required to preserve knowledge by digitizing interviews with knowledge holders and language speakers.
42. Provinces should be instructed to fast track applications from Indigenous women and staff should coordinate services to ensure women don't falls through the cracks.
43. All services to Indigenous women and families dealing with sexual or domestic violence should have funds to allow for the reality of cost of remote living as well as travel.
47. Resources to provide assistance to survivors about the legal processes and legal language should be accessible in the court process. Community anti violence advocates could provide this service.
44. Resources for aftercare should be a priority.
45. Resources for self-care for frontline workers should be attached to every contract for services.