Research Findings on Gendered and Colonial Violence Prevention Service Provision in Baawaating:

Weaving the MMIWG2S+ Calls for Justice

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Executive Summary

On June 3, 2019, the government of Canada released its Final Report on Missing and Murdered Indigenous Women, Girls, Two-Spirit and gender-diverse Peoples. It has been five years since its findings asserted that this issue is an epidemic and amounts to genocide.

The Native Women's Association of Canada's 2023 annual report assessed action on the Inquiry's Calls for Justice (CFJ), and affirmed the federal government "has made little progress on its commitments" (NWAC 2023). However, the gravity of the issue in smaller urban centers like the Baawaating area (Sault Ste. Marie and surrounding First Nation communities, as well as urban Indigenous Peoples) is still invisible. This lack of visibility, coupled with years of underfunding for social services–and more so for Indigenous communities–is a great concern to the Indigenous Women's Anti-Violence Task Force (IWAVTF), its network of social service organizations and community members.

Formed in 2018 as a result of the need for advocacy on the issue and Indigenous-led solutions (Jimenez & Dabutch, 2020), the IWAVTF is a self-declared Indigenous, female-identified and led network aimed at creating spaces to share best practices, discuss strategies, and pool resources to shed light on the root causes of MMIWG. Over time, as the impact on gender-diverse individuals was revealed, the acronym was expanded to include Two-Spirit and gender-diverse persons. The IWAVTF has organized the MMIWG2S+ Memorial March in Baawaating in recent years and has heard social service organizations' legitimate concerns about the alarming rise of violence against Indigenous communities, women, gender-diverse, and Two-Spirit individuals.

As a result, the IWAVTF developed a strategic plan with objectives that called on the need to engage organizations serving the local Indigenous communities to collect empirical evidence of MMIWG2S+. Specifically, the call to create spaces for Indigenous knowledge sharing on anti-violence best practices led to discussions on ways to document the context under which social service organizations address violence.

This report details the results of an Indigenous-led, mixed-methods, and participatory research project that provides a glimpse into the knowledge and application of these Calls within service planning, programming, and delivery in Baawaating to identify the barriers and opportunities for aligning social service provision that align with the CFJ. It was developed with guidance from its Research Advisory comprised of local Indigenous members of the IWAVTF. The research project was developed in 2022, supported by funds from the Social Science and Humanities Research Council and in partnership with the IWAVTF.

An extant literature review revealed that overall, social service provision has suffered

from years of funding cuts stemming from federal and provincial government policies as well as legislative frameworks and systems that continue to invisibilize Indigenous Nations' needs and voices. Irreparably, such systems have led to many issues we present in this report. The report is organized in findings organized by thematic areas, highlighting the needs/challenges and opportunities organizations identified as key to providing services to Indigenous women, girls, and gender-diverse individuals to align with the Calls for Justice.

Opening in February 2023, an online survey developed with the IWAVTF's Research Advisory was distributed to Indigenous and non-Indigenous service providers in the Baawaating catchment area to understand their organizational structures, mandates, and to get an overall sense of their experiences, immediate needs, and concerns. The organizations represented in the survey include social service providers and first responders. Questions for the interviews and sharing circles deepened the themes identified in the surveys and wrapped up in February 2024.

Key Findings

Across all groups, these are the top 5 most pressing concerns for aligning service provision to the Calls for Justice:

1. Limited definitions of **violence** guiding programming and measuring results;
2. Inequitable, unsustainable, and limited **funding** for Indigenous clients;
3. Organizational **policies** lack specificity requiring the hiring of Indigenous staff, mandatory training in cultural competence/safety;
4. Need for **culture-based and trauma-informed programming** across all service levels;
5. Need to develop mechanisms for working together through **partnerships**.

Policy Recommendations

A separate document with policy recommendations calls for all levels of government to resolve jurisdictional issues to facilitate the implementation of Treaty responsibilities as recommended by the Calls for Justice (CFJ) and its predecessors: the Royal Commission on Aboriginal Peoples (RCAP), the Truth and Reconciliation Commission of Canada (TRC), and the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP) to:

1. Center and facilitate self-determination;
2. Implement sustainable, equitable, and targeted funding;
3. Develop and maintain Indigenous-led partnerships;
4. Improve inter- and intra-agency collaboration/communication;
5. Increase the numbers of qualified Indigenous and non-Indigenous staff

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Introduction

Baawaating, translated into “The Place of the Rapids” in English, is the Anishinaabemowin name of the traditional territory of the Anishinaabeg, who have lived here since time immemorial, and the Métis who settled along the shores of the St. Mary’s River. Baawaating’s territorial boundaries include the Anishinaabek communities of Batchewana First Nation (Rankin Reserve) and Garden River First Nation. These communities were created in 1850 through the Robinson Huron Treaty (RHT) in order to share the wealth from the extraction of natural resources in the area. According to Oral History documented by Scott Lyons (Leech Lake Anishinaabe), Baawaating is an area rich in resources and a key trading post (2009). Today, Baawaating is also home to various urban Indigenous communities, including the Missanabie Cree First Nation. It is important to note that Métis settlements in RHT territory are not included. Additionally, Lytwyn (1998) reports that prior to 1830’s, the British imperial government treated Métis people much like other Indigenous Peoples in North America.

Anishinaabe Peoples have known this place as a meeting place where they traded goods and lived by their traditional knowledge. However, years of ongoing colonization, the effects of Canadian policies, as well as the lack of action to address the need to provide culturally-based solutions from the communities themselves, have created the conditions for gendered and colonial violence (Chiblow & Jimenez-Estrada, 2021; Lawrence & Anderson, 2005; Bourgeois, 2018; Holmes et al., 2014; Jacobs, 2013; Kuokkannen, 2008; NWAC, 2010, 2017; Auditor General of British Columbia, 2013; Palmater, 2015; Razack, 2002, 2020; Smith, 2005), as already documented in various reports since the issue of Missing and Murdered Indigenous Women, Girls, Two-Spirit and gender-diverse Peoples (MMIWG2S+) first came to public light through the MMIWG Memorial March in 1992 (RCMP, 2014; Pearce, 2013; NWAC, 2010). This annual event—first started in the downtown east side of Vancouver—has been organized in Baawaating since 2007.

The Indigenous Women’s Anti-Violence Task Force (IWAVTF) network was born in 2018 as a result of the need for advocacy on the issue and Indigenous-led solutions (Jimenez & Dabutch, 2020). This female-identified and Indigenous-led network aimed to create spaces to share best practices, discuss strategies, and pool resources to define the root causes of MMIWG2S+. In Baawaating, social service organizations and community members have underscored the importance of system-wide and Indigenous-led solutions to the unique circumstances that create the conditions of vulnerability for Indigenous women, girls and gender diverse persons. Complex issues rooted in colonialism like human trafficking, drug poisoning, homelessness, and intimate partner violence (Fortier & Hon-Sing Wong, 2019) also require a focus on prevention. Such preventative measures must integrate Indigenous perspectives and practices to address ongoing colonization while reminding communities of their collective responsibilities to take care of each other.

As a result, the IWAVTF developed a strategic plan with objectives that called on the need to engage organizations serving the local Indigenous communities to collect empirical evidence of MMIWG2S+. Specifically, the call to create spaces for Indigenous knowledge

sharing on anti-violence best practices led to discussions on ways to document the context under which social service organizations address violence.

Research Scope and Significance

This report stems from this call and details the results of an Indigenous-led, mixed-methods, and participatory research project with service providers and first responders.

It provides a glimpse into the extent of knowledge and application of these Calls for Justice within service planning, programming and delivery in Baawaating. It provides an overview of how violence is defined in Baawaating and the dimensions and contexts in which they take place. First, understanding that violence is systemic and not one, but many, provided the parameters from which participants shared their insights in the gaps in programming. Secondly, the questions delved into current gaps to address the unique circumstances and systemic vulnerabilities of survivors and clients regarding the MMIWG2S+ pandemic. Lastly, all of the thematic areas shine a beacon onto what is needed to address this issue from ongoing, sustainable, equitable and culture-based lenses.

An extant review of the literature revealed complex root causes, amplified by the geographical and socio-economic conditions of the Northern Ontario in general and Baawaating in particular. In addition to the ongoing impact of the binary gendered nature of the Indian Act and its paternalistic funding structures, basic Treaty relationships have not been honoured. Such systems have led to many issues, which we have organized in thematic areas that highlight the barriers and opportunities for organizations providing services to Indigenous women, girls, and gender diverse individuals to align with the Calls for Justice: violence, funding, policies, role of culture, and partnerships.

Literature Review

According to an extant evaluation of social science literature on gendered and colonial violence from both Indigenous and non-Indigenous perspectives, MMIWG2S+ is still an epidemic (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019) that requires an examination of the context in which violence takes place and the mechanisms needed to stop the cycles of violence. Systemic patterns that continue to influence how all levels of government support and resource the needs of Indigenous communities, regardless of status (on-reserve, off-reserve, status, or non-status), were found in the initial review of existing literature. Many of the identified issues are not new. While they relate to the ongoing impacts of the Indian Act, as mentioned in the Royal Commission on Aboriginal Peoples (1996), the United Nations Declaration on the Rights of Indigenous Peoples (2010), the Truth and Reconciliation Commission and the various report cards on achieving the Calls for Justice (NWAC, 2022; ONWA, 2020). Palmater (2019) has affirmed this epidemic is due to the racism embedded in "Canada's infrastructure: laws, policies and practices that serve to devalue the lives of Indigenous Peoples" (para. 5). This and other issues require non-Indigenous allies work toward truth and reconciliation at a deep, systemic level.

The Indian Act

The Indian Act is a federal law in Canada that governs matters pertaining to status, bands and reserves. Since 1876, the Indian Act has controlled every aspect of Indigenous Peoples: "As a regulatory regime, the Indian Act provides ways of understanding Native identity, organizing a conceptual framework that has shaped contemporary Native [sic] life in ways that are now so familiar as to almost seem 'natural'" (Lawrence, 2003; RCAP, 1996). Amendments made to the Indian Act in 1951 established the federal government's power to determine who was, and who was not, an Indigenous person under the legislation. Section 12(1)(b) removed status from any woman who married a non-status Indigenous or non-Indigenous person, but not for men who married non-Indigenous women or Indigenous women without status. Various reports document how even after Bill C-31—which reinstated the status rights of many women in 1985—the Act still discriminated against women by privileging male lines of descent. Clearly, the Indian Act continues to confer authority to the federal government to exert political control over First Nations and imposing the Chief and Council system, determining the cultural, social and economic rights of Indigenous Peoples (Milloy, 2008).

As mentioned in many other reports, the issues we identify in this report can be traced to the racism embedded in legislative frameworks like the Indian Act. Other issues stem from historical jurisdictional disputes between the Federal and Provincial levels of government comprise the root causes of gendered and colonial violence. These include 1) **jurisdictional disputes** over funding responsibility and accountability; 2) **ongoing binary gendered** impacts of the sex-based discrimination of the Indian Act; 3) **misgendering** in service provision and

homicide statistics due to gender identification based on biological and assigned sex and not gender identity and expression; and 4) **imposition of Western institutions**, with a particular focus on the **criminal justice system and education**.

Impacts of Jurisdictional Disputes—Funding

Inadequate funding allocated to Indigenous programming in social service agencies is not new. Scholars (Tobias, 1976; Shewell, 2016; Gough et al., 2005) have argued that Section 88 of the Indian Act delegated Indigenous Nations wardship status preventing their active participation in **deciding the purpose and disbursement** of funds to meet their needs. The jurisdictional disputes have historically led to **ongoing delays** in disbursement of funds, a piece-meal approach **instead of permanent** and **guaranteed funding impacting violence prevention through basic need provision such as childcare, healthcare, and housing.** The provincial and federal disagreement over responsibility to Indigenous Peoples is referred to by the Supreme Court of Canada as "a 'jurisdictional wasteland,' as both levels of government deny responsibility" (Hanna, 2022, p. 12). The lack of accountability and responsibility increase the risk of violence for Indigenous communities. As a result, Indigenous communities continue to be targeted and overrepresented in child welfare and violence statistics (Pollock et al., 2018), while underreported in disaggregated data (Nathoo et al., 2013), and underserved in general.

Healthcare and Childcare

The federal and provincial governments have "maintained a grant-based approach to Indigenous health care [among other needs]" (Webster, 2020, p. 101). The aforementioned have detrimental effects on the coordination and approval of funding, inequitable amounts that do not address Indigenous communities' needs, as well as metrics that contradict Indigenous communities' definitions of success. Of particular interest in improving systemic conditions of vulnerability is *Jordan's Principle*, a legal rule ensuring all First Nations children living in Canada can access the products, services and supports they need, when they need them (Lavoie, 2018; Dej et al., 2023). The continued failure of the federal government to address Indigenous children's needs led the court case by the First Nations Child and Family Caring Society (FNCFS) against the federal government in 2007, "alleging that child welfare services provided to First Nations children and families on-reserve were flawed, inequitable and discriminatory" (Canadian Child Welfare Research Portal, n.d., para. 1). Although the verdict ruled in favour of the FNCFS, service providers are burdened with severe debt to cover care expenses upfront due to delays and backlogs (The Jordan's Principle Working Group, 2015), in spite of the requirement to approve immediately (Stefanovich, 2023). This has led to **many agencies being reluctant to work with Jordan's Principle**, or turning away Indigenous clients (Stefanovich, 2022), even if it contravenes Indigenous children's rights as affirmed in Bill C-98 which ensures Indigenous children have access to secure and adequate housing.

Housing and Indigenous Peoples

The national housing crisis impacts growing communities, yet, **there are no clear statistics on how the housing crisis impacts Indigenous Peoples in Sault Ste. Marie** (The Corporation of the City of Sault Ste. Marie, 2023). To address Indigenous Peoples' unique needs, up-to-date and race-based statistics are needed to disburse federal funding such as the Canada Mortgage Housing Corporation's (CMHC) Urban, Rural and Northern Indigenous Housing strategy and Rapid Housing Initiatives. The 2023 census for the City of Sault Ste. Marie reported a total population increase of 5.2% since 2021 (Armstrong, 2024). However, the latest statistics for individuals identifying as Indigenous account for 11.9% of the total population in Sault Ste. Marie (Statistics Canada, 2021).

Indigenous Peoples living in Sault Ste. Marie experience limited affordable and culturally safe housing including rental, supportive, and subsidized housing. The City's 2023-2025 Housing Needs Assessment highlights critical trends such as limited rental units outpaced by the city's population growth, old and decaying housing in need of repairs, and skyrocketing housing/rental prices (The Corporation of the City of Sault Ste. Marie, 2023). Overall, **neither the city's Housing Assessment nor the literature reviewed mentioned culturally safe housing needs or even the complex process of acquiring lands** to build public housing. These issues create further precarity for Indigenous women, children and gender diverse persons due to the binary gendered nature of the Indian Act, especially for those who previously lost their Indian Status and could not to regain their status through Bill C-31 (Assembly of First Nations, 2020). Therefore, as mentioned in the National Inquiry into MMIWG2S+ Report, the Indian Act continues to enable a system of misusing data without having an accurate and consistent raced-based data infrastructure (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019).

The Gendered Nature of the Indian Act

Sex-Based Discrimination

Following the findings of RCAP (1996), scholars have analyzed the sex-based discrimination of the Indian Act (Lawrence & Anderson, 2005; Palmater, 2015). The disproportionate impacts of the Indian Act are most notable when Indigenous women married a non-status person, forcing them to leave the reserve, lose access to services and denied any annuities owed to them by the federal government (Lawrence & Anderson, 2005). In addition, patrilineality was imposed through the practice of passing status from the male side, and women ceasing to be members of their own band to become a member of their spouse's band, as was the case for Jeanette Corbiere Lavell (RCAP, 1996). The impact is that Indigenous women are left without community supports and family bonds.

Gender-diverse persons have been forced to hide their sexual orientation and gender diverse identities in order to retain their status and benefits. Moreover, same sex marriage was not legalized until 2005, making it more difficult for same sex partners to obtain status (Crown-Indigenous Relations and Northern Affairs Canada, 2022). The government publicly recognizes the remaining inequities in the Indian Act, particularly as pertains same-sex couples as the forms “require the applicant to provide their father's family name and their mother's maiden name. For same-sex couples and their children, these forms requirements may enforce parental relationships that do not exist or do not apply to their situation” (Crown-Indigenous Relations and Northern Affairs, 2022).

Gender-Based Discrimination

The differences between sex and gender are not widely understood, particularly when it comes to Indigenous gender identities that exist outside of Western, binary constructs of gender. In addition to sex-based discrimination, Two-Spirit and other gender-diverse Indigenous Peoples are faced with discrimination based on their gender identities that are rooted in culture and spirituality. There is a dearth of local research, as "Two-Spirit and other Indigenous cultural gender identities cannot be understood in reference to the Western gender binary" (Jacobsen et al., 2023, p. 4), and are often excluded from studies and service planning in colonial institutions. **The lack of understanding of non-binary gender identities leads to the misgendering of Two-Spirit, Transgender, and other gender-diverse Peoples**. Misgendering, whether intentional or not, is a common occurence, as "many nonbinary people do not believe it is possible to be correctly categorized and perceived as nonbinary by strangers" (Jacobsen et al. 2023, p. 3).

Lack of Disaggregated Data

Disaggregated statistics by race and diverse genders pose a significant gap in both quantitative and qualitative data regarding the root causes of MMIWG2S+ in general. Victimization against Indigenous women and girls is not only more frequent but also more fatal and targeted more toward younger ages, and cannot be merely attributed to common risk factors such as mental health, addiction, homelessness, living environment, and childhood violence (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019).

The literature reviewed revealed **significant gaps in both race-based and non-binary gender-based quantitative and qualitative data** to tackle the root causes of MMIWG2S+. The need to collect such data was under-recognized (Jeffrey et al., 2019). Remoteness, including being far north or rural, reflects the lack of safe access to high-quality and available social services and health support for women/individuals fleeing violence. While there is existing data available on the social indicators of female violence victims at the national level, it remains scarce and limited in scope. Regardless, the slightest information alone stresses the grave reality of feminicide and MMIWG2S+:

1. Statistics Canada's 2018 data-gathering effort revealed that six in 10 Indigenous women in Canada underwent **physical or sexual assault** at some point in their lives, a figure significantly higher than other racialized groups; such risk intensifies for Indigenous women identified as sexual minorities (Roy & Marcellus, 2019).
2. In 2018, Indigenous females were five times more likely to be **violently murdered** than non-Indigenous females. The numbers were higher than the previous average (2014-2017) (Roy & Marcellus, 2019).
3. According to a University of Guelph study, there was a 27% increase in **feminicide** cases in Canada in 2022 compared to pre-COVID 2019. Shockingly, about one in five female victims violently murdered in 2021 were Indigenous women (Canadian Femicide Observatory for Justice and Accountability, 2022).
4. As reported by Canada's Department of Justice, Indigenous feminicide cases were more likely to be priorly labelled as **missing or unsolved** rather than being promptly found unharmed. These missing Indigenous females are at greater risk of being murdered later (Department of Justice Canada, 2023b)
5. The MMIWG2S+ National Inquiry (2019) demonstrates that Indigenous females are 12 times more likely to go missing and be murdered compared to non-Indigenous females in Canada.

It is worth noting that the MMIWG2S+ figures could be higher due to under-reporting, and misidentifying or missing race and/or gender identity. The misgendering is directly related to gendered categories used by Statistics Canada, even if "a person's current gender may differ from the sex a person was assigned at birth...and may differ from what is indicated on their current legal documents" (Jaffray, 2020, Text box 1, p. 5). As an example, Two-Spirit identity is classified as a "sexual orientation not elsewhere classified" (ibid.).

As inaccurate as the current data are, we see that the numbers of MMIWG2S+ keep climbing. This upward trend is worrisome and can be traced to the lack of Indigenous perspectives in the criminal justice and education systems that perpetuate negative stereotypes and incomplete stories about Indigenous Peoples.

Imposition of Western Institutions

Criminal Justice System

The criminal justice system (CJS) is comprised of law enforcement (policing), court system, and the correction/custody system. It is well documented that Indigenous Peoples are overrepresented among in-custody population despite comprising only about 4% of the Canadian population (Clark, 2019; Low et al., 2022). The last decade witnessed a significant increase of Indigenous inmate population in Canada, regardless of gender (Low et al., 2022).

Given that Indigenous Peoples are overrepresented in almost all areas and processes of CJS, all stakeholders in CJS (including first responders) have historically and continuously ignored the systemic barriers creating conditions for Indigenous Peoples to be drawn into CJS (Clark, 2019; National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019).

Policing

The National Inquiry into MMIWG2S+ Final Report (2019) and Razack (2020) demonstrate that Indigenous communities are targeted, overpoliced, and subjected to more police violence. In 1933, the Indian Act appointed the Royal Canadian Mounted Police (RCMP) to act "as 'truant officers' to enforce attendance and return truant children to residential schools." (RCMP, 2024, para. 12). The RCMP also played a key role in forcibly taking children from Indigenous communities and into the foster care system, as well as criminalizing the use of alcohol, potlatch and Sundance bans, and imposing passes to leave reserves (Rudin, 2002). Moreover, the police continues to subject Indigenous Peoples to excessive use of force (Gillezeau et al., 2022)–including sexual violence–against Indigenous women (Razack, 2016). The collective trauma experienced by Indigenous communities from policing lead to fear of institutional reprisals, most notably, the fear of wellness check, in which clients could end up being arrested or having their children apprehended when they are in contact with first responders (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019).

Rudin (2002) also illustrates the overrepresentation of Indigenous Peoples in CJS in relations to underpolicing in the Indigenous communities. Underpolicing, as defined by Rudin (2002), means **Indigenous Peoples are underprotected and rendered vulnerable** to various forms of violence in which first responders fail to respond to in a timely manner. Incidents of ongoing underpolicing in Indigenous communities due to homophobia, apathy, and racist assumptions among first responders continues (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019). For example, Murphy-Oikonen et al. (2020) reported that Indigenous women's lack of reporting of sexual violence is directly linked to "fear of disbelief" of their cases. Further, McMillan concurs that police perceptions of sexual violence are "unfounded or made up" (2018). Additionally, the colonial structure of underpolicing is also purposefully maintained by the Canadian government to chronically deprive First Nations first responders the funding/resources to enact self-determination of serving their own communities. First Nations first responders continue to rely on mainstream police partners for investigation and crime prevention, who may have a poor understanding of Indigenous cultures (Rudin, 2002).

Responding to the concerns of underpolicing and overpolicing, Jones et al. (2016) underline the importance of mandatory Indigenous-led cultural competency/safety training. They also shared a need for hiring more first responders with Indigenous knowledges. However, the reconciliation between Indigenous communities and first responders needs to be formally recognized and institutionalized (Jones et al., 2016). It needs to be reflected in all levels of

government supporting ongoing Indigenous-led partnerships and changing the narratives of policing to wrap-around services.

Court Systems and Restorative Justice

The lack of treatment, rehabilitation, and prevention resources and funding is a nationwide problem (Health Canada, 2019) which affects the Baawaating area. Severe rates of drug poisoning, chronic insufficient and unsafe housing, limited accessible youth programming and violence prevention programmes impact Indigenous communities disproportionately, as reported by Low et al. (2022). These issues lead to increased rates of petty crime and incarceration with limited or no access to social and restorative justice programs. Clark (2019) argues that Indigenous offenders are more likely to be denied bail or given harsher bail conditions that leads to them being incarcerated longer than non-Indigenous counterparts.

There have been efforts to resolve the issue of Indigenous overrepresentation. For example, the passage of Bill C-41 in 1995 amended the Criminal Code through provision of section 718.2(e) to consider alternative sanction measures for all offenders, particularly Indigenous offenders. However, this section tended to give more non-Indigenous offenders the benefit of alternative sentencing, while little consideration was given to Indigenous offenders (Fennig, 2002). Later in 1999, the decision on *R. v. Gladue* led to creation of **Gladue principles** that outlined the application of section 718.2(e) to consider systemic factors of Indigenous offenders in sentencing (Rudin, 2008). Gladue principles are inconsistently applied due to lack of available alternatives to incarceration, limited Gladue courts—there are none in Northern Ontario—and limited report writers, as well as insufficient resources for its complex procedures (Department of Justice Canada, 2023a). Court officials are also largely uneducated and confused about the Gladue principles, which inhibits their actions to apply alternative solutions to incarceration (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019; Rudin, 2008). There have also been concerns over the limited representation of Indigenous traditions and cultures in the Canadian legal system (Rudin, 2002). As a result, none of these efforts have effectively prevented overrepresentation, with Indigenous offenders often being incarcerated before implementation of section 718.2(e) (Fennig, 2002).

Restorative justice, including Gladue principles, has been a leading alternative to traditional sentencing principles which focuses on repairing harms and restoring harmony by centering on the needs of communities, offenders, and survivors (Department of Justice Canada, 2023a). Although restorative justice is influenced by Indigenous legal traditions, it has not been developed by integrating Indigenous perspectives and meaningful community engagement (Low et al., 2022). All stakeholders in CJS have difficulties in implementing restorative justice to Indigenous offenders as their discretion is often limited by “mandatory minimum sentences” (Department of Justice Canada, 2023a). Moreover, there are many barriers for the court in effectively applying restorative justice in each step of sentencing. These include difficulties in accessing various Indigenous-led restorative justice courts, gathering offenders’ information, and

coordinating community-based post-restorative-justice programs which require more intensive wrap-around resources and aftercare workers (Department of Justice Canada, 2023a; Reid et al., 2021).

Overall, developing Indigenous-led restorative justice processes that center on healing and reconciliation, requires all levels of governments and legal stakeholders to address the root causes of Indigenous overrepresentation and properly streamline the early violence prevention resources, as well as post-court solutions.

Education

A key feature of Canada since Confederation is the imposition of Western social, cultural and economic systems onto Indigenous Peoples, in particular the residential school system. The Truth and Reconciliation Commission (TRC) recommended 94 actionable policy recommendations to address the harm done to Indigenous communities since contact and specifically through residential schools (TRC, 2015). TRC Commissioner Murray Sinclair (Anishinaabe) "stated that 'education is the key to reconciliation,' adding, 'education got us into this mess, and education will get us out of this mess'" (Harrison et al., 2018).

Education is an important institution that holds promise for addressing systemic violence for all. In the context of the MMIWG2S+ epidemic, four issues are at hand. **First,** scholars have named the importance of dismantling the mainstream (misrepresented) perspectives on Canadian history, to include the atrocities committed against Indigenous Peoples: residential schools (McGregor, 2017; Wallace-Casey, 2022), the *Sixties Scoop* and children under care (Sinclair, 2017), and to educate about trauma from a systemic perspective rather than a biomedical/clinical approach (Braganza et al., 2018). **Second**, Canadian histories are not taught by Indigenous Peoples who are experts, and in a way that reflects the contemporary form of colonialism. **Third**, on-reserve education is still governed by the Indian Act, therefore, there is a lack of educational institutions on-reserve, with limited support for violence prevention, leading to a low school retention rate and prospective students not accessing education. Historically, educational gaps were a result of the Indian Act, posing limitations on the level of education that could be attained by Indigenous Peoples before losing status. **Lastly**, the professional development of Indigenous-led education in post-secondary education has been inadequate, leaving professionals unprepared to address historical and ongoing colonial impacts and to serve Indigenous communities.

Dismantling the Misrepresented Perspectives on Canadian Colonial History

The Canadian education system has a long lasting and ongoing history of misrepresenting the perspectives and realities of Indigenous Peoples through removal of Indigenous history, cultural appropriation, Eurocentric teaching, and romanticizing the idea of "reconciliation" (Koelwyn, 2018; Littlechild et al., 2021). Koelwyn (2018) argues that history curricula have

primarily focused on nation building, and often depicted Indigenous Peoples as “savage warriors,” victims of “social dysfunction,” and “protestors” (p. 283). Canadian histories are taught from the inception of confederacy, but not about prior contact with Indigenous Peoples. Regan (2010) noted that residential school histories remain largely invisible to Canadians.

Tuck et al. (2014) voiced concerns over the cultural appropriation by non-Indigenous educators, by which Indigenous knowledges are exclusively filtered and passed on by non-Indigenous educators. The release of the final report of the TRC and Calls to Action marked a critical shift in teaching about Indigenous histories, urging mandatory K-12 curriculum on residential schools, Treaties, and Indigenous contributions (TRC, 2015). Despite that, Wallace-Casey (2022) warns that this western-based “historical thinking” approach, which was “designed to enable students [...] to construct their own narratives about the past” (p. 4)—does not not align with Indigenous ways of understanding the past, but instead further imposes settler narratives (Cutrara, 2018; Littlechild et al., 2021; McGregor, 2017; Vanner et al., 2024).

The exclusion of Indigenous knowledges has led to false constructions that all Indigenous Peoples are the same (Braganza et al., 2018), the belief that colonial history was just about residential schools (Wallace-Casey, 2022), and believing that settlers and Indigenous Peoples have reconciled (Koelwyn, 2018). Littlechild et al. (2021) also noted that reconciliation was misconstrued as merely “an act of recognition and honouring” (p. 668), rather than addressing systemic challenges including ongoing land appropriation, oppression, MMIWG2S+, and assimilation due to Indian Act, leading to settlers denying their accountability (Tuck & Yang, 2012, p. 3).

Regan (2010) identified the significant gap between pedagogy of commemoration and the reality of complex Indigenous-settler relations. The two works rarely intersect (Wallace-Casey, 2022). For example, Littlechild et al. (2021) stress the importance of addressing land reclamation for genuine reconciliation in the curricula. Additionally, McGregor (2017) sees potential in historical thinking reform to decolonize curricula but stresses the need for active Indigenous participation and centering authentic Indigenous knowledges, which will “change the hearts and minds” of students (Wallace-Casey, 2022, p. 5).

Indigenous-Led Education

Indigenous-led education involves supporting Indigenous-controlled educational initiatives and centering Indigenous perspectives in mainstream education. Consistent with the Assembly of First Nations (AFN) report and Report Cards by both the NWAC (2022) and ONWA (2020), low retention rates of Indigenous students in post-secondary education are linked to socioeconomic factors such as limited funding, geographic barriers, and inadequate curricula–direct results of Indian Act. These factors, coupled with the historical assimilation policies such as **enfranchisement**, explain the low number of Indigenous professionals or students wishing to pursue post-graduate education, such as medical school (DHont et al., 2022).

While the number of current Indigenous-controlled post-secondary institutions has been increasing steadily due to the learning and credential needs to serve the community, only one institution operates within the Baawaating and North Shore areas, offering curricula centred in Anishinaabe perspectives. This is not enough to foster and retain Indigenous professionals trained in trauma-informed and culture-based ways. Relocation for study is a major concern raised in the 2023 CBC Report Card, in which Indigenous students are subjected to violence and trafficking. Resolving jurisdictional debates over funding responsibility is required to develop or strengthen Indigenous-led educational partnerships and retain students in their home communities. This will also support the communities' active participation in creating Indigenous-led programs or courses.

In mainstream educational institutions, various scholars have also stressed the importance of centering Indigenous perspectives and knowledges. Littlechild et al. critiqued the superficial *Indigenization* efforts that fail to "disrupt the underlying 'hidden curricula'" (2021, p. 666) Regan (2010), McGregor (2017), and Gebhard (2017) also called out on the limitations of mainstream history education which focus vastly on historical consciousness and awareness. This speaks to Tuck and Yang's (2012) concerns that people believe decolonization is about individual emancipation, which often lead to students' rationalization and resistance of Indigenous perspectives (Wallace-Casey, 2022). For example, McGregor (2017) argues that history classrooms may not be safe for Indigenous students as their perspectives are dismissed. Even with the best intentions, Regan (2010) and Vanner et al. (2024) argue that settlers and allies often fail to acknowledge the relevance of Indigenous perspectives to dismantle fundamental colonial structures of Canada.

The concept of *Two-Eyed Seeing*, which integrates Indigenous and Western ways of knowing, is often brought out by both Indigenous and settler scholars and professionals as a practical model (Bartlett et al., 2012; Broadhead & Howard, 2021; Njeze et al., 2020). In education, Wallace-Casey (2022) warned that Two-Eyed Seeing "is not simply a matter of acknowledging and recognising the 'otherness' of Indigenous ways of knowing" based on settler interests (p. 6). Instead, education should be Indigenous-led and culturally safe, aligning with the TRC's Calls to Action. Littlechild et al. (2021) states that educators need to "center Indigenous Peoples… assigning texts, podcasts, and (or) documentaries written or produced by Indigenous creators… [using] land-based, Elder-led learning" (p. 680). Students need to be taught by, instead of about, Indigenous Peoples.

Indigenous Education for Social Service Professionals

There has been a legitimate concern regarding education for preparing social service professionals to work with Indigenous communities. The TRC's Calls to Action requires all levels of government to support social service professionals to be educated on the history and impact of residential schools and Indigenous-led culturally appropriate healing. This call

highlights the importance of decolonizing social work curricula by centering Indigenous ways of knowing (Koleszar-Green, 2019) and honing students' self-reflection (Littlechild et al., 2021).

The social service professions are no exception in terms of their involvement in colonialism. Historically and contemporarily, social service professionals enact the Indian Act by forcibly removing children from their families to residential schools and child welfare agencies (Sinclair, 2019). The TRC (2015) report notes that during the Sixties Scoop, social workers were untrained in Indigenous cultures and histories, leading to misguided judgments and stereotypes. Such issues woefully persist today and are unchallenged (Koleszar-Green, 2019), with **Indigenous knowledges being absent in social work** curricula despite the high numbers of Indigenous clients in most social service contexts (Sinclair, 2019). Similarly, Braganza et al. (2018) raised concerns regarding practitioners being trained predominantly in clinical/biomedical paradigms. This has led to Indigenous communities not accessing counselling (Braganza et al., 2018). The clinical paradigms overlook the importance of historical trauma that requires wrap-around support at family, community, and systemic levels, including control over lands and resources.

In the era of equity, diversity, and inclusion, Littlechild et al. (2021) and Vanner et al. (2024) point out the shortage of professionals with Indigenous knowledges and understanding of MMIWG2S+. Additionally, Koleszar-Green (2019) argues that social work curricula are not responsive to Indigenous Peoples, leading to understaffing and overburdening of Indigenous professionals with reconciliation efforts (Littlechild et al., 2021).

Organizational Policy Issues

Indigenous Hiring/Retention

A CBC article (Beeby, 2016) discussing a 1996 written agreement with First Nations to increase Indigenous positions within the government states that the agreement has failed to deliver, with the government officials "often arguing that hiring freezes tie their hands or that there are no suitable or willing Indigenous candidates for jobs that do come open" (para. 4). The issue of Indigenous representation in the workforce is embedded in the TRC's Call to Action #7: "to eliminate educational and employment gaps between Aboriginal and non-Aboriginal Canadians" (Truth and Reconciliation Commission of Canada, 2015a). Overall, the literature reveals alarming trends such as Indigenous employee retention negatively impacted by "current employees' lack of awareness of Indigenous culture" (MacLaine et al., 2019, p. 11). Simiarly, a Memorial University report (Kuzmochka, 2021) argues that "Indigenous employees must [not only] exist within the institution… Indigenous people must be [...] well resourced, respected, and have positive experiences with the institution such that it may be a place that is both safe and nurturing for Indigenous employees, resulting in more Indigenous applicants and a growing community within the institution" (p. 3) This shows the need for developing institutional hiring

processes and policies to address "tokenism" in hiring as opposed to meaningful and sustainable practices to increase Indigenous visibility in the workforce. The literature reviewed did not mention specific cases except for the far North (i.e., Nunavut, Yukon, Northwest Territories). Moreover, trends within the social work field are missing, but recommendations have been made by the Canadian Association for Social Work Education (CASWE) to hire more Indigenous faculty and administrative staff (CASWE, 2021, p. 11). Such a gap speaks to the discrimination and racism within the workforce as frontline and high-level staff are unaware of the politics impacting Indigenous hiring and participation (O'Loughlin et al., 2021). This leads to a lack of Indigenous-targeted diversity hiring policies.

Mandatory Training

Another important aspect of fulfilling the Calls for Justice requires knowledge of, and engagement with, Indigenous communities. To address this gap, some non-Indigenous organizations have been attempting to answer the TRC's call for cultural competency training (2015a). However, in reviewing mandatory training programs delivered to healthcare professionals, Hardy et al. (2023) found a lack of evidence for "system-level impacts" (p. 10). In another study, researchers found that organizations struggle with **holding employees accountable for training completion** and practical application (Webb et al., 2023).

Within training programs, there is also a lack of consistency in the terminology used. While the CFJ specify *cultural* competency training for professionals throughout the document (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019), organizations use a variety of terms: "cultural safety […] cultural awareness, cultural security, cultural respect [...] humility, cross-cultural education and cultural capacity, and intercultural empathy" (Hardy et al., 2023, p. 8). The inconsistency in training focus and terminology has made it difficult for researchers to accurately assess the effectiveness and application of these training programs, and how to identify gaps in education.

Research Question

Given the aforementioned context, the research questions leading this study focused on determining what social service organizations are doing to address the MMIWG2S+ epidemic. Specifically, the research team and advisory agreed that we would only focus on organizations and not on survivors, which led to the question:

1) What are the characteristics of violence prevention programming in the Baawaating region for Indigenous women, girls and Two-Spirit individuals?
2) What are the challenges, needs, and opportunities to prevent and address gendered and colonial violence that align with the 231 Calls to Justice from the Final MMIWG2S+ Report Reclaiming Power and Place?

Research Approach and Methods

This research project draws on the need to reinstate the sacredness of Indigenous women and gender diverse individuals, encouraging a return to their rightful place within their own communities. Conducted among service providers in Baawaating, the research delves into their perspectives on gendered and colonial violence drawn from their professional experiences with survivors/clients and community partners at different scales. Participants included Indigenous and non-Indigenous frontline workers, first responders, managers, and directors. The research centers Indigenous knowledges as applied in both Indigenous and non-Indigenous contexts, guided by a community-based approach to enrich the findings as well as a strength-based perspective that examines multiple forms of erasure, recognizing Indigenous self-determination, resistance, resilience, and agency in the face of centuries of colonization, marginalization and violence (Savarese, 2017).

Methods

This study's methodology and methods centered the concerns and needs of the communities it aims to serve. The team received ethics approval and developed all required research agreements prior to data collection, as well as received free, prior, informed and ongoing consent from participants and the organizations where they work.

Sampling and Recruitment

The study used both organizational and snowball sampling methods. At the first stage of recruitment, the research team (we) identified potential organizations (Indigenous and non-Indigenous) for conducting the research. Community outreach was conducted, and invitation emails were sent to high-level employees among organizations to obtain their permission for us to disseminate the study or approach to potential participants. We secured written consent/endorsement to begin the recruitment within all participating organizations. We also secured support letters from First Nation and Métis communities (Batchewana, Garden River, Missanabie Cree First Nations, and the Métis Nation of Ontario) to begin the study with Indigenous organizations. Moreover, we established other research agreements as required. The recruitment also engaged with certain degrees of snowballing; respondents who completed the study also shared it among their colleagues.

Ethics

This research aimed to ensure that all Indigenous stakeholders are the stewards of their own confidential data, as per the principles of ownership, control, access and protection (OCAP). Consistent with the OCAP framework, all data (with identifiers expunged) are sent back to Indigenous communities upon the completion of this study.

To protect the identity of all participants, the research team ensured the safety of any data with identifiable information pertaining to any one person or organization that participated in the project. Therefore, the study does not share any specific names in research findings that would lead to breach of confidentiality and privacy. The full information letter and informed consent document is attached in Appendix 2 and 3.

Procedures

The research team co-developed the instruments used in this project with its Research Advisory Committee, made up of individuals from various member organizations and comprised of local Anishinaabe, female-identified community members. The research tools center the teachings and values of the communities in the catchment area, aim to address data gaps in Baawaating, while facilitating Indigenous-led advocacy and research capacity among local organizations. Information forms given at the outset of recruitment provided potential participants the opportunity to participate in one or all three stages of data collection (February 2023 to February 2024). With the exception of one organization, all participants completed all three stages: survey, semi-structured interviews, and sharing circles (see Appendix 4).

Survey

On February 14, 2023, the research team distributed a higher-level survey targeting participants in managerial and director positions with the purpose of understanding the organization. In the end, participants at all levels (managerial, director, frontline) completed the survey.

The survey data collected helped us understand the participants' demographics, as well as whether their organization's scope, mandates and operations align with the Calls for Justice (CFJ). The preliminary survey results served as the basis for interview questions to enable in-depth inquiries. Thirty-two (32) survey responses were received.

Semi-Structured Interviews

The interview phase began in April 2023 and consisted of questions developed from the survey's thematic areas. The questions sought to probe participants in how they interweave organizational realities with their detailed lived experiences and systemic challenges in implementing the Calls for Justice into their organizations' programs and services. This process pinpointed the gaps in actual service provision in Baawaating for Indigenous communities and MMIWG2S+. Due to the sensitive nature of the topic, the well-being of participants was prioritized in the interview processes. Moreover, interviewers aware of or trained in trauma-informed practices conducted the conversations in a virtual or physical space they identified as safe, with continuous debriefing and access to healing resources available throughout the process. There were 27 interview questions, which were centered on the following thematic areas: violence, violence prevention, wrap-around services, CFJ inclusion,

training, culture, and partnerships. Overall, we interviewed 28 participants over a period of 10 months—a sufficient number to fulfill reliability.

Sharing Circles

The final phase, sharing circles, was initiated in August 2023. These circles provided a forum for attendees to engage in open dialogues on long-term strategies to close identified gaps in service provision. Before each circle, attendees were welcomed by the research team with a comfort bag and a tobacco tie for consenting to participation. The circle commenced with a local Elder opening with sacred cultural practices and local teachings about protocols, responsibilities, respect, and confidentiality of the sharing circle. Attendees were encouraged to deepen the thematic areas and collaboratively develop the policy recommendations, followed by a closing ceremony. Overall, we held four sharing circles, with a total of 18 attendees within 7 months.

Research Findings

This section contains key findings from the all data collected. The qualitative data analysis was conducted with NVivo 14. We also present the general quantitative data collected via survey and analyzed using version 27 of IBM SPSS Statistics. Survey data provided the team with the general thematic areas from which questions for the interviews and sharing circles were developed.

The survey was analyzed quantitatively, mainly using descriptive statistics. All survey responses were coded in nominal scale, except for the question that asked, “approximately how many of your clients are Indigenous?” where respondents were required to rate based on the client proportion served. We also conducted one correlational analysis for types of violence participants witness regarding the question: “What types of violence have clients disclosed that they are experiencing?” Respondents ticked all options (e.g., emotional abuse), if these applied. The responses were coded as “selected” and “not selected,” which were then treated as “yes” or “no” in the analyses.

The results from the interviews and sharing circles were combined for qualitative analyses, which were sorted into different thematic areas identified by the literature. We reached the data saturation point and stopped the qualitative data collection when no more thematic areas emerged.

Data Limitations

As with any studies, this research is not without data limitations. The first limitation concerns the sampling bias in the recruitment of participants. Since the research phases were open to frontline staff, managers, and directors from any service providers, the research team had limited control over the profile of participants and types of services provided. Meanwhile, there were tangible constraints in accessing and reaching out to agencies/communities outside of larger urban centres, or those that have limited existing research relationship with the research team. As a result, perspectives from some agencies or participants providing certain services are more likely to be represented than others in this study, which may potentially skew the results.

Second, the survey questions, which required higher-level knowledge, might have been completed by participants with various levels of understanding of their organizations. Therefore, the survey results were used mainly for guiding and supporting the semi-structured interviews and sharing circles, instead of complex quantitative analyses. Additionally, in certain multiple responses questions (e.g., please select/list all that apply), the responses might be influenced by order effects in which the order items are presented impacted respondents’ selections.

What is Violence?

In the context of gendered and colonial violence, many scholars affirm its systemic nature (Razack, 2002, 2016, 2020; Palmater 2015). As established by the National Inquiry into MMIWG2S+ (2019), violence is deeply intertwined with the historical and ongoing impacts of colonialism. As Kaye (2016) points out, there is an urgency to document both "the ongoing conditions of violence" as well as the "continued forms of resistance Indigenous women" routinely express on the land and in "embodied" forms (p. 466). Likewise, our findings demonstrate several important criteria asserting the many faces of violence.

In this section, we will first share the quantitative findings based on the survey, documenting participants' testimony of the types of violence their clients encounter. We then discuss the context of these types of violence and link them with the root causes as shared by participants in the in-depth interviews and sharing circles.

Types of Violence Witnessed by Service Providers/First Responders

The initial survey revealed that the types of violence(s) participants see their clients experience are complex and systemic. Below is a list that informed the questions we developed for the semi-structured interviews in order to understand them more fully. These include (also see Appendix 1a):

- **Emotional abuse:** is often accompanied by physical abuse, sexual abuse, and intimate partner violence (IPV).
- **Physical abuse:** is often associated with sexual abuse, IPV, and human trafficking.
- **Spiritual abuse** (the manipulation of a religion or spiritual belief to control or coerce an individual): is often reported by clients who also experience psychological abuse, lateral violence, homophobia, transphobia, and sexual orientation discrimination.
- **Financial abuse**: is linked to psychological abuse and homophobia.
- **Sexual abuse:** is highly related to IPV.
- **Lateral violence:** tends to be reported along with homophobia.
- **Homophobia, transphobia, and sexual orientation discrimination**: are often mentioned as types of violence participants witness together.
- **Racism:** is mentioned although not significantly correlated with other factors.

Based on results from 32 surveys (Appendix 1b), participants reported their clients face the following types of violence (in ascending order): 1) sexual abuse (94%); 2) emotional abuse (91%); 3) physical abuse (91%); 4) intimate partner violence (IPV) (88%); 5) racism (75%); 6) human trafficking (75%); 7) financial abuse (72%); 8) psychological abuse (72%); and 9) lateral violence (56%).

Although spiritual abuse, homophobia, and transphobia were relatively less mentioned by respondents, we felt it was important to understand why during the semi-structured interviews, given the increasing incidences of misgendering (Canadian Femicide Observatory for Justice and Accountability, 2022, p. 28) and inability to access gender-specific and culturally safe services (Hunt, 2016). The significance of addressing these types of violence was deepened during the interviews and led to the following section, where we discuss the context in which these types of violence take place.

Violence Context and Root Causes

As mentioned by the participants, gendered and colonial violence against Indigenous communities cuts across socio-economic classes. In this section, we will discuss the context in which each type of violence occurs. In aligning with findings from the literature review and current reports on MMIWG2S+, we infer that the types of violence mentioned by the participants in the survey (Appendix 1a) are rooted in systemic racism, leading to cultural discrimination and inflicting ongoing trauma.

Various types of violence continue to occur in Indigenous communities with high rates of recidivism due to issues with court processes. A few participants advocated for bail reform. “There's just no deterrent in the system anymore. They're not scared of it because no one's held in custody,” one (Participant 18) argued. Another stated,

> “There's many people screaming for bail reform, because we have too many violent repeat offenders back out on the street re-victimizing people, and that happens. I understand the innocent until proven guilty, but when you've repeatedly committed violent acts or repeatedly committed offences, your rights should be restricted at that point” (Participant 15).

Some participants noted the importance of **expanding the definition of violence**, particularly for intake forms and addressing other types of violence not mentioned in the survey. The inclusion of substance use, going missing, stalking and harassment, racism and cultural discrimination is fundamental to prevent crimes such as human trafficking. This crime disproportionately targets Indigenous women, children and gender diverse individuals in Canada, particularly at-risk youth (under care, runaway) (U.S. Department of State, 2023).

Participants also talked about the lack of **culture-based and community-based definitions** on violence. Languages to define violence are Western-based and do not reflect Indigenous ways of knowing. For example, a participant shared:

> “When our people talk about somebody is ‘not being kind’ even in our language, we know that this person is a predator in the community, and I have a hard time saying ‘this

person is a predator in our community' so that our way of being doesn't get recognized in Western-based language." (Participant 10).

Based on the context of settler colonialism shared by participants, we can infer that a lack of culture-based services, Indigenous staff, and cultural safety training unveils how Indigenous Peoples continue to experience colonial violence. In the next section, we share how frontline participants understand the emotional, physical, and financial abuse they witness, as well as the lateral violence Indigenous participants experience.

Emotional Abuse

Frontline staff shared in detail the types of violence they witnessed among clients. First, the majority of participants shared that emotional abuse is a type of violence encompassing behaviours such as verbal belittling and body shaming. Participants remarked that this type of emotional abuse is not considered a form of violence as it is not covered by the criminal code (unless it involves threat [Section 264.1], attempted assault [Section 265], and intimidation [Section 423]). One participant affirmed that emotional abuse can be "just as traumatic" as physical abuse. Most frontline workers shared that the warning signs of violence are visible, but they have little authority to intervene in emotionally abusive situations. This was particularly true for first responders, who shared they can only "mediate" conflicts, leaving both parties vulnerable to continued harassment and stalking.

Physical Violence

First responders mentioned that calls for services due to alcohol-induced physical violence (e.g., bar fights) have decreased over the years in Baawaating, but they witnessed an increase in calls for murders and attempted murders, and physical abuse related to IPV.

First responders also shared that there appears to be more physical violence related to substance abuse in the last ten years compared to when alcoholism was more prevalent. When they deal with calls for service related to drug-induced mental illness and psychotic disorders, it is noted that first responders tend to apply more force due to a lack of knowledge or training in how to deal with these situations.

Financial Violence

Frontline staff participants shared a few examples of financial violence, which speaks about the importance of meeting basic needs and fostering financial literacy among community members. Some mentioned that clients may need basic financial skills for tasks like "cashing cheques," "opening bank accounts," and "shopping." One participant mentioned that financial abusers may have access to survivors' accounts (e.g., Canada Revenue Agency) to falsely claim benefits and gain access to child custody. The influx of funds coming to the community also

results in higher incidences of family feuds and elder abuse, where individuals close to the family have access to elders' bank cards to steal these funds.

Lateral Violence

Lateral violence was a common theme mentioned as per the survey and interviews. However, when asked what participants' definition of lateral violence is, some disclosed they did not fully understand it. This demonstrated lack of understanding led us to infer that **its prevalence may be underestimated**. Despite this shortcoming, there was a general agreement that lateral violence amounts to workplace harassment and this often involves internalized racism, stated by one participant, "Indigenous People [...] do lateral violence [so well] that it's common; that's another reason actually why I left [my workplace]" (Participant 23).

Other characteristics mentioned about lateral violence includes a perception of bitterness and hostility among colleagues, which many participants mentioned is a primary reason they leave their workplaces. Also, the lateral violence is heightened by an influx of federal funds coming into community which increases competition over access to funding and benefits tied to status under the Indian Act:

> "For community members, there's lateral violence for them as well because – especially now with the monies coming in, from the treaty negotiations – people are already starting, right? 'You don't belong in this community. You're not from here. You haven't been here. What have you done in our community?' All of that" (Participant 10).

Intimate Partner Violence (IPV)

Intimate Partner Violence (IPV) is complex, involving **more than one type of violence(s)**. It is one of the most common types of gender-based violence impacting the entire family unit. It is also a crime under the Criminal Code of Canada. The World Health Organization states:

> "Intimate partner violence refers to behaviour within an intimate relationship that causes physical, sexual or psychological harm, including acts of physical aggression, sexual coercion, psychological abuse and controlling behaviours. This definition covers violence by both current and former spouses and partners" (WHO, n.d.).

Given the psychological and financial dimensions of IPV, a few participants stated that "It can take an average of seven times for someone to leave their abusers." In reviewing the National Inquiry's root causes of MMIWG2S+ (2019), we can infer that in Baawaating, preventing IPV requires meeting basic needs for Indigenous women and gender diverse people.

Participants often shared that **IPV is intensified by financial circumstances and limited or non-existent social housing**. One Indigenous frontline worker highlighted the disproportionate impacts of insufficient safe housing in the community, exposing children to violence from the time they are born. Therefore, the impact is threefold, and its impact is exhibited as aggressive behaviours among children in childcare and early-years programs.

In Ontario, service providers have a duty to report incidences of IPV, especially if children are involved:

> "Under section 125 of the Child, Youth and Family Services Act every person who has reasonable grounds to suspect that a child is or may be in need of protection must promptly report the suspicion and the information upon which it is based to a Children's Aid Society" (Child, Youth and Family Services Act, 2017, S.O. 2017, c. 14, Sched. 1. , 2017).

First responders expressed they alone are "not the solution" to IPV as survivors seldom report abuse despite attempts to flee from it, consistent with a policy brief on IPV prepared for the House of Commons' Standing Committee on the Status of Women (Tran, 2022) that states the true number is also underreported. They shared that underreporting also hinders the **availability of disaggregated data on IPV** for violence prevention programming.

A few participants noted that **survivors are more willing to seek refuge and ongoing supports from social service organizations rather than disclosing IPV to first responders**. Reasons cited for this reluctance include fear of retaliation by the perpetrator, fear of child apprehension by the child welfare system, protection of intimate partners due to fear of limited economic stability after fleeing, and anxieties about safety planning (Karakurt & Silver, 2013). According to Barrett et al. (2011), IPV survivors often avoid seeking law enforcement interventions unless faced with the most dangerous violence or imminent fear for their lives; the study also shows that only 6% of women fleeing IPV were referred to any community services after their initial contact with first responders.

The court system also fails to properly address IPV and chronic violence. For example, it was common among first responders to mention issues such as "holding them for a day and the court releases in the next." One participant shared:

> "So, you'll have these chronic offenders, and that's just one example of something very minor where we pretty much know they're going to be released. But we'll come into situations where, you know, somebody has actually been stalked and criminally harassed" (Participant 8).

There were also frequent mentions of women in abusive relationships who "finally give up" in the court processes due to emotional and financial tolls, parenting pressure, and the belief that "they don't feel they're going to win." One participant added,

> "Women are leaving here without interim custody of their kids. They're leaving here without a place, without support payments in place, so how are they expected to survive? Those who are paying because they have a job are going to bankrupt or borrowing thousands of dollars to try and get this done" (Participant 14).

Another shared,

> "I think a lot of violence, especially when it's recurring like you see in the domestic violence and the ongoing kind of cycle that happens when you get in these domestic situations. The victims don't feel they have any other option but to go back, whether that be financially or that be we have kids together" (Participant 17).

Finally, another issue mentioned by many participants is the failure to recognize **IPV as an epidemic** by the provincial government. This lack of recognition leads to a "blame-the-victim" mindset in the community, leading to a never-ending cycle of violence.

Homophobia and Transphobia

Participants shared that "systemic issues, [like] homophobia and transphobia… [are] **running rampant** in our community" (Participant 9), given their frontline experiences with gender-diverse clients. Another participant commented that, "[gender-diverse peoples] faced homophobia and everything going down… [despite] we are all human beings" (Participant 22).

Two-Spirit individuals faced systemic discrimination, exclusion, emotional abuse, financial violence, and elevated risk of violence, according to participants.

> "My [...] changed gender, [physicians] put [them] on all these different medications and [they] just weren't the same anymore. Part of me felt awful about how [people] were treating them… calling [them] a freak… it really breaks my heart. What's happening in the world and it seems so much violence against [...] gender-diverse, Two-Spirit, women, and men, and it upsets me so much" (Participant 26).

> "Everybody talks about residential schools, but something that really just [hurt] me is the people who were Two-Spirit, usually weren't directly in the communities… [and] the money being given for the residential school survivors… doesn't translate directly for Two-Spirit members… [and] who are holding those monies are not willing to accept that there are Two-Spirit Peoples. They're not giving any of that money for Two-Spirit elders, survivors, family members, even now. **Lack of recognition as a Two-Spirit person and**

> **community member, is crushing** because there's all this money available but it's not going to be for [them]" (Participant 10).

Participants also shared that Two-Spirit individuals are treated based on traditional gender expectation (e.g., "you can't speak on that, you're not a man") rather than their unique gifts and lived experiences. One participant also shared circumstances where Two-Spirit Peoples were denied services catering to male clients. Despite the prevalence of homophobia and transphobia, a safe space for serving gender-diverse individuals were generally lacking, which we will discuss in details in following sections.

Cultural Appropriation and Racism as Ongoing Colonial Violence

A few participants highlighted the ongoing conflicts regarding issues like **identity theft and cultural appropriation**, which stem from colonial policies and legal definitions in the Indian Act. One participant shared an example of cultural appropriation when they expressed grief that sacred traditional practices were taught by "*pretendians*" — people who are not recognized as members of the community they claim membership in.

Moreover, in recent years, many non-Indigenous social service providers have received Indigenous teachings or training from a variety of sources. Oftentimes, **cultural safety training is not imparted by Indigenous trainers**, and can give the false impression that a) all Indigenous Peoples are the same; and b) that once finished, people who received information can train others. We also heard that all social service providers need to humbly acknowledge that the information is only a small portion of a large body of knowledge, and that these teachings differ from one community to another, by specifying which community and Elders the knowledge comes from.

Violence Prevention Programmes

A key subject discussed by participants was the need for expanded violence prevention programs, and what gaps in services exist in the community, both for clients and the organizations that serve them.

Needs for Organizations

1. Limited Services in Organizations

Limited services in Baawaating for violence prevention overall, and especially for gender-diverse people, are related to a lack of wrap-around services and inequitable funding for service planning and partnership. For example, smaller agencies are generally less funded to carry out programming and partnerships, but they are more dependent on larger agencies for resource sharing and skill development. Indigenous participants collectively mentioned the need for Indigenous-led partnership among agencies.

i) Services for Gender-Diverse Communities

Gender dynamics influence both the distribution of structural/legal power and equity in accessing various resources, services, and health determinants; these can include “housing, health care, drop-in centres, sexual health care, counselling and other programs” (Hunt, 2016, p. 11). Similarly, in Baawaating, participants voiced that there is a lack of tailored support services for Two-Spirit individuals and transgender youth due to **the gendered nature of services.** For most individuals, accessing culturally safe services often requires some sort of community connection, as there aren’t enough services. This also leads to individuals leaving the community, consistent with Ristock et al. (2011). For example, **shelters in Baawaating, which cater only to males or females fleeing violence**, limit access for gender-diverse and Two-Spirit individuals, a concern raised among all participants and by Hunt (2016).

Services are not only gendered but also unsafe for gender-diverse and Two-Spirit individuals as service professionals are not sensitive to their needs. Participants argued that such attitude and limited knowledges of safe community resources lead providers to make inappropriate referrals. For example, Participant 10 shared “[Two-Spirit Peoples] don't want to access medical services… [they] hate going to the doctor, [they] hate it,” further adding, “I know you've heard this, but the **racism in medical care** is disgusting. As a Two-Spirit person, there's nothing there for [them].” Two-Spirit individuals often find themselves “[having] to be teaching [professionals] about all the things that [they] need to have information on.”

ii) Violence Prevention Programming

Participants voiced that the limitations in violence prevention arise, firstly, due to the scope of each agency. First responders shared that, in line with Sekhon's (2022) report, they are frequently called upon to offer social services even though their training is not in social work:

> "We're not trying to be critical of our partners, they do a great job, and they are overworked as we all are, but I think that there has to be a change in perception about how to address some of these issues, because [frontline workers] ha[ve] to before we become involved, right?" (Participant 17).

Likewise, social workers are reluctant to accompany first responders due to the possibility of criminal violence, with the exception of partners like Mobile Crisis Rapid Response Team (MCRRT), which provides brief and short-term support:

> "Sault Area Hospital (SAH), the Canadian Mental Health Association (CMHA), [...] Mobile Crisis Rapid Response Team (MCRRT) [partner first responders] with a crisis nurse to help people that are in a crisis, and then hook them up with resources. Once the initial crisis is over and dealt with, then there's a person there to help hook that person up with the appropriate agency, whether it's housing or mental health or whatnot" (Participant 15).

Participants also noted that **services across Baawaating are mostly short-term and emergency-based**. The visit to some agencies is typically short, so services or referrals may not fully address clients' holistic needs. This reflects service gaps. Participant 5 shared, "I would say [our] services are [...] short-term. We can't provide long-term support. So, if a person [...] requested [services], then certainly we're going to try to refer to other agencies who can provide longer-term support." Similarly, another stated, "there are short visits with very specific [...] goal[s] … the only program that would do that more would be the [...] program, and they wrap around for sure" (Participant 24).

Participants also provided an example they deemed as a crucial violence prevention intiative: the **Downtown Ambassador Program**. The team is responsible for community outreach and wrap-around support (Helwig, 2022). However, participants voiced the need for more funding for the program:

> "We have the Downtown Ambassadors that are out there and deal with people in crisis and try to get them help before they go into crisis, which is a great program but that needs to be tripled. They need to have longevity and get them off the street, get them food, get them training, and deal with the mental health and addiction issues." (Participant 18).

In order to address the growing local encampment issues and to conduct street outreach, the District of Sault Ste. Marie Social Services Administration Board (DSSMSSAB, 2022) projected in 2022 that an additional $475,000 per year in their operating budget would be

required. This would allow for a more effective wrap-around approach that would be available seven days a week, 16 hours a day.

Additionally, service providers generally identified the lack of sustainable treatment, rehabilitation, and prevention resources in Baawaating, which is also a nationwide problem (Health Canada, 2019). Participants shared worries that the **funding for social services in Baawaating was only available or mostly used for managing emergencies and crises** rather than for long-term treatment and rehabilitation. Even the budget of the service planning component for violence prevention is often pulled toward dealing with emergencies. Stated by one participant:

> "When agency might be funded to provide [...] services, let's say, but they're underfunded in general, so they take that money and roll it into the crisis service [...] the money still be used for programming, it's just not necessarily the use for it like the original purpose" (Participant 20).

As commonly stated by participants, there is a need to transform the current criminal justice system. The court and correctional systems are currently overburdened and there is a call for more investment in **developing a rehabilitation system with accessible wrap-around services** and treatments.

> "The justice system is not built for that… we're not designed for the capacity we currently have, the court systems and the judges, the crowns and the JPs, they can't manage what they have in front of them already, so we need to streamline that and push on these people out of that system and over to a system where they're going to get some help… Our ambulance, our fire department, our police, our hospital emergency... there's so much money being spent just trying to manage that portion. I think if you took that money and put it into rehabilitation and programs that would help these people get off or fight their addiction as opposed to arresting them, we'd be a lot further ahead" (Participant 17).

Participants also stressed the need for service planning for individuals exiting correctional and rehabilitation institutions: "have a plan or services to follow through with aftercare programs there, [otherwise] the recidivism rates are just going to continue to increase" (Participant 19).

iii) Culturally Safe Services

Access to culturally safe services is challenging for women and gender-diverse individuals in both Indigenous and non-Indigenous communities. Participants shared that individuals whose basic needs are unmet or fleeing violence need frontline workers to be present in their community and reach out to them. However, outreach outcomes are dependent on the

availability of services. Participants shared that individuals may be "put into waitlists," that there are "not enough traditional healers," services are "not culture-based," clients "need to relocate and travel," and Indigenous resources are "hard to access."

Due to a lack of diversity hiring policies, discrimination within workplaces, chronic underfunding, and a lack of Indigenous representation among high-level positions, participants shared that **fewer Elders and traditional healers are willing to work in service providers like healing lodges**. There were frequent mentions of the **rigid eligibility of becoming a traditional healer**, who are not recognized as eligible providers like licensed and school-trained social workers or therapists. As traditional healers are excluded, the number of agencies that still provide traditional services decline, and participants raised concerns about traffickers, drug dealers, and predators concentrated near the existing service providers, and targeting vulnerable individuals. Participants also shared that despite on-reserve service providers serving community members, the services are still not "around their cultures and own way of healing" as **organizations hire staff who are not reputable members of the community they serve**.

There were a few mentions about the need to operationalize "safe spaces" among service providers, as there are debates regarding what is *safe*. Participants defined *safe space* as "welcoming," "cozy," "non-stigmatized," "non-disclosable," "non-white," and "culturally safe" environments. It needs to welcome clients to "share about culture and identity" and engage in "cultural services." However, participants expressed the concern that many **non-Indigenous service providers may not be safe spaces** as they do not have culture-based or traditional services (which is tied to their funding), even though our survey result (see Table 1) found that the proportion of Indigenous clients served by respondents (Median: 25-50%) appeared to be a lot higher than the proportion of Indigenous populations in Baawaating (12.4%, 2016 census).

Table 1

Indigenous Client Proportion Reported by Participants

Proportion of Indigenous Clients Served	Number Reported by Respondents (*N*)	Percentage (%, rounded)
Less than 10%	4	13%
10-25%	7	22%
25-50%	8	25%
50-75%	5	16%
Over 75%	4	13%
We serve only Indigenous Peoples	4	13%

Note. Total *N*=32.

A few non-Indigenous participants raised issues about shame and stigma experienced by some Indigenous clients as service recipients, and observed that **many Indigenous clients seek non-Indigenous services to avoid being known** in their communities. This means that non-Indigenous agencies off-reserve need to create strategies for culturally safe services and safe spaces through Indigenous-led partnerships, training, and staffing. Among all participants, it was noted that service providers need to "be subtle" and that intergenerational trauma can lead to clients detaching themselves from "Indigenous identity" and subsequent reluctance of accessing culture-based services.

iv) Basic Needs Provision

According to participants, having a safe place to live and having basic needs met (e.g., food, safety, healthcare, parenting, warmth) are the most important factors for clients fleeing from violence. It was described as "**not a privilege but a basic human right**" that the government fails to uphold. Most participants argued that **fulfilling basic needs is a condition for working on long-term goals** to move out of the cycle of violence. One participant shared that when clients are in "survival mode," they may not feel ready to access violence prevention programs and services or even connect with their mentors, families, and friends. We heard common stories from participants regarding sexual violence against women and girls, or the **difficulty of leaving a toxic relationship as basic needs are unmet**. Clients may fall through the cracks, as noted by most participants, as they rarely encounter clients undergoing violence who are capable of accessing services themselves. This aligns with the statistics from the Neighborhood Resource Centre (NRC) in Baawaating that only 43.5% of clients accessing services were self-referred (Doxtater & Broad, 2021).

Shelter and housing are basic needs that should be accessible without overly rigid eligibility requirements. However, according to participants, eligibility often becomes a barrier. Although the city has promised to offer more low-barrier (i.e., low-barrier for entry) shelter spaces (The Corporation of the City of Sault Ste. Marie, 2023), most participants expressed concerns about its scarcity. **Addiction and mental health issues often become significant barriers** for individuals seeking shelter, as shelters are not mandated to address safety concerns. We also heard that shelters may not be safe spaces for individuals who want to "stay clean" and "start recovery." If individuals are also involved in the legal system, a lack of safe spaces to live can be detrimental.

v) Safe Transportation to Reach Services

Participants shared that accessing social services and housing in Baawaating often requires clients relocating, as services are centred in urban hubs. In rural areas and First Nations communities especially, **it takes lengthy travel time to commute to urban areas due to a lack of services and housing in remote areas**. This issue is frequently highlighted in literature (Reid et al., 2021; Schiff & Turner, 2014). The lack of safe transportation, especially at night (after work hours), is another challenge. Participants stated that these geographical barriers not only

hinder access to emergency services but also impede individuals from seeking preventive services including healthcare, as it complicates meeting their basic survival needs (Nyugen et al., 2020).

vi) Services Addressing Unique Needs of Indigenous Peoples

Participants raised that service providers might not have a deep understanding of the unique needs of Indigenous clients for violence prevention, some of which are tied to 1) connection with land; and 2) healing from colonial trauma. A few participants expressed that **service providers may not think the needs of Indigenous clients are different** from other clients. This also leads to Indigenous providers and staff facing challenges in creating programs that are "by-Indigenous and for-Indigenous." One shared, "more often than not, what we find is that after [programs] have been rolled out, is when [agencies] might get a chance for input. [Agencies] are always having to critique the work after it comes out" (Participant 19).

Land Connectedness

Regarding services for homelessness prevention, a participant shared that the term *homelessness* does not apply to Indigenous Peoples, as they are on their homeland, and the root causes are systemic (Participant 19). These include **land dispossession**, the Indian Act, the Sixties Scoop, residential schools, police violence, overrepresentation in the justice system, chronic underfunding of culturally safe programs, insufficient disaggregated data for service programming, and limited wrap-around resources for MMIWG2S+:

> "We've got so many of our people who are homeless on their home lands, and it's not that they're homeless. **This is our home**. They don't have a place to live for reasons that have been imposed on them. So we need to go back and have access to that. We need to change the systemic processes" (Participant 19).

Eligibility Imposed by Indian Act

Participants also expressed that there are very limited programs in Baawaating that actually address and challenge the systemic barriers faced by Indigenous Peoples. **Eligibility for Indigenous services are often determined by the Indian Act based on clients' statuses**. Many service providers identified the needs of clients but cannot offer services due to the eligibility barrier. For example, government-funded programs such as the Non-Insured Health Benefits (NIHB) program, purport to cover funding for Indigenous persons seeking traditional healing (Indigenous Services Canada, 2024). However, eligibility is limited only to status Indigenous members, and **members living off-reserve often see their funding application rejected**; additionally, the funding does not include any coverage for traditional medicines (MacIntosh, 2019). Moreover, the bureaucratic processes, such as the pre-requisite of medical transportation approval and the need to demonstrate a "medical condition" for referral, further exacerbate the barriers to accessing traditional healing (MacIntosh, 2019). This poorly regulated colonial public

health framework reflects the ongoing assimilation of the Indigenous community into an archaic biomedical model of healing.

It was commonly noted by participants that **there needs to be more programs or services created with general (or lenient) eligibility to increase accessibility**. Participant 2 mentioned, “if somebody comes to the door and they've never been to [...], they might not be eligible for [certain] program because [it] targets such a specific population of people, but those people also need a lot of help too but they're just not eligible.” Another (Participant 10) shared, “we're already doing this program for the people who are in there. Why don't we invite people who don't fall under the category and include them? ‘oh, we really can't do that’… and I keep hearing this every day.”

Identified as a systemic barrier, we heard that staff have to **find creative ways to bypass funding agreements and legal constraints in helping clients**. One example of informal support shared by participants includes providing personal contact information in case of emergency; Participant 23 stated they just need that “[few] minute window to talk [them] through that.” There were also frequent mentions of helping clients with personal resources (rather than government-funded resources) and the need to have “role models” in the community.

Healing

Participants also stressed the **unique need for service providers to support Indigenous clients in healing from colonial trauma**. Consistent with Call for Justice 3.7, all levels of governments need to support MMIWG2S+ through continual and accessible healing programs. Although “there is a lot of commitment in Indigenous communities for healing,” underfunding of healing lodges and decreasing number of traditional healers make culture-based healing less accessible.

Participants shared that athough organizations don’t assume all Indigenous clients experience trauma, there must be healing resources available in all organizations with all staff properly trained in trauma-informed and culturally safe practices. Participants also shared that **healing resources are sometimes underutilized**, but they need to be available 24/7 regardless.

Participants saw that during their frontline work, colonial trauma leads to a “cycle of violence” that is “taught and learnt” and “takes generations to heal.” One participant shared that **recovering from trauma is the first step for an Indigenous person to put their hearts into supporting each other.** Another shared that Indigenous Peoples are “good at picking up nuances” given the trauma built up for generations, including residential schools, the Sixties Scoop, and other systemic violence. Participants in educational institutions reported that such generational impacts are a factor in underutilization of student support resources, low retention rates, and absenteeism. In healthcare, some participants believe that trauma experienced by Indigenous Peoples “have a deeper core and root causes” of violence, in which alcohol and

substance use is an "immediate form of self-care" rather than "problems of coping." Participants working in child and family services shared that "involvement in child welfare is still ongoing" in Indigenous communities and is "unlikely to go away." These crucial elements of colonial trauma must be properly addressed in service planning and delivery.

Restorative Justice and Gladue

Colonialism disrupts the Indigenous communities' rights to govern their justice processes (Department of Justice Canada, 2023a). In Canada, **there are limited services Indigenous offenders can access in the court processes**, leading to over-incarceration. One issue often brought up, as identified by literature and consistently by our participants, is the **difficulty Indigenous clients have accessing Gladue writers and courts**. This gap also relates to the high workloads for Indigenous courtworkers and Gladue writers. Participants in sharing circles voiced that lawyers need to be educated on what Gladue really is. Participant 12 added the "need to educate not just the bar but the bench, because at some point in time having been in court, Gladue was often a factor that was bought up. But [then] the writers became limited here." Participants mentioned that there are stringent standards to become a Gladue writer. **In Northern Ontario, there is also no Gladue court.** This limits the application, service programming, and coordination of restorative justice processes.

> "The concept [of restorative justice] is fantastic. The problem is once they go to that court and get there, you know, whether it's restorative justice or it's rehab or it's a mental health worker with a program and medication, we have to have those at the back end. You have to have those things in place… Well, there's no rehab center available, so you have to wait six months before you can get into one. Well, the system has to work, so once that solution has been mandated, you have to go do that" (Participant 6).

2. Policies: Diversity Hiring and Indigenous Representation

In this section, we demonstrate our findings indicating the **lack of human resource policy updates in each agency on diversity hiring that aligns with various Calls for Justice**. Responding to this gap, Indigenous participants voiced that they experience extreme caseloads and burnout because there are too few Indigenous colleagues, as **many agencies in Baawaating do not hire Indigenous frontline or executive-level staff**, which is a problem across Canada (Dunn et al., 2023). To address this issue, some participants addressed that initiatives akin to Indigenization and equity, diversity and inclusion (I-EDI) principles were not clearly outlined and updated within organizational policies, in partnership with Indigenous communities.

> "We're finding as a lot of non-Indigenous organizations, including municipalities, are saying that they're serving Indigenous People, but they're not hiring Indigenous People.

> They're not doing anything to make it Indigenous-led service delivery. They're not having the successes, so why not give the Indigenous organizations the funding and continue to work in partnership" (Participant 19).

A crucial factor for such Indigenous underrepresentation is in the hiring requirements across both Indigenous-led and non-Indigenous agencies, which **prioritize formal credentials over lived experiences** (National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019). This puts Indigenous community members, healers, Elders, and knowledge keepers at a disadvantage, who have difficulties accessing education. Having low numbers of Indigenous professionals in the school system also impacts the ability to provide safe and adequate academic student supports, particularly for Two-Spirit and gender-diverse students.

Participants remarked that Indigenous students often relocate to Baawaating or Thunder Bay to pursue post-secondary education, which are both major hubs of violence and trafficking. Resolving jurisdictional debates over funding responsibility is required to develop or strengthen Indigenous-led educational partnerships and retain students in their home communities. This will support the communities' active participation in creating Indigenous-led programs or courses. However, in Baawaating, only one Indigenous institute operates, with only two programs currently available. This is not enough to foster Indigenous service professionals.

3. Funding

The MMIWG2S+ Call for Justice 3.6 calls for **equity in funding** for service providers in supporting Indigenous women, girls, and Two-Spirit Peoples. However, almost all participants shared that funding is not equitably distributed, with Indigenous organizations being the least funded and staffed. This result is consistent with Salvino et al.'s (2022) characterization of social service systems being "patchwork jumble of underfunded programs and services" (p. 168).

This funding inequity issue was explained by participants in the following examples: 1) there is not enough to address Indigenization and equity, diversity and inclusion (I-EDI) principles; 2) there is no specific training budget for Indigenous content; 3) there is no specific funding for addressing IPV and MMIWG2S+ cases and prevention; 4) there are no specific services funded for gender-diverse and Two-Spirit Peoples; 5) there is limited Indigenous engagement funding and Indigenous-specific programming in non-Indigenous organizations; and 6) Indigenous service funding is not coordinated properly and transparently.

The lack of community investment in creating more programs/services to bridge the existing gap in violence prevention is inherently tied to the amount of funding and the funding formulae. According to participants, organizations are tethered to their own programming and

service mandates, with limited capacity to expand their service scopes. For example, Participant 10 shared, “people are trying to stop overlapping services. **Stop worrying about the overlapping services**. We have so many gaps. Try to bring it all together and fill all the gaps.”

We heard that **organizations are concerned with competing for funding with other local organizations** developing similar programs/services. Participant 12 stated, “oftentimes we don't want to be in competition with local providers that would already be offering those support services.”

Sustaining Indigenous-led partnerships also require funding equity. Participants mentioned that **Indigenous-led organizations are often reluctant to form partnerships because their funding could be reduced**. One participant shared:

> “You have different agencies that operate in silos, and if they collaborate with another agency, now it's going to impact their funding, which is the exact opposite of the way it should work. So yeah, that's part of the problem too. If you have two organizations working together, they should get more funding because they're probably going to be collaboratively better than stand-alone“ (Participant 15).

This statement highlights the importance for all levels of government to reevaluate the funding formulae to facilitate Indigenous-led partnerships, bridge gaps in services, and enable service planning.

i) Debates around Indigenous-Specific Funding

We heard that non-Indigenous organizations tend to receive funding that is not specifically allocated based on distinct needs or indicators, “anyone can access the same resources and funding through our program, everyone gets the same thing” (Participant 5). Thus, organizations are more likely to offer neutral/universal services by “meeting clients where they are.”

Participants had varying opinions regarding access to Indigenous-specific funding across organizations to create culture-based services for Indigenous clients. Some noted that **non-Indigenous organizations lack the capacity for cultural-specific programming** and/or are unwilling to access Indigenous funding. Instead, they may rely on networks with Indigenous organizations for programming and referrals. However, it was also acknowledged among some non-Indigenous participants that, given their large Indigenous client bases, accessing Indigenous funding may help them develop more culturally appropriate services.

On the other hand, there were many participants advocating for Indigenous-led agencies to receive more permanent and equitable funding, with **non-Indigenous organizations playing an ally role in strengthening Indigenous organizations’ programming**. Participants also

recognized that Indigenous organizations are more well-versed in grappling with the root causes of violence to create services that are safe and trauma-informed.

ii) Funding for Staffing and Hiring

Funding for staffing and hiring was mentioned by almost all participants as a barrier to wrap-around services. Indigenous service providers are more disproportionately affected by funding inequity. For instance, participants mentioned that **Indigenous agencies have to serve the most vulnerable clients with multiple complexities**. It is also common for service providers to have one Indigenous staff "servicing more than 250 clients."

Regarding first responders in First Nation communities, **chronic understaffing is also a prevalent issue**. Indigenous first responders find it difficult to seek partnerships, and fulfill even the most basic policing functions, despite working with higher risk and fatigue (Ruddell, n.d.). Noted by Participant 6: "we do not have enough partners. We are hugely underfunded. We are seen as a program not covered under any piece of legislation. We're good at what we do because our clients know us, that's why we offer a better service. They know who we are."

Participants collectively agreed that there is limited funding put into both Indigenous and non-Indigenous social services for **hiring permanent positions with benefits**. One shared that "staff retention is probably one of the most difficult things to accomplish with contract funding… as opposed to hiring by contracts, we need permanent positions [in social work]... when I started with the organization, it took two years of contract work [with] no benefits on set" (Participant 31).

High caseloads, staffing challenges, and a lack of permanent positions lead to **high staff turnover, which is a severe concern for service agencies** (Aarons & Sawitzky, 2006). In a study by Walker et al. (2017), they found that turnover among program coordinators is disruptive to individuals and families enrolled in services, and significantly increases the workload for remaining coordinators and supervisors, and creates funding challenges for re-hiring, training, and quality assurance for wrap-around services. Participants in our study also shared the aforementioned concerns.

iii) Funding for Indigenous-Led Housing

Indigenous participants indicated ongoing struggles with the federal and provincial governments to negotiate access to **government-controlled surplus land with adequate infrastructure** (sewage, water, etc.). For example, Participant 19 stated, "Indigenous organizations need to be prioritized when it comes to distributing land for affordable housing and social community housing. [They] need more access to serviceable land that is close to services."

Participants from Indigenous organizations also spoke about the **difficulties in accessing funding designed for supporting women** when it does not specifically mention "Indigenous

women." As a result, Indigenous organizations are more likely to be at a disadvantage in acquiring such funds. Participant 19 stated, "an Indigenous organization [...] couldn't even apply [for certain funding] because of the parameters."

Participants also expressed the need for the government to provide **guaranteed, ongoing funding to the National Indigenous Collaborative Housing Inc. (NICHI)** to support Indigenous-led housing initiatives, rather than fixed-term and unsustainable, as we discuss below.

iv) Funding Models

Reporting Formats

Participants shared collective frustration with **reporting formats/templates that are created based on linear definitions of *program success*** emphasizing goals that are specific, measurable, achievable, realistic and timely (S.M.A.R.T.). Success in this context does not address specific clients needs. Prevention programmes are left out of the formula since there is not time limit for their completion. This results in cancelling or discontinuing long-term program investment. For example, one argued:

> "When it comes to government reporting, they want to see numbers. They want to see how many people did this and that in order for them to judge it as being a successful program. You might have made significant progress with somebody, but those aren't on the reporting format that the government has asked for, so they don't want to continue to fund it. So [agencies] always deal with those kinds of issues" (Participant 19).

Participants voiced that all levels of government need to allow Indigenous and non-Indigenous organizations to **create their own reporting templates**; one stated, "I really appreciated that our community had the autonomy to create our own template that fit and work for us… we should be able to say how we will report on what we've captured" (Participant 31).

Permanent Funding

A prominent theme mentioned by almost all participants is that the **organizations struggle to create long-term plans** for clients (e.g., those who undergo chronic violence and mental health challenges). Participant 5 stated that the "greatest needs and challenges for us are chronic cases. It's really tough when people have exhausted their funding with us and there's not a lot that we can do to get them out of the situation that they're in… we have to get funding approval and whatnot."

There is also an issue with all levels of government **willing to provide permanent funding for, or to continue support a crucial program**, which is also related to issues with reporting formats. For example, one Indigenous participant shared,

> "Our core federal funding is a lot lower than provincial funding and we're expected to do way more work. A lot of its proposal-based, and so communities may not have the capacity in some of the positions that are responsible for writing a proposal… if they don't have somebody with the capacity to eloquently describe that need and apply for it, they're not going to get it. It's not a fair process" (Participant 1).

Funding Approval

A common theme voiced by many participants was a **lack of government efficiency in processing funding applications**. A prime example of funding approval issues mentioned by various Indigenous participants is the reimbursement process for Jordan's Principle. Participants shared that this program "needs to change the way they serve," and further pointed out that some service providers are reluctant to work with Indigenous clients under Jordan's Principle. This is due to agencies paying for client services up front which results in severe debts for the providers. Participant 16 shared, "Jordan's Principle is a great initiative that helps families… [but the] vendor, who sends out services, are not willing to direct bill to Jordan's Principle because it takes too long to pay them." They further added, "money that is fronted to our community member was taking over a year to be reimbursed. That's a slow process over and above us." Therefore, legislation such as Jordan's Principle which was meant to address funding gaps and jurisdictional disputes results in waiting a few months—up to years—only to have applications rejected. Clients may feel that "they've been abandoned."

Funding Coordination

A few participants mentioned the **insufficient alignment between different levels of funding (e.g., federal and provincial)** in terms of jurisdictional issues (on- and off-reserve). For example, participants shared scenarios where staff are unable to provide provincially-funded services to Indigenous community members who live in the city but need to access services on-reserve—a barrier imposed by the Indian Act. Participant 16 stated, "jurisdiction around funding […] puts barriers in place… there's a hard line of [being] off reserve or on reserve, and that doesn't make a difference on the ground. You still need assistance, doesn't matter where you live."

Participants also highlighted the **insufficient alignment between different funding sources to properly coordinate essential and accessible services**. One participant shared examples of wrap-around services not being available when a housing project is completed, due to the government not funding the wrap-around programming, or funding periods for wrap-around services not being aligned with housing projects. Participant 19 shared that, "sometimes you can apply for both [funding], but the timelines and the deadlines don't coordinate, so it just doesn't work out to get the services to the people when they need them."

Utilization of Funds

Participants mentioned that funding needs to be spent properly to be translated into accessible support. One participant provided this insight:

> "There's a lot of funding that goes into supports in Indigenous communities, but do we ever measure what their impact is? What's happening with these funds and why is it not working better to keep people out of these cycles of violence, drug addiction, homelessness, and long-term mental health?" (Participant 18)

A few participants also described **issues of irresponsible spending**. For example, organizations often face challenges in managing funding and meeting deadlines. Participant 16 described the unrealistic expectations set by the funding bodies, stating the "scenarios where [agency] received [...] dollars to do programming, and [they] have [...] months to spend it. That's not enough time if [they are] supposed to hire somebody to create a job posting, do interviews and all."

Furthermore, some participants argued that they wished to have options to carry over the unspent funding to the next fiscal year (e.g., during the COVID-19 lockdowns), rather than **immediately spending it without proper service planning**: "now COVID was behind us. Now you're into a regular year again and you have to get used to where you don't have that much funding." Such a change in the funding management timeline leads to challenges in programming, as services need to be revamped in post-COVID era: "[agency] has regular base funding and then the leftover funding from the year before [in COVID-19], so [they] have all this crazy money that [they] have to spend… it's not enough time" (Participant 16).

Finally, some participants expressed **frustration over funding reductions**, a factor of irresponsible spending aimed at minimizing further cuts (if funds are unspent). Participant 16 shared the negative consequence of funding reduction for health programs: "the federal government chip away at different rights for funding that you have access to, [including] drug coverage… some [drug] ingredients change that causes an allergic reaction," further adding, "for mental health and wellness, it's not something that you can just not take, there could be potential side effects if you just stop taking [since] it wasn't covered."

4. Communication

According to participants, the lack of MMIWG2S+ and violence prevention is inevitably linked to limited communication across agencies about the needs of clients. This communication gap is also evident in limited collaboration among staff within agencies and inadequate communication between clients and staff.

i) Inter-Agency Communication

Inter-agency communication is a crucial factor in developing partnerships for wrap-around services (Bruns et al., 2015). Consistent with a Department of Justice Canada report (2021), we also found that insufficient communication among agencies about clients' needs stems from **a lack of regulated processes to protect client confidentiality**. Participants shared that many clients may not want to disclose all personal information when agencies coordinate services. Confidentiality is important as clients who deem their confidentiality protected are more likely to continue services (Klassman et al., 2024).

Participant 12 shared, "we wrap-around in certain program areas [...] but some of the stuff is tied to confidentiality, you can't always have those open conversations [with providers]." However, we also heard that the confidentiality concern is manageable: "We have a duty to confidentiality, but I think like legally navigating that wouldn't be that difficult" (Participant 25).

Another barrier to inter-agency communication, as noted by participants and Bruns et al. (2015), is that **agencies may have different legal duties that hinder information sharing about clients**. Plecas et al. (2011) argue that the main cause of limited information sharing is the lack of clarity in the sharing protocol (e.g., what can be shared with whom) and apprehension about negative legal consequences. Stated by one participant:

> "We all have our own mandates, but we all operate in a different area of the law too. So like [... service], they operate on [...] Act, that's the law that governs that. I operate under the [...]. I think if you see a move towards mandating [information sharing], you'll see a lot of resistance from a lot of people" (Participant 20).

ii) Managing and Streamlining Referrals

Another theme mentioned by participants across the services is that **referrals made between agencies get delayed and backlogged**. This puts more pressure on staff to manage individuals' referrals.

The referral procedures need to be more streamlined and less tedious, as the participants mentioned. For example, we heard that clients may have to obtain reports from their healthcare providers to be sent to another agencies for follow-ups; but participants argued that agencies should have mechanisms to communicate directly.

iii) Intra-Agency Communication

Intra-agency communication means how staff within their agencies communicate with each other on clients' needs. However, consistent with Cooke's (2020) report, participants shared that there is a lack of communication between staff regarding options to support clients. We

identified high individual caseloads and confidentiality concerns as two main barriers. For example, regarding confidentiality, one participant shared:

> "If I say something that's out of line, I have potentially something to lose… if it gets out… might put me at risk for how people view me as professional, or those different relational pieces, that's when confidentiality matters to people." (Participant 25).

iv) Communication Between Staff and Clients

We also identified barriers to communication between staff and clients. Some emergent themes we heard were **a lack of contact information, the high caseload and turnover leading to lack of follow-ups, and the issue with consent.**

Participants shared that oftentimes clients will not respond to emails or calls due to limited access to communication tools, and changes in contact information. **Homeless individuals, for example, often become unreachable as they went missing for various reasons**. For example, Participant 19 stated, "often, they either don't stay on the *by-name list* [(a continuously updated list of homeless individuals)] that mainstream municipality use, or they can't even get on it, or if they get on that list they don't stay on it." Another participant expressed frustration with the lack of timely updates to the by-name list, resulting in unreachable clients not being properly looked after for their safety.

> "[By-name list] is about a month updated [...] clients have signed consent to be on this list. But how do you know if they're missing or not? **And I've not received an update in 90 days**, that's concerning that pulls on my heart, it's just a little community like, 'oh my goodness, what do you mean no one's seen them?' We have processes built into that, but because we don't have adequate resources, maybe I could have found out the first month instead of waiting three months for no update" (Participant 31).

Staff may often need emergency contact information or a relationship person to connect with clients. However, we heard that the high caseloads and constant turnover among frontline staff and managerial roles have led to a lack of supervision and follow-up processes.

A few participants also noted that issues with consent and paperwork contribute to barriers in communication to support clients. For example, one stated,

> "At the end of the day, we're trying to do the best thing for the client, and that's the most important thing, where paperwork and red tape can get in the way of that. Do you always want to ensure that they're signing it? Of course, you do. COVID introduces us to the world of verbal consent, and it worked for two and a half years being able to have verbal consent, and now we really need to make sure that […] consent is there to be able to

speak to people. I think that sometimes that's one of the biggest barriers, more so than anything" (Participant 12).

Opportunities for Organizations

1. Wrap-around Services

To address the challenge of limited services for Indigenous women, girls, and gender-diverse individuals across Baawaating, participants highlighted wrap-around services as a best practice. According to Walker et al. (2008), the purpose of wrap-around services is to shift away from a traditional "**silo**" view of experts being the primary playmakers for service planning. This approach "wraps" services "around" the clients which are tailored to their specific needs (Nathoo et al., 2013). Wrap-around services are created with a collective vision of **reducing/bridging service gaps** to potentially eliminate silos across agencies and boards (Wasnack et al., 2010). Compared to a traditional service model, wrap-around services are strength-based (as opposed to deficit-oriented), requiring cultural humility, shared responsibility, and unconditional commitment among service actors (Bruns et al., 2010; Cailleaux & Dechief, 2007; Shangreaux, 2004).

i) Literature

A wrap-around service is generally described as a social service and public health approach, that is personalized, holistic, and community-based (Bruns et al., 2010; Bruns et al., 2015). However, consistent with findings in the United States (Development Services Group 2014), participants noted that numerous agencies **have their own definitions of wrap-around services that are not standardized** across regions. The definitions, however, are only aspirational as the majority of respondents shared that a strategy for developing and operationalizing wrap-around services is not available in Baawaating due to a lack of a common definition.

The wrap-around model creates a "**system of care**" requiring mobilization and coordination of different service actors and systems to serve the communities (Bruns et al., 2010; Shangreaux, 2004; Walker et al., 2008). Nathoo et al. (2013) define wrap-around services as a "**one-stop shop**" process, where "multiple services are offered at one location… starting with developing trusting relationships" with clients and maintaining partnerships (Rutman et al., 2021, p. 21).

Wrap-around services, as applied in an Indigenous context, are inherently culture-based wherein a person's well-being is defined by **connecting the circles of care** and striking a balance within the circles (Palmer et al., 2011). The circle, such as the Medicine Wheel, signifies

completeness and relatedness. For instance, the Anishinaabemowin term *Kina Gbezhgomi* translates to "all of us, we are one", implying the importance of **all community members coming together** to look after each other (Kina Gbezhgomi Child And Family Services, 2023). Some examples of wrap-around practices involve Elder guidance, outdoor activities, and cultural traditions like sweats, smudging, and pipe ceremonies (Nathoo et al., 2013; Palmer et al., 2011; Rutman et al., 2021). The ancestral teachings of wrap-around care, as celebrated by Turtle Island Peoples, also define the wrap-around as **lifelong support** (e.g., from childhood to elderhood) and **nurturing for future generations** (Simard & Blight, 2020). This means that wrap-around services and programs should be available across all age groups.

Moreover, Nathoo et al. (2013) argue that the definition of wrap-around services needs to be responsive to the **legacy of colonial trauma** and root causes such as cultural disruption, gender-based violence, and legal/political violence. This means that wrap-around is not merely a band-aid approach to healing, and necessitates trauma-informed and culture-based violence prevention to align services with the TRC's Calls to Action and MMIWG2S+ Calls for Justice (Rutman et al., 2021), as well as systemic reform such as establishing Indigenous-led governance, policies, leadership, and sustainable funding models.

ii) Participants' Definitions

From our findings and a scan of service providers in Baawaating, we share more specific and relevant wrap-around definitions. Participants' personal definitions of wrap-around services in their professional contexts contained the following characteristics (see Table 2).

Table 2

Characteristics of Wrap-around Services

Thematic Areas for Wrap Around Services	Description (Participants' Personal Definitions of Wrap-around Services)
Holistic	• Addressing well-being from physical, mental, spiritual, and emotional aspects. • Considering different social determinants of health and intersectionalities (e.g., Medicine Wheel).
Partnerships	• Liaising with service providers and creating individualized plans for and with individuals. • Having the potential to create a robust pathway and referral system for meeting the various needs of individuals. • Sharing resources and develop a variety of skills amongst social service providers.
Strength-Based	• Supporting and identifying individual needs through case management. • Guiding individuals through creating their own goals after discharge. • Encouraging individuals to pursue available resources to meet their goals. • Being resourceful and offering choices.
Accessible	• Aligning work hours with the needs of the individual (e.g., sleeping schedule). • The need for a 24/7 social service model rather than conventional 8:00-4:00 work hours. • Providing long-term and lifelong support.

	• Making an effort to follow up with individuals.
Preventative	• Screening for evidence of violence and being trauma-informed and culturally sensitive. • Finding out information regarding the root causes of violence and offering support.
Comprehensive	• Coming together as a community to meet the needs of the individual. • Having a wide array of services and programs available as a measure of a healthy community.

iii) Needs

Wrap-around service definitions based on the aforementioned characteristics are generally in alignment with the literature. However, they lack necessary elements and unique factors that address the Calls for Justice to serve Indigenous communities in Baawaating.

One exemplary initiative akin to the "one-stop shop" definition of wrap-around services is the Community Resource Centre (CRC), which opened in Baawaating in 2023. The CRC replaced the gaps left by the Neighbourhood Resource Centre (NRC) which operated from 2014 to 2020 on Gore Street (Patterson, 2020). Then NRC offered services such as short-term housing, counselling, and programs such as addiction withdrawal and harm reduction, jointly provided by several stationed core partner agencies and backbone agencies (Doxtater & Broad, 2021).

Despite limited applications of wrap-around definitions in local services, the definitions shed light on various systemic challenges, as discussed previously, in relation to service gaps, colonial policies, and inequitable funding. Therefore, we can still envision opportunities for organizational policies, partnership, cultural safety training, and education to facilitate Indigenous-led wrap-around programming.

2. Policies: Centering on MMIWG2S+ and CFJ

Participants mentioned that there are needs in organizational policies that align with addressing the root causes of MMIWG2S+. These policies include violence screening/intake/identification, mandates centered on the MMIWG2S+ CFJ, and violence prevention policies for Two-Spirit Peoples.

i) Violence Screening

Participants mentioned the **need to establish best practices for screening** when staff initiate contact with clients. This helps staff understand clients' intersectional needs and provides the necessary resources to encourage clients to seek help. However, some participants shared that for many agencies providing short-term services, there appears to be a lack of policies to incorporate screening due to re-traumatization concerns. Menschner and Maul (2016) addressed similar concerns in their brief, arguing that screening practices should be done to benefit clients

rather than to gather information, and should be carried out appropriately by trained trauma-informed practitioners and guided by available treatment and referral resources in place.

ii) CFJ Mandates

Based on the qualitative research findings (interviews, sharing circles), it is commonly recognized that the CFJ are not embedded in organizational policies. There are mentions of "directives" in regards to the CFJ, and organizations make sure frontline staff are aware of them. However, most participants stated that they learned of the CFJ themselves because their work involves culture-based violence prevention. Also, most participants were aware of the CFJ and believe that they are relevant to their work, but there needs to be more effort to incorporate them into policies.

Quantitatively, the survey found that 21 out of 31 respondents reported that their organizations have mandates related to the CFJ. However, **this only accounts for eight out of 16 organizations where respondents work**. Respondents who reported having CFJ mandates in their organizations also answered the question "What has your organization done to incorporate the MMIWG2S+ CFJ into its mandate?" 12 participants reported that their organizations "reached out to advocacy and policy bodies like NWAC and ONWA;" 8 participants reported their organizations "hired consultants to do this work;" Six (6) reported that their organizations "hired new Indigenous staff with knowledge of macro social work practice." Three (3) participants shared additional comments: "we complete this work even prior to recommendations;" "we have conducted additional training;" "we have classroom curriculum, course content, and general awareness campaigns through social media."

In the survey, respondents also reported a few perceived barriers to their organizations creating action plans and implementation to address the CFJ. These barriers are indicated in Table 3. We found that training, skills, and capacity, funding issues, human resources, and focusing on emergency services are the biggest barriers.

Table 3

Barriers to Implement Calls for Justice

Question: What barriers exist to the creation of an Action Plan and its implementation that address the MMIWG2S+ CFJ? (select/list as many as you'd like)	Number of Participants Reported
Funding	17
Human resources	17
Training, skills and capacity	21
Focus on emergency services leaves no time for planning	13

No knowledge/awareness of MMIWG2S+ CFJ	9	
Additional Comments		● "Our place of employment volunteers years to support MMIWG2S+, its just not in our policy" ● "Need for system and community prioritization of this issue across providers"

Note. Total *N*=30.

Despite the challenges of centering the CFJ among agencies' policies, participants shared that community advocacy has led to progress in MMIWG2S+ recognition among staff. These include: 1) the announcement of the Red Dress Alert system; 2) the city's declaration of February 14 as MMIWG2S+ Memorial Day; 3) advocacy for the Ontario's *Missing Persons Act* (2018) to include Indigenous-led and community-based safety planning; and 4) an auditor position in first responder services to track, manage, and follow up on MMIWG2S+ cases. We believe that developing mandates based on the MMIWG2S+ CFJ are opportunities for agencies to improve violence prevention.

3. Increasing Staff Support

It was noted among almost all participants that organizations need to have adequate resources and funding to address the well-being of staff due to the traumatic nature of frontline work. Staff need to be supported and supervised in applying their knowledge and skills to their work. Overall, participants shared the following major opportunities for staff support: 1) decreasing workload; 2) culturally safe approaches to de-escalate lateral violence/conflicts; 3) knowledge of community resources; and 4) more streamlined referral processes.

i) Decreasing Workload

The high caseload among social services has been documented in various reports (Public Health Agency of Canada, 2020; Centre for Addiction and Mental Health, 2021) as a barrier to wrap-around services (Walker et al., 2017). Participants shared that **lack of staff support for managing workloads leads to many colleagues resisting transitioning into 24/7 services**. Indigenous participants reported facing additional workload to support non-Indigenous staff in offering culturally safe services. For example, participants shared:

> "How do you challenge and build capacity with staff and that is being as welcoming and inviting and warm to those staff members… they don't necessarily have to adopt traditional ways of knowing and doing, but it's our responsibility as Indigenous [staff] to share those teachings." (Participant 25).

> "At first, I felt great [and] important. I felt like I was like doing a service… But oftentimes, I think it's like, 'well, you're the Indigenous [staff]... you take on the Indigenous files.' I get it because there's definitely a perspective that I understand that some of my co-workers don't… because of colonialism… I wish that if we have 90 percent Indigenous [client population], why don't we have 90 percent Indigenous workers?" (Participant 34).

The need for personal wellness among staff is crucial, especially among many Indigenous agencies (Ryan-Schmidt, 2020). Participants stated that "if they cannot **heal the intergenerational trauma**, they cannot perform… and that is unresolved trauma" (Participant 28). A few Indigenous participants who work with the justice system also expressed the traumatizing work experience as "helplessly hopeless." Moreover, participants who are first responders also voiced the high proportion of colleagues taking stress-related leave. The agency must recognize the need for healing. For instance, participants voiced the success of professional development opportunities such as ceremonies and sweat lodges for staff support.

Among all participants, including first responders, they identified a major result of work stress being **desensitization**, stating, "we deal with the same individuals all the time, and if you could just take the repetitiveness out of it and allow some of other programs to kick in potentially once they're into the system" (Participant 17). Desensitization leads to decreased efforts to support chronic violence survivors/victims, and may cause staff to form negative stereotypes.

Many participants gave examples of dismissive assumptions and stereotypes about Indigenous women, girls, and Two-Spirit individuals (e.g., "they are out there partying," "they will be back together anyways"). This is consistent with **previous evidence of officers not conducting proper criminal investigations on missing persons** (Schmunk, 2023). One stated,

> "That cycle [of MMIWG2S+] has been happening for a long time… they don't go away because they were ignored, right? They were never fully put to that or addressed or completely investigated, or the victim's families didn't feel like they were kept in the loop… there wasn't swift action taken to investigate those assumptions. [...] Maybe it is an Indigenous kid who went partying, but we need to follow that and not just walk away from it. There [may be] foul play here, and that needs to be investigated" (Participant 17).

Other first responders shared that the Ontario's Missing Persons Act (2018) mandated and supported them to use all necessary ways to locate and investigate rather than just dismissing the cases. In alignment with participants' perspective, Ferguson (2022) argues that the Missing Persons Act "helps with bias and helps hold people accountable to standardized processes," reducing obstacles for first responders in addressing missing cases through collaborations, partnerships, and increasing access to personnel records (p. 76). Nevertheless, more efforts are

required for this legislation to be applied effectively in addressing MMIWG2S+, such as increasing awareness, specialized training, data management, and navigating the challenges of information sharing (Ferguson, 2022). Currently, there is no waiting period to report a person missing in Canada and a poster is circulated amongst various media outlets. At the time of data collection, one first responder stated that there were about five outstanding missing cases in Sault Ste. Marie to date.

Participants also shared that workload leads to some colleagues becoming apathetic to clients' traumas, leading to them "blaming-the-victim" rather than addressing the root causes of violence. This aligns with findings from a study conducted in the Northern Canadian context, where service providers highlighted broad societal attitudes of dismissing, shaming, and blaming victims as a major challenge for supporting survivors of IPV, sexual assault, and child abuse; offenders are often protected and survivors are not believed (Department of Justice Canada, 2021). Some participants argued that agencies should continue to incorporate sessions on work stress as a part of their professional development workshops to support staff.

ii) De-escalating Lateral Violence

Participants mentioned the need to support staff in de-escalating conflicts before they turn into violent encounters. They raised concerns about lateral violence among community members and among colleagues, where they cited disconnection with culture as a core reason. Participants shared experiences of de-escalating conflicts with clients using trauma-informed approaches, and stated that **developing resilience to clients' triggered responses is necessary** to develop long-term rapport with clients.

Participants also noted the need to support staff to **identify and address the root causes of lateral violence in early-year programs.** Fostering basic life skills were voiced collectively by several participants who noted their disruption through intergenerational trauma, cycles of violence, and ongoing colonial impacts. Participants also underscored that these basic needs could be incorporated in early-year programs rather than attributing root causes of "acting-out behaviour" to individual and personal anger/aggression management issues, consistent with Simard and Blight (2020).

4. Cultural Safety Training

As identified previously, there are various terms to identify workplace training aimed at improving Indigenous and non-Indigenous relations. As the literature suggests, organizations use a variety of terms depending on their goals. We infer that cultural competency, a commonly used term that is not well understood given its diverse meanings and applications among organizations (Curtis et al., 2019). Developed in the 1980s, cultural competency was a first step to unveil hidden stories of exclusion in the healthcare system. Another term, cultural safety, arose in New

Zealand. Proposed by Maori nurses in the 1990s, it calls attention to the need to analyze power in healthcare, with "a focus for the delivery of quality care through changes in thinking about power relationships and patients' rights" (Papps & Ramsden, 1996, p. 493). CFJ defined cultural safety as going **"beyond the idea of cultural 'appropriateness'** and demands the incorporation of services and processes that **empower Indigenous Peoples**… [which] requires, at a minimum, the inclusion of Indigenous languages, laws and protocols, governance, spirituality, and religion" (National Inquiry into Missing and Murdered Indigenous Women, 2019, p. 173). Furthermore, the MMIWG2S+ Calls for Justice 18.18 call for **mandatory cultural competency training** for all social service providers.

For the purposes of this report, we use the term "cultural safety" to match the findings and the CFJ, given their demand for these types of training begin to "center" Indigenous perspectives in order to prepare staff for culturally safe services (rather than just appropriate).

Importantly, participants generally agreed that **cultural safety training is inspirational for staff**. One stated, "all of their feedback, every single one of them is, I never heard it explained this way, and I had no idea" (Participant 23). First responders noted that their Indigenous training curricula (and other ongoing locally-relevant trainings) are empowering and "really getting that background knowledge." It was also noted among participants that cultural safety training should never be cut back even if the organization is short on budget.

Of the survey respondents (*N*=32) who provided information on their agencies' cultural safety training, five indicated that their agencies do not offer such training, while 19 reported that it is mandatory, and eight mentioned that it is optional. A detailed description of what cultural safety training entails is illustrated in Table 4, based on survey results. The need for restorative justice training came up frequently during the interviews and sharing circles.

While most participants had received some sort of cultural safety training related to trauma-informed care, Indigenous cultural studies, and anti-racism, there were fewer mentions of training related to 2SLGBTQQIA+ inclusion in Indigenous contexts. The findings from the interviews generally align with the survey results, where a few participants mentioned that **cultural safety training is optional because the capacity development funding falls significantly short to make it mandatory**. As a result, we heard from a few participants that the training is not completed among some staff.

Some other mentioned **barriers** include: 1) Training is not incorporated into the job description, preventing staff from attending; 2) Unwillingness to attend due to perceptions about usefulness; 3) Lack of qualified Indigenous-led training either internally or externally.

Table 4

Areas of Cultural Safety Training

Training Areas	Included	Not Included
Trauma-informed Care	23	5
Indigenous Cultural Studies	20	8
Anti-Racism/Oppression	20	8
Education on History of Colonialism	19	9
2SLGBTQQIA+ Inclusion in Indigenous Contexts	19	9
Education on Ongoing Colonialism	13	15

Note. N=28 (Total number of respondents who reported whether these training areas are included or not included).

A common issue participants raised about **cultural safety training is that it is not Indigenous-led**. It is highlighted that non-Indigenous staff **may not know enough about Indigenous topics given that only one training is required to become "culturally competent."** Participants also raised concerns that the cultural safety training their agencies provide is **"not specific to any one culture."** We argue that Indigenous-led cultural safety training needs to be locally-relevant and culture-based, offered by Indigenous Peoples who are reputable members of the community they serve. Furthermore, Participant 22 argued that the training needs to include more experiences/voices from the community, as "we can't draw on one person for all that expertise."

Some first responders noted that their cultural safety training is "over above the minimums" and not "just checking the boxes." They also shared that most first responder service providers across Ontario have some forms of locally-relevant training such as the Gabegendaadowin (formerly SHIFT) Training at Algoma University.

Finally, participants shared that **a comparison among organizational training policies** could be an opportunity to examine training outcomes and understand what each organization is doing well.

The next sections describe areas for cultural safety training as shared by participants.

i) Trauma-Informed Practices and Self-Care

Trauma-informed practices help staff create a safe, welcoming, and respectful space to address complex community relationships. Participants shared that more effort is needed to mandate trauma-informed practices training into service providers such as early childhood educators, first responders, and legal professionals. The training also needs to integrate components or resources/spaces that support staff's own healing.

Regarding the court systems, most participants shared that **legal professionals must utilize and be trained in victim-centered and trauma-informed approaches**. Mentioned by a few participants,

> "I think we can make changes that make it a little easier for the victims to feel as though they're being heard and make it when they come to court… It makes it very difficult for them to feel that they're being treated in a way that's being respectful, and you see that a lot. Then a plea gets taken and they're like, 'I didn't even get the chance to tell my story' [...] I think there needs to be money spent on support and to make the courts the court system a little more victim-centered as opposed to, in the current court system, I believe the accused tend to have a lot of the benefit. Like we make sure their rights are being... where the victims kind of yet forgotten a little bit or kind of a secondary thought" (Participant 17).

> "Our judges who are not knowledgeable in the area of abuse and violence, who are not knowledgeable in the areas of human trafficking and what that looks like, and prolonging cases, and lawyers who are allowed to keep postponing" (Participant 14).

> "When it comes to the courts, I believe that it's a loss and that any sort of victim response doesn't exist there anymore. So, I do feel like there could be more cultural sensitivity" (Participant 8).

ii) Restorative Justice

Restorative justice is a training piece noted by many participants, given its importance in reconciliation, although it is less prioritized in the training agendas of most organizations. Some shared that this training can help first responders in applying discretion to offenders. A few also noted that government needs to support **all organizations to conduct restorative justice training** so that the entire justice and social service system can be on board to prevent individuals from being drawn into the criminal justice system.

iii) 2SLGBTQQIA+ Inclusion in Indigenous Contexts

Findings from interviews and sharing circles revealed the need in training on 2SLGBTQQIA+ inclusion, especially in terms of it being Indigenous-led and rooted in Indigenous contexts. It is also noted that cultural safety training needs to have **specific topics on Two-Spirit identity in Indigenous cultures** besides the general training on gender-diversity and sexuality.

MMIWG2S+ Calls for Justice 18.19 calls for **public education** on the history of gender-diverse people in Indigenous context and to develop understanding of 2SLGBTQQIA+ issues. However, according to interviews and sharing circles, not many participants believed that public education on 2SLGBTQQIA+ is relevant to their roles. Meanwhile, **there is a shortage of**

agencies willing to provide education on gender and sexual diversity to partners, citing concerns such as lack of lived experiences, expertise, mandates, 2SLGBTQQIA+ partnership, enthusiasm, and accountability, as well as fear of pushback. A limited number of participants shared that their organizations offer public education on sexual health that is not tethered to gender issues.

Despite ongoing advocacy by 2SLGBTQQIA+ community in Baawaating, Indigenous participants remarked that events led by the Two-Spirit community often didn't receive the same level of recognition than mainstream Pride Month events. Many community partners do not even know such events exist.

iv) Education on Colonialism

Many participants in the interviews and sharing circles remarked that staff must be educated that colonialism persists today, manifested in systemic discrimination against Indigenous communities. But in reality, participants stated that people hold the belief that colonialism is a relic of the past and people should "just move on."

To understand whether service providers educate their staff on colonialism adequately, a *chi-square goodness-of-fit test* was conducted using survey data. The analysis shows a significant disparity, in which the **education on ongoing/contemporary impacts of colonialism is notably lacking compared to education on the colonial histories**, $\chi^2 = 11.49$, $p < 0.001$. This sheds a light on the need for training centred on contemporary Indigenous perspectives.

Regarding racism as ongoing colonial violence, one participant shared their feelings about the courts, arguing that clients' stories and Indigenous staff are "mocked by the Crown." Indigenous courtworkers were disrespected and **treated as a "placeholder" of cultural inclusion**, as stated by Participant 23: "I get they don't take me seriously, they don't think that my education is enough, [...] that itself is also a form of violence against the very social programs that they say they want to be involved in."

5. Strengthening Partnerships

A strong partnership, including collaborative services, community empowerment, sustainable fiscal models, and access to resources, is pivotal to building a system of effective community wrap-around initiatives (Walker & Sanders, 2011). As mentioned previously, there are various systemic challenges for organizations to partner with each other to provide services, especially in regards to funding and policies. Despite that, there are a few partnership initiatives that participants deemed to be successful.

For **service delivery**, participants shared examples of partnerships that require ongoing support: Medical Transportation, Downtown Ambassador Program, Downtown Safety Patrol,

Hope Alliance, Algoma Council of Domestic Violence, Community Resource Centre (CRC), Mobile Crisis Rapid Response Team.

For **service coordination/planning**, participants mentioned needs to continue support staff participation in leadership and situation tables (e.g., Rapid Response Situation Table, Algoma Leadership Table) to plan strategies to connect clients to services.

There were also examples of **capacity building** partnerships: 1) Contract programs (e.g., staff working in partner organizations); 2) Knowledge/resource sharing (e.g., presentations, shared training, inviting guests into staff meeting, event gatherings, and workshops); 3) Research agreements/support letters.

Participants also shared examples of partnership for **political advocacy**. These include Association of Iroquois and Allied Indians (AIAI), AFN, NWAC, ONWA, and other Indigenous-led initiatives to advocate for funding. There were mentions of Indigenous representation at the leadership level (e.g., Ontario Association of Chiefs of Police) to bring forward issues raised by the community.

Additionally, participants mentioned a few **Memorandums of Understanding** were created between organizations to commit to work together on a shared goal, which served as formal agreements for partnership.

We also heard that organizations strengthen each other's frontline work by sharing resources and bringing in **external funding** to collectively address community missions (e.g., homelessness).

Participants then mentioned a few needs/opportunities to strengthen the existing partnerships. These include areas related to timely planning, increasing staff participation in community meetings, proximity of resources, needs for formal partnerships, frontline experiences, service familiarity, enhancing accountability, and policy refinement among organizations.

i) Planning and Coordination

A few participants shared what their organizations are doing well in terms of partnerships/collaboration. For service coordination/planning, participants mentioned the need to continue support staff participation in leadership and situation tables (e.g., Rapid Response Situation Table, Algoma Leadership Table) to plan strategies to connect clients to services. Some participants raised concerns about delays in service planning and program coordination to address rapid nature of violence. They noted that **organizations need to encourage staff participation and centre Indigenous staff's perspectives at the situation table**. There also

needs to be more organizations working together to support Indigenous-led community events rather than relying on a few Indigenous agencies to do all the work. One participant noted the need to create more **government-funded teams** (comprised of all organizations) to encourage participation in community planning. Another participant highlighted the need for organizations to meet more often to follow up on partnership.

ii) Proximity of Resources

Participants noted that collaboration and coordination are easier if organizations are located close to each other. It was widely mentioned that all organizations need to participate in initiatives akin to the CRC, rather than housing only a few core agencies. However, participants remarked that the **services in the CRC need to be culture-based, available 24/7, and need Indigenous-led partnerships.** One participant noted that a community liaison and safety planning is necessary for such an initiative.

iii) Formalizing Partnerships

Community partners may not fully commit to collaboration agreement if the partnership is not mandated. Thus, some participants expressed that **partnerships could be more effectively carried out if they are formalized** across agencies and Indigenous-led. At the same time, some participants noted that formal partnership takes time to establish as some agencies "focus too much on their mandates." Also, some participants noted concerns that their organizations tend to believe that "they are not the best" to be partnered with or referred to, citing lack of expertise and funding.

iv) Frontline and Community Engagement

A common issue raised by participants is the requirement for decision-makers (e.g., CEOs, funders) and upper-position staff to hold frontline work experience with the clients that they plan services for. Participants also raised that decision-makers should consult with community members to make sure services are accessible, have wrap-around supports, are covered by insurance/programs, and can be utilized properly. One shared,

> "People making the decisions are sometimes making assumptions of what people need… People with funding seem to think they know what everybody needs, so it's helping people who are at the tables making decisions to understand that what you believe may not be a need, and we need to start asking people what it is that they need" (Participant 14).

Some participants voiced that **listening to clients' feedback about programs/services is an important factor of refining service programming** as they hold valuable lived experiences.

> "We have work to do with connecting better with clients to share their lived experiences… when we speak to the 2SLGBTQQIA+ community, hearing from those

folks about our programs and services and how could we improve these would be very beneficial for us to tailor services" (Participant 22).

There were also a few participants who mentioned that there needs to be more focus on community-based approaches, in terms of governance and service planning. For example, **funders need to learn from the community members and have frontline knowledge** regarding local community and organizational needs. One mentioned that,

> "Funders want to hear from [agency] about work plans and budgeting, but [funders also] need to plan ahead, and to communicate what that plan looks like… I would love somebody at any of those funding levels to come on the ground and see the reality" (Participant 16).

v) Familiarity and Awareness of Services

Building relationships is "not a skill but a natural part of the community," as expressed by Indigenous participants. Indigenous Peoples being "connected" is a "strength" for Baawaating. However, a few participants noted that non-Indigenous service providers need to keep up and make an effort to familiarize themselves with other providers.

Non-Indigenous organizations must be more **familiar with violence/MMIWG2S+ prevention resources/programs that are culture-based and Indigenous-led**. Some participants also mentioned that non-Indigenous organizations must seek training opportunities with Indigenous-led community providers and co-create a "professional development network," despite many participants reporting difficulties in seeking training resources from Indigenous providers.

Furthermore, participants stated that Indigenous and non-Indigenous organizations need to work together to coordinate events to understand different Indigenous cultures (e.g., importance of grief, safe spaces, and ceremonial practices) and culturally safe resources. These events include inviting partners into staff meetings, workshops, presentations, and information sessions. It is widely mentioned that leadership must make time to "attend events even if they don't have anything to contribute" instead of just "sending staff" or not responding.

First responders in the interviews and sharing circles were also concerned about their roles in community partnership. Some mentioned that community events and partnerships sometimes may exclude first responders for the purpose of creating safe spaces for attendees. In response, one first responder shared that they need to **take the initiative and organize community events**. Another shared that first responders would have more cultural knowledges when they partner well with local communities. Participants also mentioned the importance of organizations creating partnerships with post-secondary institutions, where students can engage in community-based research projects/theses based on the community's needs.

vi) Accountability and Responsibility

Participants shared a few concerns regarding organizations' accountability in providing violence prevention services. Some participants stressed the **importance of transparency**; for example, where the funding is utilized, if organizations are applying for certain funding, who they hire, and what the training is. It was also noted among participants that **organizations need to meet the mandates and provide services they are funded for**. One shared:

> "I feel like there's always a plan, but I feel like there's a lack of accountability after the money is released… others may say, 'why aren't you providing the service that's what you're funded for,' and they'll say, 'well, yes, we are part of the knot, but we can't meet the mandate'" (Participant 20).

Another thematic area remarked on by participants was specifically regarding accountability to MMIWG2S+ and violence issues. "Busy is not an excuse," stated one participant. Social services must be planned according to the community's needs and "step up a bit more" to address homelessness, drug poisoning, IPV, and trafficking in the community. Also, it was widely acknowledged that the **level of accountability as voiced in the CFJ has not been clearly understood among service providers**. Most participants shared that **many organizations and all levels of government have not viewed Indigenous-led and culturally safe violence prevention as a priority for partnership** as called upon from the National Inquiry into MMIWG2S+ report (2019), leading to limited ongoing support and partnership on MMIWG2S+.

It was also commonly remarked by a few Indigenous participants that they are being treated like a token of cultural inclusion during their frontline work and community meetings (e.g., "oh, this person is Indigenous, here you go"). Participants emphasized that **Indigenous agencies, Elders, and frontline workers are experts in their community, so their knowledge and lived experiences must be centered**, rather than just being included.

vii) Organizational Policies

A few participants voiced the need to create a policy department/position that works on partnership development to address MMIWG2S+ and violence prevention. Participant 22 stated, "I think just how we do partnerships on certain priorities would be helpful," further adding, "whether it's a policy analysis or to identify what policies or structures can be put in place, to even see multiple organizations come together and share that collective voice on the evidence for a policy would be powerful in the future."

Another (Participant 24) noted that the policy updates within organizations need to take into account priorities mentioned by the community, "I just think that [TRC] doesn't seem to be a priority… we're supposed to be creating a safe space [and] smudging policies. All of these things

[are] happening for years… How come it's taking so long to address these needs?" Such policy updates need to be based on the community's action plans and concerns flagged by partners.

6. Culture in Service Provision

Culture influences the service provision environment for staff, as identified by participants. Their personal understanding of culture shapes the values they bring to their work. Culture is also an important element of cultural humility training in which the training outcomes are affected by staff's understanding of their clients' unique needs. Thus, an inquiry into the role of culture among staff in service provision may create opportunities for more culturally safe violence prevention programming.

i) Personal Definition on Culture

Participants shared their definition of culture as summarized in Table 5.

Table 5

Characteristics of Culture

Thematic Areas	Description (Participants' Personal Definitions of Culture)
Atmosphere/Environment	● Culture is "vibe of a place." ● Culture is "priority and mandate" of an organization, including staff orientation and program planning. ● Culture is "work culture."
Belief	● Culture is "freedom to practice one's belief." ● Culture is "a bigger picture of belief system" with teachings.
Lifestyle	● Culture is a "way of life."
Worldview	● Culture is a "worldview."
Healing	● Culture is a healing practice including "songs, medicines, and prayers."
Connectedness	● Culture is a "connection to the nature and mother earth."
Community	● Culture is community, "getting together as one."
Neutrality/Irrelevant	● Culture is "irrelevant in work" as staff need to be "neutral and maintain respect" regardless of race, gender, and religion.
Shared Goals	● Culture is "a shared set of goals passed down" over generations. ● Culture is "determined from the top-down" by the leader of an organization.
Identity	● Culture is tied to an individual's identity and vice versa, for example, individual deviation from cultural norms can lead to a loss of status or others' negative views about "the whole culture."

Value Systems	• Culture is not "performative" but "living the value system" such as *mino bimaadiziwin.*

ii) Impact of Culture on Work

Participants shared various ways in which identifying with culture can impact work. First, for all participants, we heard that culture is a source of healing, resilience, and wellness for staff in coping with a high workload and traumatic situations. It was also stated that culture helps staff be reflexive of their own positionality, privilege, worldview, and even qualification in providing services. Identifying with culture keeps staff motivated and humble to learn about other cultures and build relationships with other community partners.

Indigenous participants stressed the **interconnectedness of culture and work**. For example, Participant 16 shared, "I can't separate [culture from work], I am who I am. I am all of these different parts of my experience growing up and practicing our culture." They further shared that staff need to be **culturally grounded** (rather than just trained) to understand "the beautiful gifts that life [gives]" and that clients' needs are rooted in the need for culture, stating, "we have many of our people that we serve, who are waking up and realizing that they need to connect to their culture."

Among a few non-Indigenous participants, there was a common belief that **culture should be separated from service provision/programming**. For example, Participant 14 stated that, "as staff, we work really hard trying not to bring our beliefs and cultures into our work… it's a really fine line we walk, but it's one that is really important because we deal with so many different cultures that we try to maintain an equal and non-biased approach."

Another (Participant 15) shared similar concerns: "we have a lot more diversity coming into the city, which is great, but [...] it's a very large learning curve. When I was frontline, I don't care what your culture is, my job is to treat everybody fairly with respect." This implies that the **specific needs to learn about Indigenous cultures might be diluted** and generalized as part of broader multiculturalism.

Also, shared by one participant, "I don't expect [performing culture] among my staff. What I do expect and what I will provide is training as much as I can… doing it in a very open and inviting way. I'm not pushing beliefs on anyone" (Participant 16). Overall, some non-Indigenous staff believed that separation of culture from work helps them remain professional and not instill personal values in service provision.

iii) Influence of Personal Culture at Work

Among both Indigenous and non-Indigenous organizations, it was noted that diverse cultural backgrounds among staff require thoughtful planning and engagement to understand and not replicate the complex colonial histories Indigenous Peoples continue to face:

> "I know how our families have been heavily influenced by religion. I know that it was not good to be 'Indian' up until 10-15 years ago. I could look around our community and know which families never had anything and still don't have anything to do with the culture. I don't expect that of my staff. What I do expect and what I will provide is training as much as I can" (Participant 1).

Regardless, a few participants also witnessed staff beginning to appreciate and learn about Indigenous cultures in their lives. Participant 1 stated, "over the years, I have witnessed staff who would have nothing to do with anything Indigenous, even if they are Indigenous, totally start having a different view on it and being the lead in a lot of [Indigenous] cultural events."

However, almost all participants voiced that they do not expect staff to self-identify with any culture, which signals **Western impositions in service providers resulting in colour blindness and lack of services aligning with cultural values**. Some quotes are included as follow:

> "When it comes to individual cultures and how that impacts [on work], I think there's a strong impact on where we come from. But when you become a [provider], your goal is to treat people objectively with respect" (Participant 18).

> "Sometimes there are [clients] who are like, 'I don't want to smudge,' and it speaks a lot to intergenerational violence itself and that they're so adamant that [cultural service] is not what they need, [even when] identity building and identity knowing is the most important thing. I'm very subtle in these things; I don't come out and be like, 'oh, we're doing this from Indigenous pedagogy; we're not.' You can't force it onto anybody, but at the same time, you can tell when it's just a **performative thing if those underlying value systems are non-Indigenous**" (Participant 23).

A few participants in the interviews expressed that their own lack of cultural awareness may reflect **privilege**, "I can be pretty honest to say that I was pretty naive about it. I do come from a privileged background and race. I believe it does have an impact on my work as knowing that" (Participant 8). One participant provided their views on the notion of "I am just white," and stated, "that's so much privilege in itself because then you're viewing your culture as the norm or the status quo. So you're not seeing it as something different" (Participant 9).

A few Indigenous participants expressed that it is a good opportunity **for non-Indigenous staff to challenge themselves to explore their own cultures** and understand its significance: “challenge people to find out where they come from, where their lineages are, what it is that makes their family, the heritage they come from, and to find it, to discover it, and to research it, to embrace it because it's probably beautiful” (Participant 16). Clearly, culture impacts social service provision work.

iv) Identifying Clients’ Culture-Based Needs

Participants shared how they identify clients’ unique cultural needs to connect them with appropriate culture-based services. First, a few participants shared that their organizations **collect intake statistics on self-reported racial indicators** as requested by funders, but not for any specific cultural indicators. For example, Participant 12 noted, “we have if they identify as being Indigenous, yes or no. And it hasn't gone further for cultural.” Some participants voiced that the **purpose for racial data collection is for reporting statistics rather than for their actual service delivery**. Among them, one shared that, regardless of Indigenous client proportion, agencies must still have culture-based resources or pathways readily available.

A few participants from non-Indigenous organizations raised issues that clients often don’t disclose their preference for service. This creates difficulties in providing culturally safe services. Participants mentioned that clients may not know what they need, or are not willing to share (due to stigma, lack of trust, and trauma), or may not need the services staff assume they need. For example, Participant 14 stated, “it's rare that somebody says this is what they want. Our role here, is to provide them with all the options, and to not make an assumption that because they are Indigenous, they want Indigenous services.”

Some participants also shared that staff use different ways to **probe for preferences for cultural services** during early rapport building. For example, they would ask, “Do you need cultural services?” “Are you interested in connecting with […] services?” “Have you been working with any local organizations?” However, we also heard that staff do not identify culture or ask culture-related questions due to the lack of mandates or capacity/resources within their organizations to provide culture-based services.

First responder participants shared concerns about the **lack of race-based and disaggregated data of victims/survivors to develop services, programming, and training** tailored to the needs of MMIWG2S+ and other cultural groups. They mentioned that they never ask survivors to self-identify, but they have tentative knowledge about a victim’s culture based on the location of calls for service.

7. Future Directions for Violence Prevention Education

Violence prevention is a key area mentioned by all participants. Overall, participants shared the need for further education on MMIWG2S+ and colonial violence to prevent violence described in the thematic areas, as follows (see Table 6):

Table 6

Areas for Further Education on MMIWG2S+ Prevention

Culture	● Understand that Indigenous clients hold unique lived experiences and encounter unique factors related to MMIWG2S+, that require "equitable" rather than "equal" services.
Gender	● Understand that the reality of colonial violence does not just impact women, but Two-Spirit Peoples, as well as men who commit violence as a reactive response to systemic oppression. ● Educate and empower women, girls, men, boys, and Two-Spirit Peoples on the nature of violence and prevention strategies. Men and boys cannot be omitted in the discussion of MMIWG2S+. ● Teach the social construction of gender and significance of pronouns by centering the perspectives/stories of Indigenous Peoples, Elders, and knowledge keepers.
Sexuality	● Educate the public on the difference between gender and sexuality.
Prevention Resources	● Education on community violence prevention resources/programs is needed to increase access and utilization; this helps prevent resources/programs from being underutilized.
Risk Factors	● Educate the community on risk factors leading to ongoing and chronic violence, fostering a trauma-informed perspective that avoids victim-blaming.
Gladue Principles	● Understand the need for ongoing Indigenous-led education on Gladue processes among legal professionals, and appropriate trauma-informed, culture-based supports that guarantee Gladue recommendations are fulfilled. ● In order for Gladue Principles to be considered, there needs to be proper training/education and supports for Gladue writers.
Ongoing Colonialism	● Educate the public not only about colonial past but also ongoing colonialism; this is needed to dispel the myth that Indigenous Peoples could "just get over it and move on."
Accountability	● Understand the need for community collaboration in violence prevention, so that the responsibility of MMIWG2S+ education does not fall solely on victims/survivors and their families.

Consistent with the report by Rayside (2014) and Battiste (2018), participants stressed the need **for social science education** to educate students on gender/sexual diversity, so they are better prepared for working from trauma-informed lenses within Indigenous contexts. For example, participants who were recent graduates working as frontline staff reported experiences of shock and apprehension on topics like sexuality, Indigenous practices, safe spaces, and the use of pronouns. Some first responders also shared that both the frontline, executive, and supervisory levels are improperly trained on Indigenous topics. Participants stated that people "would be surprised what people don't know" (Participant 6). **Curricula on gender/sexual diversity within Indigenous cultures need to be mandated and standardized** in all post-secondary

programs. Given that this is out of the scope of this research, we propose the above table to guide future research foci.

Conclusion

This study emerges out the context that the catchment area of Baawaating has been largely overlooked by research studies, despite the majority of violence against Indigenous communities occurring in smaller urban and rural regions,. This is evident in the MMIWG2S+ Final Report, which inspired this study.

According to participants, gendered and colonial violence is always rooted in systemic violence and traumatic historical events that have ongoing and generational impacts. The participants emphasized the need for culture-based and relevant approaches to address the following: 1) unresolved trauma from childhood; 2) ongoing and intensive counselling; 3) historical and ongoing exclusion from service providers (e.g., Indigenous clients turned away/not served by non-Indigenous organizations); 4) the legacy of violent colonialism and forced displacement; 5) reactive responses as self-protection mechanisms; 6) violent reactions among children exposed to violence. It is evident that many clients impacted by the cycle of violence find it difficult to reconnect with traditional teachings and transition into healthier stages of life.

The research findings also address the root causes of gendered and colonial violence in Baawaating as demonstrated by participant (service professional) testimony. Consistent with the literature, participants identified root causes or barriers in following areas: 1) ongoing jurisdictional disputes; 2) limited disaggregated Indigenous-specific data; 3) lack of Indigenous-led, safe, 24/7, and preventive services; 4) inadequate funding model; 5) lack of Indigenous education and training; 6) no Indigenous-specific diversity hiring policies; and 7) irregulated communication strategies hindering information sharing.

We discussed the opportunities for service organizations to tackle the root causes of gendered and colonial violence. First, participants shared their personal wrap-around service definitions which could be applied in service planning and informs systemic factors of wrap-around programming to centre CFJ in serving Indigenous Peoples. The need to legally apply CFJ at work requires reform in organizational policies, equitable funding, human resources, support staff in 24/7 services, cultural safety training, and long-term planning. The root causes of violence cannot be addressed if services work in silos with limited ongoing partnership. Some suggestions for partnership development include 1) centering frontline knowledge; 2) Indigenous-led partnership in service planning; 3) formalizing partnerships; 4) collaboration in community events/workshops/trainings; and 5) more accountability and transparency. Finally, we argue that challenging staff to reflect on their connections with culture and its underlying assumptions is an opportunity to develop staff cultural safety and relational skills for service delivery.

Although the CFJ are legal imperatives and recommendations to properly address the systemic violence against Indigenous women, girls, Two-Spirit, and gender-diverse individuals,

this study argues that these currently have limited or no legal application in Baawaating. At a minimum, the CFJ calls for upholding basic human rights. But this is not enough. Systemic changes across various levels of the Canadian government require the federal government to fulfill its legal treaty and fiduciary responsibilities. With this in mind, we concur with the Native Women's Association of Canada's Scorecard in 2022, which concluded that the government has made little progress in addressing the CFJ. A gap remains in the lack of legal enforcement, much like previous key documents such as the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), the Royal Commission on Indigenous Peoples (RCAP), and the Truth and Reconciliation (TRC) Calls to Action. This gap is visible in Baawaating and needs immediate attention. We propose that the findings from this study serve as a starting point for deepening understandings of the specific needs of the region, and lead to equitable funding formulae and collaboration in developing cohesive wrap-around services tailored the address the diverse needs of Indigenous Peoples.

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Appendices

Appendix 1a—Cramer's V Coefficient Matrix of Violence Types

	Predictors	1	2	3	4	5	6	7	8	9	10	11	12	13
1	Emotional Abuse	1.00	–	–	–	–	–	–	–	–	–	–	–	–
2	Physical Abuse	0.63***	1.00	–	–	–	–	–	–	–	–	–	–	–
3	Spiritual Abuse	0.25	0.25	1.00	–	–	–	–	–	–	–	–	–	–
4	Financial Abuse	0.28	0.51*	0.34	1.00	–	–	–	–	–	–	–	–	–
5	Psychological Abuse	0.51*	0.28	0.48**	0.54***	1.00	–	–	–	–	–	–	–	–
6	Sexual Abuse	0.80***	0.80***	0.20	0.41*	0.41*	1.00	–	–	–	–	–	–	–
7	Intimate Partner Violence	0.85***	0.53**	0.29	0.18	0.60***	0.68***	1.00	–	–	–	–	–	–
8	Lateral Violence	0.36*	0.36*	0.68***	0.43*	0.29	0.29	0.24	1.00	–	–	–	–	–
9	Human Trafficking	0.31	0.56***	0.30	0.28	0.28	0.45*	0.44*	0.07	1.00	–	–	–	–
10	Homophobia	0.23	0.23	0.53**	0.45**	0.45**	0.19	0.27	0.50**	0.42*	1.00	–	–	–
11	Transphobia	0.25	0.03	0.47**	0.34	0.48**	0.20	0.29	0.42*	0.30	0.93***	1.00	–	–
12	Sexual Orientation Discrimination	0.25	0.03	0.47**	0.34	0.48**	0.20	0.29	0.29	0.30	0.66***	0.73***	1.00	–
13	Racism	0.31	0.31	0.15	0.44*	0.28	0.45*	0.22	0.36*	0.00	0.42*	0.45*	0.30	1.00

Note. All predictors are dichotomous variables "Yes/No") testing the bivariate relationship of each type of violence; The relationship means that two types of violence are likely reported together; $N = 32$; ***$p<0.001$, **$p<0.01$, *$p<0.05$; Only the highly significant relationships ($p<.01$ or $p<.001$) are described in text due to limited sample size to account for errors.

Appendix 1b—Percentage of Violence Reported by Participants

Violence Type	Number Reported by Respondents (*N*)	Percent (%)
Sexual Abuse	30	94%
Emotional Abuse	29	91%
Physical Abuse	29	91%
Intimate Partner Violence	28	88%
Racism	24	75%
Human Trafficking	24	75%
Psychological Abuse	23	72%
Financial Abuse	23	72%
Lateral Violence	18	56%
Spiritual Abuse	12	38%
Transphobia	12	38%
Sexual Orientation Discrimination	12	38%
Homophobia	11	34%

Note. Total $N = 32$

Appendix 2—Information Letter

INFORMATION LETTER

Title of Research Project: Indigenous Women Storying and Interweaving their Experiences of Gendered and Colonial Violence in Baawaating

Principal Investigator(s) and/or Co-Investigator(s): You are asked to participate in a research study conducted by Algoma University and funded by the Social Sciences and Humanities Research Council (SSHRC). The principal investigator Dr. Vivian Jimenez-Estrada is an Associate Professor in the Department of Sociology. If you have any questions or concerns about the research, please feel free to contact: Vivian.jimenez-estrada@algomau.ca

PURPOSE OF THE RESEARCH:

The **primary goal** of this project is to strengthen the research capacities of two Indigenous organizations: the Indigenous Women's Anti-Violence Task Force (IWAVTF) of Baawaating in Northern Ontario and the National Coordinator of Indigenous Women in Mexico (CONAMI), as they engage in research and advocacy work to challenge multiple forms of violence against Indigenous women.

In partnership between the Indigenous Women's Anti-Violence Task Force's Research Advisory Committee and its member organizations, and with funding from the Government of Canada's Social Sciences and Humanities Research Council, you are invited to take part in an evidence-based research project that intends to answer if and how violence prevention and intervention, and emergency services in the Baawaating region address the needs of Indigenous women, girls and 2 Spirit individuals, as per the MMIWG2S+ Calls for Justice.

This initiative aims to promote greater collaboration between Indigenous community services and non-Indigenous organizations to improve outcomes for Indigenous women, 2 Spirit and gender-diverse individuals who are at risk of facing systemic violence and/or go missing.

RESEARCH PROCEDURES:

This research will be conducted in Baawaating, and through three methods — survey, individual interviews, and sharing circle.

- **Survey**: The survey has under 25 questions and will take approximately half an hour to complete. The goal is to identify the program areas their services provide to Indigenous women, 2 Spirit and Indigenous gender-diverse individuals.

- **Interviews**: The individual interviews will be conducted with key front-line workers, managers and directors to conduct in-depth discussions based on key priority themes identified in the surveys. The interview will take approximately 60 minutes.
- **Sharing Circle** (Focus Group): Sharing circle will be conducted with key front-line workers, managers and directors to have an open dialogue regarding a strategy to fill these gaps. Sharing circle amongst service providers will be scheduled at a date and time yet to be determined.

The survey and interviews can be done online however, the sharing circle will be face-to-face, with the appropriate support and protocols to create safety and to conduct them in a good way.

If you have any questions or require more information, please email the Principal Investigator, Dr. Vivian Jimenez Estrada at Vivian.Jimenez-Estrada@algomau.ca

Sincerely,

Dr. Vivian Jimenez-Estrada, PhD
Associate Professor, Department of Sociology, Algoma University
Research Associate, NORDIK Institute

On behalf of the Indigenous Women's Anti-Violence Task Force - Research Advisory Committee and the Indigenous Women Storying and Interweaving their Experiences of Gendered and Colonial Violence in Mexico and Canada Research Team

Appendix 3—Informed Consent

Informed Consent

POTENTIAL RISKS & DISCOMFORTS TO PARTICIPANTS/INFORMANTS:

Survey
The survey has minimal risk to participants, as data collected will only be used for group statistics in which participants' identities are anonymized. The responses are coded numerically and treated as variables. Organization names will not be revealed publicly. Only thematic program service areas will be identified.

Interviews
Individual participant interviews are confidential and all data gathered from the interviews will be anonymized. There is a moderate risk of psychological or emotional discomfort given the stigmatized nature of the subject matter addressed in the interview. All participants will be over the age of 18 and social service professionals.

Sharing Circles
A sharing circle is a space where participants will be able to share their perceptions and vision for addressing the social service gaps in aligning with the MMIWG2S+ Calls for Justice. An important aspect of this process is the need to keep all information and stories shared in the circle confidential. For this, all participants must agree to and sign a confidentiality agreement. Should participants not agree to the confidentiality agreement, they may opt out without any penalties. However, they may not opt out of their sharing circle data after agreeing to the confidentiality clause and their sharing begins. However, by participating in the sharing circles everyone agrees to not disclose any information disclosed, including the identities of the other participants and the organizations they represent.

POTENTIAL BENEFITS TO PARTICIPANTS/INFORMANTS AND/OR TO SOCIETY:
Potential benefits to the participants include increased knowledge of programs and services for Indigenous women, 2 Spirit and gender-diverse individuals in the community. Participants will have an opportunity to be directly involved in the development and final presentation of policy recommendations and advocacy for social service agencies delivering anti-violence programming for Indigenous women, 2 Spirit and Gender diverse individuals in Baawaating.

Benefits to society include increased knowledge of gendered and colonial violence, including the MMIWG2S+ reports and Calls for Justice, engagement with other agencies seeking to address the issue in their programs and the identification of training and education needs and opportunities on anti-racism, cultural competency and MMIWG2S+. Perhaps the most significant contribution will be the creation of policy recommendations that can be taken to the local, regional and national arenas to advocate for funding and promote the Calls for Justice.

COMPENSATION FOR PARTICIPATION:
There is no remuneration for taking part in this study. However, *Asemaa* (tobacco) will be exchanged with the participants as a cultural protocol of consenting to participate in the project during the sharing circle. *Asemaa* means tobacco in Anishinaabek communities. It will be administered by the Elder in the opening ceremony and closing prayer. It is a cultural protocol of consenting, as the use of tobacco signifies a means to communicate with Spirit and to engage respectfully in learning with communities. In addition to this cultural protocol, the researcher will ensure ongoing consent is given (via email) to ensure participants have acknowledged all information for the next phase for them to give consent. An example of consent would be an email response such as 'I consent to engaging in the sharing circle' and/or signing this document beforehand.

CONFIDENTIALITY AND/OR ANONYMITY:
Participants in any sharing circle or interviews will be known to the research team through the registration, consent, and participation process; **however once raw data is drawn into the public reports, it will be anonymized**. Sharing circle data will be thematic and not based on any one participant thereby creating a form of "group anonymity" as sharing circle participants will also only be known to each other and no one outside of the research group or sharing circle event. All individual interviewees will have any **personally identifiable information expunged from any reports or publications,** including agency names, geographical locations or other identity markers that could potentially be a breach of confidentiality. All interview and sharing circle transcripts will be kept on a password-protected computer.

Sharing circle members have limited risk related to any participant breaches in who attended the sharing circle events but as sharing circle data is thematic in nature this builds anonymity into the process as no one sharing circle participant can be held responsible for the data generated. While we are not able to monitor or guarantee that all sharing circle participants will respect the confidentiality of their colleagues following the sharing circle, we do provide a confidentiality agreement that must be signed by participants prior to the events taking place so as to reaffirm the importance of confidentiality to the process.

Only the researchers will have access to the data for the individual interviews. For sharing circle event participants, all the participants would hold the collective knowledge generated during the event but not of the themes generated afterwards as the researchers later code the event data.
Audio recording will take place in the sharing circle event. Recordings must be conducted for the research team to analyze the results and complete necessary reporting. Participants are advised to complete the consent item for audio recording for the sharing circle and send it back to the researcher. If they haven't done so beforehand, the researcher will advise them to provide written consent on paper shortly before the event. The researcher will clearly articulate the purpose of recording (verifying data, testimony of the event).

PARTICIPATION AND WITHDRAWAL:
All participating agencies and individuals may withdraw from the study or phases of the study **however, since sharing circles are incorporating all responses/stories on site, it will not be possible to remove any information shared during the sharing circles.**

For interviews, the researchers will send a reminder email to participants when the phase officially ends, which includes a statement informing them that they have one week to notify the researchers if they wish to withdraw their data. This is due to the data analysis beginning one week after the phase ends.

If participants feel their participation will in any way impact their lives, they may withdraw at any point before the sharing begins. Withdrawal from the research will not affect your relationship with Algoma University, IWAVTF or any of the researchers associated with this project.

ACCESS AND FEEDBACK OF THE STUDY RESULTS TO THE PARTICIPANTS/INFORMANTS:
Study results will be made available via email to any participants that wish to receive and participants will be asked to indicate if they desire a copy of the final research.
In alignment with OCAP principles, the research team recognizes that cultural knowledge, data and information are collectively owned by the community or group; that Indigenous communities or representative bodies are within their rights in seeking control over all aspects of research and information management; Indigenous communities will have access to all information and anonymized data and to manage and make decisions regarding access to the information; and Indigenous communities have the right physical possession and control of information and data related to them.

Requests for copies of the results and the best contact information for each recipient will be asked of them.

- Survey results: approximately one month after closing (with themes only).
- Individual interview results: three months after the interview takes place with general themes only. The transcript would be sent to the individual within a week.
- Sharing circle transcript: available up to two months after the sharing circle takes place (with parts pertaining to themselves but not able to withdraw since the process incorporates everyone's contributions to move to the next phase).

SUBSEQUENT USE OF DATA:
These data may be used in subsequent studies, publications, and presentations.

RIGHTS OF RESEARCH PARTICIPANTS/INFORMANTS: If you have questions regarding your rights as a research participant, contact: Research Ethics Board, ethicsoffice@algomau.ca
If you have any questions or concerns about the research, please contact:
Principal Investigator: Dr. Vivian Jimenez-Estrada, Vivian.Jimenez-Estrada@algomau.ca

LIST OF CONSENT

1. The purpose of this study, as well as the risks and benefits of my participation, have been explained to me in a way that I understand.
2. I agree to participate in a survey and/or guided interview for primary data collection.
3. I agree to participate in a group interview to discuss common themes in the data collected from initial surveys and/or guided interviews.
4. I consent to an audio-recording of my interview(s) for transcription and subsequent analysis.
5. I understand that I may withdraw from the study at any time before the anonymization and aggregation of the data, and my data can then be removed from the study.
6. I understand that if I wish to withdraw after anonymization and aggregation have begun, I do not have to participate but data already collected from me may still be used as it can no longer be separated from everyone elses.

7. I understand that to protect the confidentiality of all participants, I should not speak about them (names, physical descriptions, place of work, etc) when I speak about my own experiences and understandings of the study.
8. I understand that the information I provide is confidential, and will never be revealed to anyone except under the following circumstances: if I disclose information about plans which may result in actual or potential harm to myself or others and/or information concerning any unknown emotional, physical or sexual abuse of children, the researcher is required to report this information to the appropriate authorities.

Please answer the following consent questions:

I agree to participate in the survey under the conditions described above.
☐Yes
☐No

I agree to participate in the interview under the conditions described above.
☐Yes
☐No

I agree to participate in the sharing circle (next phase) under the conditions described above.
☐Yes
☐No

I request receiving an encrypted transcript of the interview to check for accuracy and make edits if necessary
☐Yes
☐No

I request a copy of the research final results and report.
☐Yes
☐No

SIGNATURE OF RESEARCH PARTICIPANT AND/OR LEGAL REPRESENTATIVE

I understand the information provided to me regarding this study as described herein. My questions have been answered to my satisfaction, and I therefore agree to participate in this study.

I have been provided with both an information letter outlining the study AND a copy of this consent form for my own records.

_____
Name of Participant

_____
Signature of Participant

_____
Date

_____ _____
Signature of the investigator Date

CONSENT TO HAVE RESEARCH INTERVIEW AUDIO RECORDED

Title of Study:
Indigenous Women Storying Interweaving their Experiences of Gendered and Colonial Violence in Baawaating

Principal Researcher's Name:
Dr. Vivian Jiménez Estrada

I have agreed to take part in a research interview. I have agreed to allow an audio or visual recording of this interview to be made for subsequent transcription and analysis.

_____
Name of Participant

_____ _____
Signature of Participant Date

Signature of the investigator

_____ _____
Signature of Investigator Date

Algoma UNIVERSITY

Confidentiality Agreement for Sharing Circle

Sharing Circles
Participants in a sharing circle will be asked to openly discuss issues as best as they can, based on their professional experience and knowledge. Participants may choose to disclose personal information but they are not obliged to do so. Participants are encouraged **not to disclose specific names** during their testimony of community members' experiences. The sharing circle dialogue results from the final report are **anonymous** as they will not include comments specific to any individual but rather themes of the day and **only those that attend will know a participant attended**.

Though the research team cannot guarantee participants will respect each other's privacy and confidentiality, **participants must agree that they have been provided with clear information about this risk**. This form will contain a confidentiality clause emphasizing the importance of the commitment to respect the confidentiality of all information shared in the sharing circle.

However, the relationships between participants who will participate are unknown to the researchers so the possibility remains, due to the sensitivity of the subject matter, for the potential of more harm to be done than expected. Participants in the sharing circle will be asked if there is anyone at all that they would not feel comfortable/have conflict with having in the circle. The research team would then be able to organize circles that would mitigate any conflict or potential harm. Elders with the knowledge of sharing circle protocol are consulted and if available, present, to provide participants with sharing circle teachings. Each participant will also receive Asemaa or tobacco as a way to acknowledge and commit to confidentiality. **No information shared in the sharing circle shall leave this circle in order to protect each participant's confidentiality.**

LIST OF CONSENT (check the box if agree)

☐ The purpose of this study, as well as the risks and benefits of my participation, **have been explained** to me in a way that I understand.

☐ I understand that I may withdraw from the study at **any time before the anonymization and aggregation of the data**, and my data can then be removed from the study.

☐ I understand that if I wish to withdraw after anonymization and aggregation have begun, I do not have to participate but data already collected from me **may still be used** as it can no longer be separated from everyone else.

☐ I understand that the information I provide is confidential, and will never be revealed to anyone **except under the following circumstances**: if I disclose information about plans which may result in actual or potential harm to myself or others and/or information concerning any unknown emotional, physical or sexual abuse of children, the researcher is required to report this information to the appropriate authorities.

☐ I consent to an **audio recording** of the sharing circle for transcription.

☐ I understand that to protect the confidentiality of all participants, I **should not speak about them** (names, physical descriptions, place of work, etc.) when I speak about my own experiences and understandings of the study.

ADDITIONAL CONSENTS

I request receiving an encrypted transcript of the sharing circle (my part only) to check for accuracy and make edits if necessary, but understanding that it may not possible to withdraw my contribution from the data analysis as this contribution will be incorporated into the sharing circle process.

☐Yes
☐No

SIGNATURE OF RESEARCH PARTICIPANT AND/OR LEGAL REPRESENTATIVE

I understand the information provided to me regarding this study as described herein. My questions have been answered to my satisfaction, and I therefore agree to participate in this study. I have been provided with a copy of this document for my own records.

_____
Name of Participant

_____
Signature of Participant

_____
Date

_____
Signature of the investigator

_____
Date

Appendix 4—Research Instruments

Method 1: Survey

Justification:

Given that the **MMIWG2S+ Calls to Justice** focus on addressing the root causes of gendered and colonial violence for Indigenous women, girls, 2 Spirit and gender diverse individuals, this survey will provide a glimpse into the knowledge and application of these calls to justice within service planning, programming and delivery.

For this survey, we are focusing on:

CALL TO JUSTICE 3.6
We call upon all governments to ensure substantive equality in the funding of services for Indigenous women, girls, 2 Spirit and gender diverse individuals, as well as substantive equality for Indigenous-run health services. Further, governments must ensure that jurisdictional disputes do not result in the denial of rights and services. This includes mandated permanent funding of health services for Indigenous women, girls, 2 Spirit and gender diverse individuals on a continual basis, regardless of jurisdictional lines, geographical location, and Status affiliation or lack thereof.

CALL TO JUSTICE 3.7
We call upon all governments to provide continual and accessible healing programs and support for all children of missing and murdered Indigenous women, girls, 2 Spirit and gender diverse individuals and their family members. Specifically, we call for the permanent establishment of a fund akin to the Aboriginal Healing Foundation and related funding. These funds and their administration must be independent from government and must be distinctions-based. There must be accessible and equitable allocation of specific monies within the fund for Inuit, Métis, and First Nations Peoples.

CALL TO JUSTICE 18.18
We call upon all governments and service providers to educate service providers on the realities of 2SLGBTQQIA people and their distinctive needs, and to provide mandatory cultural competency training for all social service providers, including Indigenous studies, cultural awareness training, trauma-informed care, anti-oppression training, and training on 2SLGBTQQIA inclusion within an Indigenous context (including an understanding of 2SLGBTQQIA identities and Indigenous understandings of gender and sexual orientation). 2SLGBTQQIA people must be involved in the design and delivery of this training.

CALL TO JUSTICE 18.19 We call upon all governments, service providers, and educators to educate the public on the history of non-gender binary people in Indigenous societies, and to use media, including social media, as a way to build awareness and understanding of 2SLGBTQQIA issues.

Demographic Questions:

SELF IDENTIFICATION
As recognized in the Constitution Act, 1982, an Aboriginal (Anishinaabe) person is someone who identifies with First Nations (Status/Non-Status), Métis or Inuit cultural, and / or ancestry background.

Based on this definition, do you identify with any of the specific identities provided below? Please check all categories that apply to you:
1. First Nations_ Métis_ lnuit Other _____

2. What is your home community? _____

3. What is your age?_____

4. What is your gender identity? _____

ORGANIZATIONAL AFFILIATION
1.What type of organization do you work for?
A. Private Social Service Organization
B. Public Social Service Organization
C. Name of organization_____

2. What type of services does your organization provide?
A. Prevention
(eg include: Family Services, Health and Wellness supports, Education)
B. Intervention
(eg includes: Addictions, Community Hub, Mental health services)
C. Emergency
(eg includes: Crisis intervention services, Child welfare, Food security)
D. Social Supports
(Eg. ongoing supports to increase/maintain quality of life)- (Financial Help, Shelter/Housing, Income security)

3.Do you have a mandate to work with Indigenous Peoples?
Yes___
No___ (If answered NO, please explain)

4. Do you have an anti-violence mandate?
Yes___

No___ (If answered NO, please explain)

5.Does your organization incorporate the MMIWG Calls to Justice into its mandate?
YES___
NO___
If Yes, proceed to Q. 6
If No, proceed to Q. 7

6. What has your organization done to incorporate the MMIWG Calls to Justice into its mandate?
A. Reached out to advocacy and policy bodies like NWAC and ONWA
B. Hired consultants to do this work
C. Hired new Indigenous staff with knowledge of macro social work practice
D. Other (Please explain)

7. What barriers exist to the creation of an Action Plan and its implementation that address the MMIWG2S+ Calls to Justice?

A. Funding
B. Human resources
C. Training, skills and capacity
D. Focus on emergency services leaves no time for planning
E. No knowledge/awareness of MMIWG2S+ Calls to Justice
F. Other (Please explain)

SECTION B

Client Base and Services Sought
8. Does your organization record race-based statistics and/or First Nation Membership?
YES___
NO___

9. Approximately how many of your clients are Indigenous?
A. Less than 10%
B. 10-25%
C. 25-50%
D. 50-75%
E. Over 75%
F. We only serve Indigenous People

10. How does your organization define Indigenous identity?
    A. Proof of membership e.g. Treaty Card or Proof of Indian Status
    B. Proof of community affiliation e.g. letter of reference
    C. Self-identification
    D. We don't define/collect this information
    E. Unsure

11. Does your organization record gender and/or sexual identity(ies)?
Yes___
No___
Please explain_____

12. What have you noticed as the top presenting issues for people seeking services at your organization? (select/list as many as you'd like)
    A. Meeting basic needs (food, shelter, housing, etc)
    B. Income/Employment Security
    C. Physical or Mental wellness issues
    D. Social/Family issues
    E. Experiencing violence
    F. Other (please explain)

13. If applicable, what types of violence have clients disclosed that they are experiencing?
(select/list as many as you'd like)
    A. Emotional Abuse
    B. Physical Abuse
    C. Spiritual Abuse
    D. Financial Abuse
    E. Psychological Abuse
    F. Sexual Abuse
    G. Domestic Violence
    H. Lateral Violence
    I. Human Trafficking
    J. Homophobia
    K. Transphobia
    L. Sexual Orientation Discrimination
    M. Racism
    N. Other (please specify)

Services Provided

14. If you serve Indigenous People, are programs and services rooted in local Indigenous values and beliefs?

YES____
NO___
UNSURE___

15. If you serve Indigenous People, are traditional medicines and ceremonies available for use should a client request them?

YES, as part of all programming
YES, but only specific programming
NO, we refer clients elsewhere for this
UNSURE

16. If applicable, what are some challenges in providing these culturally specific services to clients?

A. Lack of funding
B. Lack of Indigenous staff and/or knowledge holders
C. Lack of engagement with Indigenous communities
D. Lack of cultural competency (cultural safety) training
E. Jurisdictional issue
F. Not Applicable
G. Other

Organizational Policy

17. Does your organization have diversity/hiring policies?

YES
NO
UNSURE
Please explain_____

18. Is cultural competency training (cultural safety) available to staff?

YES, it's mandatory
YES, it's optional
NO

19. What does your organization's cultural competency (cultural safety) training entail? (please select/list all that apply)

A. Indigenous cultural studies
B. Trauma-informed care
C. Anti-racism/anti-oppression training
D. Education on historical colonization
E. Education on ongoing colonization
F. Training on 2SLGBTQIA+ inclusion in Indigenous contexts
G. Not Applicable

H. Other (please explain)

Survey adapted from Indigenous Service Canada's Reporting Framework

Method 2: Individual Interviews

Some guiding points and literature to read ahead of interviews and doing this work:

The interviews will be conducted and framed in the context of the several reports that have outlined the issues that Indigenous women, 2 Spirit and gender diverse individuals continue to face and that are the foundational causes of gendered and colonial violence.

These include recent reports, such as Evidence, which illustrated the lack of implementation of the Calls to Justice that resulted from the MMIWG2S+ final report *Reclaiming Power and Place* in 2019. It identified issues such as uneven access to services in Indigenous communities, including a lack of culturally appropriate programming for Inuit women in the correctional system.

Reclaiming Power and Place provides overarching findings, which are set out on pages 174 and 175 of volume 1b. To briefly summarize those key findings, the first overarching finding is that the significant, persistent and deliberate pattern of systemic, racialized and gendered human-rights and Indigenous-rights violations and abuses–perpetuated historically and maintained today by the Canadian state–are the causes of the disappearance, murders and violence experienced by Indigenous women, girls and 2SLGBTQQIA people, or Two-Spirit, lesbian, gay, bisexual, queer, questioning, intersex and asexual people, and constitute genocide.

Reclaiming Power and Plance includes the testimonies of over 2400 people. These witnesses shared their truths and explained that there are many important principles that must inform the implementation of the Calls for Justice in order for them to be effective and meaningful. These guiding principles for interpreting and implementing the Calls for Justice are set out from page 169 of volume 1b of the report. They include.

1.-Focus on substantive equality and human and Indigenous rights ie. all actions and remediation to address root causes of violence must be human- and Indigenous-rights-based, with a focus on substantive equality, or true equality, of outcomes for Indigenous people.

2.-Focus on utilizing a decolonizing approach that's rooted in Indigenous values, philosophies and knowledge systems.

3. -Inclusion of families and survivors. It's important that the implementation of the Calls for Justice includes the perspectives and participation of Indigenous women, girls, 2 Spirit and gender diverse individuals with lived experience, including the families of the missing and murdered and survivors of violence.

4.- Solutions and services must be self-determined and Indigenous-led (by Indigenous governments, organizations and people). Also, the exclusion of Indigenous women, girls, 2 Spirit and gender diverse individuals, elders and children from the exercise of Indigenous self-determination must end.

5.-Need to recognize distinctions. As Indigenous women, girls, 2 Spirit and gender diverse individuals come from diverse First Nations, Métis and Inuit communities, the Calls for Justice must be interpreted and implemented in an equitable and non-discriminatory way that addresses the needs of distinct Indigenous Peoples and takes into account factors that make them distinct, including self-identification, geographic or regional-specific information, residency, and a gendered lens and framework that ensures that impacts on women, girls, 2 Spirit and gender diverse individuals are taken into account.

6.- Cultural safety that goes beyond the idea of cultural appropriateness and demands the incorporation of services and processes that empower Indigenous Peoples. The creation of cultural safety requires, at a minimum, the inclusion of Indigenous languages, laws and protocols, governance, spirituality and religion.

7.- Taking trauma-informed approaches that involve incorporating knowledge of trauma into all policies, procedures and practices of solutions and services. This is crucial to the implementation of the Calls for Justice.

Example Individual Interview Question Examples:

"We are interested in talking with you about your experiences as a frontline worker that provides XXXXXX services. We are especially concerned with ensuring Indigenous women, girls, 2 Spirit and gender diverse individuals have the opportunity to access appropriate programs and services that will support their overall wellness and fulfill the MMIWG2S+ Calls to Justice.

This is a voluntary interview and you do not have to participate. It will take roughly 60 minutes of your time.

Example interview questions for participants (all are competent adults) - Tell me a bit about yourself
- Can you share with me what your typical day at the office looks like? - What does it mean when a client is well or doing well?
- What is the role of culture in your day to day work?
- What is the definition of culture in this context?
- Do you also practice your culture? Why or why not?
- What does violence mean to you, in the context of your work?
- Do you have a way to assess or define what violence is? Is it one or many? - What do you know about the MMIWG2S+ issue?
    - Are they incorporated into your daily tasks as a frontline worker? Why or why not?
- What are some of the barriers you face in trying to provide wrap around services for your clients?
- What do you feel are the greatest needs so your clients do not go missing or suffer violence?
- What community services/programs does your agency provide? Are these services culturally appropriate? What does that mean?
- What would you say are the biggest barriers to violence prevention?

Example questions for social service managers/directors:

- What do you feel are the greatest needs for Indigenous women, girls, 2 Spirit and gender diverse individuals who find themselves in situations of violence? - Can the programs you

provide address the systemic barriers your clients face? Why or why not?
- What do you feel are the contributing factors that would lead a client to not access your services?
- What are your greatest needs when dealing with a case of chronic violence? What are the challenges you and your staff face?
- How well do other community agencies partner and collaborate together? Indigenous and non-Indigenous.
- What other programs and services have you partnered with? Who would you like to partner with?
- What is your understanding of the root causes of MMIWG2S+?
- In your opinion, what is and what isn't working for funding and program development that addresses gendered and colonial violence?
- What can you (as a service provider/professional) bring to the table? - What would you like to see change?
- Is there any training (anti-racism, cultural sensitivity, restorative justice, trauma informed practice, etc.) you feel is needed in your organization

Post-Interview Questions:
- Would you be willing to be a part of a focus group/sharing circle with other social service providers to share your experience and be a part of the process?
- Do you have any other ideas on how Indigenous women, girls, 2 Spirit and gender diverse individuals can be better supported in the community?
- Is there anything else I should know?

Method 3: Focus Group/Sharing Circles

Examples of Focus Group/Sharing Circle questions - to be based on initial findings from survey questions and interviews.

Sample questions

Round 1:

- What are the greatest needs … ?

- What are the greatest barriers/challenges in meeting the above needs? - What

contributing factors could lead a client to go missing or be murdered?

- The government of Canada has promised to create an Action Plan to address the findings in their MMIWG2S+ Final report. What is your organization doing and what area are you tackling. What are the barriers? How do we meet these needs?

o Participants will start to group themes and provide one or two possible solutions per theme.

Round 2:

- What are the greatest needs of community agencies/frontline workers and their managers/Directors?
- What financial and/or operational challenges does being in an area outside of metropolitan centers pose?

Round 3:

- What solutions can we accomplish at a community level?
    - o Participants will choose from all possible solutions 3 of the most important areas that can be addressed at a local level.
    - o Participants will divide into working groups and come up with a few actions for each solution (who, what, where, why and how)
    - o Present to the larger group.

Debrief in sharing circle