



THE MANITOBA EXPERIENCE

Assessing the Needs and Satisfaction of Women Using Manitoba Shelters

Prepared for
The Manitoba Association of Women's Shelters
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MAWS Members:

Agape House - Steinbach; Aurora House - The Pas; Genesis House - Winkler; Ikwe - Widdjitiwin - Winnipeg;
Nova House - Selkirk; Osborne House - Winnipeg; Parkland Crisis Centre - Dauphin; Portage Women's Shelter -
Portage la Prairie; Thompson Crisis Centre - Thompson; YWCA Westman Women's Shelter - Brandon

(Logo: Status of Women Canada)

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Jennifer Hagedorn

"Never doubt that a small group of thoughtful, committed people can change the world. Indeed. It is the only thing that ever has."

- Margaret Mead

"When your work speaks for itself, don't interrupt."

- Henry J. Kaiser



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Overview

On April 14, 2004 there were 201 residents in shelters in Manitoba. Forty seven percent were women and 53% were dependant children.(Statistic Canada, 2005). A report by the Status of Women shows that 80% of Manitobans are concerned about domestic violence and seventy-nine percent felt that the government should do more to reduce domestic violence. (Status of Women, 2002)

The Manitoba Government, through the Family Violence Prevention Program, provides funding to ten women's shelters located across the province. These shelters play an integral role in addressing domestic violence. The Manitoba Association of Women's Shelters (MAWS) is a non-profit organization comprised of the ten women's shelters in Manitoba.

In an attempt to better understand the needs of women accessing shelter services and to improve the services offered, MAWS members undertook Learning Through our Clients' Experience. MAWS was able to reference similar studies conducted in Southwestern Ontario and Saskatchewan. As with other shelter associations we intend this paper to be a beginning point for discussion among shelters and other stakeholders.

For the ease of the reader this report is divided into three sections. Section One reports on community agencies' knowledge and perceptions of shelters; Section Two is demographical information on who is using Manitoba shelters; and Section Three is women's own words and experiences with shelter services.

“80% of Manitobans are concerned about domestic violence.”

(Status of Women - 2002)



Section One

Community Agency Surveys

With a commitment to continually enhancing services, the Manitoba Association of Women's Shelters (M.A.W.S.) surveyed community service providers to receive feedback on their ideas, perceptions, and beliefs about women's shelters. Shelters identified key agencies playing an integral role in eliminating domestic violence within their region. A survey was sent to these agencies via fax or mail. The Regions, as per the Province of Manitoba boundaries, are: Northern, Eastman, Westman, Central Plains, Pembina Valley, Parkland, Interlake, and Winnipeg. Surveys went to family resource centres, addictions agencies, police services, victim's services, housing complexes, second stage housing agencies, and other social service providers. A total of 100 surveys were sent out and 41 were returned, providing a 41% return rate.

Table 1: Agency Awareness of Services

Are you aware of these services offered by your local shelter?

	Agencies who said yes
Non-residential services	61%
Follow-Up Services	56%
Public Awareness and Education Sessions	56%

Provincially, the survey showed that all service providers are aware of the emergency shelter and crisis counselling services. Agencies were questioned specifically regarding services which may be less known in the community. Only slightly more than half of respondents are aware of all shelter services including the non-residential (61%), follow-up (56%), and public awareness and education (56%) services. Sixty five percent (65%) of those surveyed viewed shelter staff as professional and well trained for the job, 12% said there was room for improvement in professionalism and educational

requirements, and 25% did not clearly answer the question. There are still a small number (10%) of respondents who see services as peer support by those who have been victims of violence in the past.

All agencies are aware of the emergency shelter and crisis counselling services that shelters offer. However, only slightly more than half are aware of the other services offered by women's shelters.

Eighty five percent (85%) of surveyed agencies made a referral to their local shelter in the last six months. Several common themes emerged when service providers were asked what information they required from the shelter in order to feel confident referring clients. Most prevalent were requests for an overview and schedule of current programs, followed by requests for brochures, pamphlets, posters, and written material on what

shelters offer. A number of organizations expressed a desire for contact names and numbers for the shelter staff when referring to services. Two agencies wished to understand what to expect on admittance so that they could share this information with their clients.

85% of community agencies surveyed have referred a woman to their local shelter in the last six

10% of respondents see services as peer support by those who have been victims of violence in the past.

63% of those surveyed stated shelter workers were professional and had some formal education, 12% said there was room for improvement in professionalism and educational requirements, and 25% did not clearly answer the question.

While most regions fit the general patterns listed above, regional differences were also identified, as outlined below. It is important to note that three regions had too few surveys returned to ensure validity of the responses.

Westman Region

1 Shelter, 8 surveys returned

Six of the responding agencies were located in the same community as the shelter and two were located more than 50 km away. Five of the 8 agencies stated that they referred clients to the shelter on a regular basis. The two sites located more than 50 km away stated that they had only referred to shelter once in the last six months. One of the agencies stated that they did not refer to the shelter indicating concerns without elaborating on what they were. Half of the respondents were quite familiar with all shelter services offered. The other half of the respondents were familiar with the emergency shelter and counselling aspects but were unaware of any of the other services offered by shelters. Seven of the eight stated that they had a good working relationship with the shelter; the one agency who did not feel this way was located more than 50 km away. Generally, the agencies viewed the shelter staff and professional and assumed that some form of counselling training was required. When asked what would assist them in referring women to shelter programs they stated the need to know about the programs offered, contact names and numbers, and how clients can access these services. Five of the eight agencies have had a tour of the shelter, although one stated it is important to do this on a regular basis due to staff turnover. The other three agencies all stated that they would be interested in a tour of the shelter and meeting the staff.

Table 2: Identified needs to increase Community referrals

Identified needs to increase Community referrals

	Number of respondents
Updated Overview of Programs/Services Offered	19
Brochures/Posters/Pamphlets to Give Women	10
Contact Names & Numbers	8
More Communication	2
Information regarding staff turnover	1
Testimonials	1
Admission criteria	2

Table 3: Referrals to Shelter in the last Six months

Number of times referred to shelter in last six months (n= 41)

	% Of Agencies
2-5 times	31.7
More than 9 times	26.8
Other	9.7
Not available	9.7
7-9 times	7.3
1 time	7.3
None	4.8
5-7 times	2.7

Northern Region

2 shelters, 8 surveys returned

Six of the responding agencies were located in the same community as the shelter and two were greater than 50 km away. Seven of the eight agencies were referring clients on a regular basis; the other indicated that they did not work with the victims of family violence. Most of the agencies indicated a pretty good idea of residential services with less awareness of follow-up and non residential services. Seven of the eight assumed that staff had extensive training in counselling and were quite professional in their dealing with them. One respondent commented that experience with abuse issues was more important than university training. Areas identified for improvement were communication skills and additional aboriginal workers. Agencies identified brochures, testimonials, information on programming, posters and handouts for clients, as integral to assisting women to access shelter services. One agency also stated that they would like to learn how to assist a client after they have been referred to

the shelter. All agencies stated that they felt that they had a good working relationship with their local shelter and seven of the eight have had a tour in the past. The one agency that had not toured the facility was interested.

Winnipeg Region 2

2 Shelters, 8 Surveys Returned

Because Winnipeg is a larger urban community, relationships between the shelter and responding agencies were not as strong as in rural and northern communities. This could be in part due to the wider variety of services that are available in the city therefore agencies do not work as closely together. In rural areas services are often very limited and agencies must work together to reduce the gaps in services.

Other agencies seemed to be well versed in what services shelters had to offer and were referring on a regular basis. Those who indicated that they were not referring to shelter services were offering the same programs themselves. Several of the agencies indicated that they did not have a good working relationship with Winnipeg shelters and suggested that personal contact would facilitate a better relationship. Five of the eight agencies stated that they had never had a tour of the local shelters and would be very interested in such a tour. When asked what types of information are required to assist with referrals, two agencies reported that they need to understand both the shelters' mandate and admission criteria, as this has been a little confusing in the past. Other areas identified were a need for brochures, listings of programs offered, and written information to give to clients. It was also suggested that shelter staff receive training on aboriginal issues.

Pembina Valley Region

1 shelter, 2 Surveys returned

It is difficult to determine how agencies in the Pembina Valley region are responding to their local women's shelter because only two questionnaires were returned. One agency was located in the same community as the shelter and the other was in a different community within 10 kms of the shelter. One agency has been referring to shelter, although they did not state how often; the other had not referred in the last six months because no one had required shelter services. The

agency outside the shelter community was not as aware of the different services offered as was the one in the same community. Both thought that the staff was well trained to handle the job and appeared professional. Both agencies felt that they had a great working relationship with the shelter and did not have any suggestions on either improvements or further information to assist women in using shelter services.

Eastman Region

1 shelter, 2 Surveys Returned

As with the Pembina Valley Region, the low response rate makes it difficult to assess relationships between the shelter and agencies in the Eastman Region. Of the two agencies responding, one was located in the same community as the shelter, and the other was located more than 50 kms away. Both were referring on a regular basis, although neither agency indicated awareness of other services that their local shelter had to offer. They viewed most of the staff as professional and believed that experience was more important than training when working in a shelter environment. The only request for information to assist referring clients to the shelter was for names and contact numbers. The agency located in the community felt they had an excellent working relationship while the outside agency did not feel the need to develop such a relationship. Again, the agency within the same community has had a tour of the shelter, while the one outside has not, although they were interested in seeing it.

Central Plains

1 shelter, 3 Surveys Returned

This was another region without a significant response rate to the survey. All three responding agencies are located in the same community as the local shelter and all respondents stated that they were referring to the shelter on a regular basis. One agency appeared quite clear on the different types of services offered by the shelter while the other two were only aware of the emergency shelter and counselling. All three stated that the staff were very professional, two stated they believe staff require counselling skills, and one agency believed the staff have graduated through the programs offered by the shelter to gain experience ("been there, done that" experience). Agencies felt that they needed

access to brochures, lists of programs offered, contact information, and site visits to feel confident referring women to the services. All three respondents stated that they have a good working relationship with the shelter, one making the effort to say it has not always been like this in the past and they feel both parties are working hard at developing the relationship. Two of the three have had a tour of the shelter, with the third very interested in a visit.

Interlake

1 shelter, 5 Surveys Returned

Four responding agencies were located in the same community as the shelter, while one was located more than 50 kms away. All five agencies have been referring on a regular basis and all were very well versed in the programs and services offered by the shelter. Agencies identified the need for brochures, knowledge of programs offered, more communication, contact names and phone numbers, and a calendar of events as things needed to improve comfort level referring women to the shelter. All respondents stated that shelter staff were very professional, but none had ideas on the type of education/experience required to work in a shelter. All five agencies stated they believe that they had a good working relationship with their local shelter, although two thought that there was still room for improvement through better communication.

Parkland

1 shelter, 5 Surveys Returned

Four of the respondents were located in the shelter's community and one was more than 50 kms away. Four of the agencies were referring to shelter on a regular basis and one agency chose not to answer that particular question. Three of the five were very well aware of the programs offered by the shelter while two were aware of the counselling and emergency shelter only. When asked their perception of the level of professionalism,

there seemed to be mixed results: one agency said great, one did not respond, one stated it depends as each staff is different and one voiced concerns about lack of professionalism. When asked what information they needed to be confident in referring to the shelter, responses included contact names and numbers, brochures to give to clients, overview of the programs offered by the shelter, and a coordination of planning between agencies. Three agencies felt they had a good working relationship, one did not respond, and one wished that they had a better capacity to share information between agencies.



Section Two

Who is using Manitoba Shelters?

Intake and Exit Survey Results

It is widely accepted that violence against women knows no boundaries. The issue is pervasive across age, ethnicity, education level, income level, sexual orientation, and other social categories. However, it seems that this diversity is not reflected in the population using shelter services. Our results show that women accessing shelters in Manitoba are marginalized and face a multitude of barriers including physical ailments, mental health issues, poverty, and low education levels. Similar results have been found in other provinces as well. (Grasley, Richardson, Harris, 2000; Stensurd, 2005). Increasingly, women entering shelter are presenting co-occurring issues. This often leaves shelters struggling to meet the needs of their clients while maintaining their mandate, which focuses exclusively on domestic violence.

Information on users of shelter services cited in this section is based on the intake and exit surveys from three shelters in Manitoba (Appendix C). It should be noted that originally five of the ten shelters (50%) in the province were to collect intake and exit surveys from women who entered shelter. However, one shelter's data had to be excluded as it did not contain all the needed information and another shelter was not able to collect the data. Consequently, the results are based on two rural (Selkirk and Steinbach) and one urban shelter (Brandon); unfortunately, the northern shelters are not represented in the intake and exit surveys.

Of the 143 women who entered three Manitoba shelters during June-November 2004, seventeen did not complete the paperwork and fourteen did not consent to participate, leaving 112 women taking part in the study, a 78.3% response rate. The average length of stay in a Manitoba shelter during the data collection period was 25.2 days, with the minimum zero days and the maximum 123 days.

DEMOGRAPHICAL INFORMATION

Age and Cultural Background

The women who took part in the study ranged in age from 19 to 60 years with the average being 33.9 years. Seventy percent (70%) of women self identified as Aboriginal. Of those who identified as Aboriginal, 92.2% identified as First Nations, the remaining 7.8% identified as Métis; there were no clients who identified as Inuit. Only one woman identified as a recent immigrant to Canada, and there were no other major cultural groups represented in the sample population.

Table 4: Aboriginal background of shelter residence

Total Aboriginal	70.0%
First Nation	92.2%
Métis	7.8%
Inuit	0.0%

Educational Background

The majority (57%) of women who entered shelter did not graduate from high school. Grade 12 graduations account for 27% of the respondents, grade nine to eleven 46.8%, and less than grade 9 account for 10.8% of the women.

Table 5: Educational Background (n=111)

	% of Women
Less than grade 9	10.8
Grade 9-11	46.8
Grade 12 Graduation	27.0
Not Available	15.4

Primary Source of Income and Total Annual Income

The primary source of income for women in Manitoba shelters is Social Assistance (42.3%), followed by personal employment (11.8%), partner's employment (10.9%), band sponsorship (8.2 %), and dual income family (8.2 %). The majority of women (55.5%) have an annual income of less than \$20,000; only 7.3% of women in the study stated that they have a family income of more than \$30,000. Almost one third of the women in the study (32.7%) stated that they lost some income in the last year due to the abuse.

Table 6: Primary Source of Income (n=110)

	% of Women
Social Assistance	42.3
Employment (partner's and personal)	30.9
Band Assistance	8.2
Not Available	7.3
Other	11.3

Table 7: Total Annual Income n=110

	% of Women
Less than \$10,000	26.4
\$10,000-\$14,999	18.2
\$15,000-\$19,999	10.9
\$20,000-\$29,999	4.5
Over \$30,000	7.3
Don't Know annual income	18.2
Not Available	14.5

32.7% of women admitted to shelter had lost income in the last year due to abuse at the hands of their partner.

Children

The vast majority of women (88.2%) who enter shelter have children. Of the 97 women who had children there were a total of 191 children, an average of 1.97 children per woman. Four and one half (4.5%) of women entering shelter reported that they were pregnant at the time of admittance.

Special needs of Women

Thirty-five percent (35%) of women entering shelter had a diagnosis of a medical condition (asthma, diabetes, heart disease, etc.), while 32% had a diagnosis of a mental illness (depression, anxiety, bi-polar disorder).

More than 1/3 of women had a medical diagnosis of mental and/or physical illness.

ABUSE HISTORY

Relationship to the Abuser

Nearly all women reported that their abuser was male (95.5%). Spouses, boyfriend/girlfriend, ex partners, and common law partners account for 94.7% of the abusers. This shows that the vast majority of women accessing Manitoba shelters are fleeing an intimate partner/ex partner. Almost half of the women (48%) have requested police intervention in the last six months for the abuse.

The majority of women (68.5 %) reported they had left this relationship previously, with most of these women (69.7%) stating they had left more than one time. Forty-two percent (42.3%) of the women have been involved in the relationship for more than five years; only 8.1% were in the relationship for less than a year.

48% of women have requested police intervention in the last six months for the abuse.

Table 8: Relationship to the Abuser (n=111)

	% of Women
Common-Law Partner	33.3
Ex-partner	22.5
Spouse	22.5
Boyfriend/Girlfriend	16.4
Child	0.9
Other	2.7
Not Available	1.7

Table 9: Length of time in relationship (n=111)

	% of Women
More than 5 years	42.3
Less than 6 months	17.1
1-3 years	15.3
3-5 years	14.4

(n=76)

	% of Women
2-4 times	42.1
1 time	26.4
7 + times	14.5
5-7 times	3.1
6 months - 1 year	8.2
Not available	2.7

Types of Abuse Experienced

Women were asked to indicate how many types of abuse they had suffered in their lifetime, at the hands of this partner or previous ones. (Numbers do not add up to 100% as many women experienced more than one type of abuse.) Emotional (88%), physical (83.3%), verbal (78.7%), psychological (63%), financial (57.4%), stalking (47.2%), and sexual (37%) abuse were the most common types suffered. Almost one quarter (23.63%) of women entered shelter with physical injuries from the abuse. The most common types of physical injuries presented included bruises (69.2%), cuts (30.8%), and evidence of choking (11.5%).

Table 10: Types of abuse experienced (n=108)

	% of Women
Emotional	88.0
Physical	83.3
Verbal	78.7
Psychological	63.0
Financial	57.4
Stalking	47.2
Sexual	37.0
Neglect (left without basic needs met)	32.4
Threats of abuse against family	29.6
Spiritual	25.9
Threats against children	24.1
Threats against pets	14.0

Previous Shelter Stays

When asked if they had been in shelter in the last three years, 66.4% of women stated that this was not their first shelter stay. When asked how many times they had been in a shelter in the last three years, a significant number (38.4% n=73) of women declined to answer the question. Of the 45 women who did answer the question, 30.1% stated they had been in shelter one time, 24.7% two-three times, 4.1% four-six times, and 2.7% more than 6 times.

For 66.4% of the women, this was not their first shelter stay.

Table 11: Previous shelter stays in the last three years (n=110)

	% of Women
Yes	66.4
No	31.8
Not available	1.8

Table 12: Number of shelter stays in last three years. (n=73)

	% of Women
Not available	38.4
1 time	30.1
2-3 times	24.7
4-6 times	4.1
More than 6 times	2.7

Other Agencies Involved with the Family

The majority of women (91.8%) stated that there was at least one other agency currently involved with their family. Child and Family Services (32.7%), Social Assistance (31.7%), and Police Services (27.7%) were the most common service providers. (Numbers do not add up to 100% as women may have more than one service provider involved).

Table 13: Other agency involvement with family (n=101)

	% of Women
Child and Family Services	32.7
Social Assistance	31.7
Police	27.7
Other	20.8
Lawyer	11.9
Mental Health	11.9
Counsellor	7.9
Women's Advocacy	5.9
Victims Services	2.0

91.8% of women have at least one other agency involved with their family.

SELF REPORTS OF SUPPORT NEEDED

On intake, women were asked questions relating to what type of assistance they required from the shelter and what services they felt they needed in a broader context to live a violence free life. When asked what they hoped for while in shelter, the majority (82.4%) wished to be in a safe place. Women also wanted shelters to assist them with long term housing (45.4%), personal counselling support (38%), and discovering other types of help to assist them (25.9%). When asked what kinds of things they felt they needed to end the violence in their lives women indicated counselling (56.5%), housing (45.4%), relocation (39.8%), and long term support (21.3%) as most important. (Numbers will not add up to 100% as due to multiple answers chosen).

Table 14: Needs while in shelter (n=108)

	% of Women
To be in a safe place	82.4
To find long term housing	45.4
Personal counselling support	38.0
To find out what other kinds of help are available	25.9
To find out ways to help your children	20.4
Connect with others who are going through the same	6.5
Long term counselling support	6.4
Assistance with justice system	5.5
Find ways to become free of violence	1.9

Table 15: Top needs to end violence in life (n=108)

	% of Women
Counselling	56.5
Housing	45.4
Relocation	39.8
Long term support	21.3
Support Group	16.7
Counselling for Children	16.7
Employment/training	15.7
Assistance with Justice System	11.1
Counselling for your partner	5.6
Day Care	2.8

DEPARTURE FROM SHELTER

On departure from shelter women were asked where they were going. Only 6.3% indicated that they were returning home to the abusive partner. It would seem that very few women intend to resume the relationship when they leave the shelter, or they are too ashamed to admit that they're returning to the abuser. This may indicate that there are other factors that influence the decision to return to the relationship once the woman has left the shelter.

Table 16: Where women go on departure (n=80)

	% of Women
Family	22.5
Another Shelter	17.5
Own Housing	16.2
Home-partner removed	15.0
Other	8.8
Friends	6.3
Home to Partner	6.3
Second stage Housing	2.4
Not available	5.0

Upon departure, staff were asked to complete a section on topics covered with the women during their stay. The cycle of violence, protection planning, and types of abuse are the most common topics covered during a shelter stay. This is in keeping with the crisis nature of shelter counselling; helping women to recognize the signs of abuse and protect themselves in the future is the main priority.

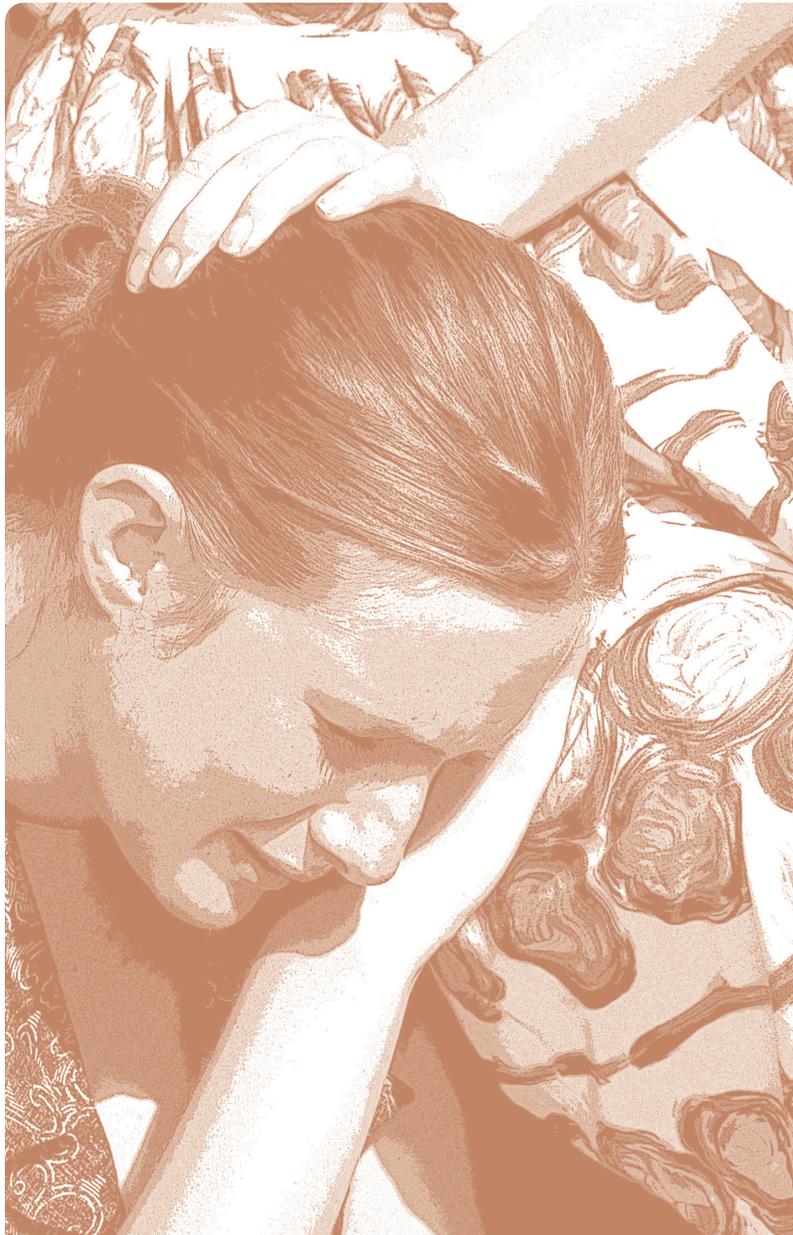
Women were asked upon departure from shelter if they were interested in receiving follow-up services from the shelter. Over half (51.5%) of the women did request these services.

Table 17: Topic covered during shelter stay (n=110)

	% of Women
Cycle of Violence	53.6
Protection planning	48.2
Types of abuse	43.6
Effects of abuse on self	34.5
Housing	33.6
Short Term Counselling	31.8
Group Counselling	27.3
Effects of abuse on Children	25.5
Referrals to other agencies	23.6
Legal issues	22.7
Protection Orders	20.9
Profile of an abuser	20.0
Child Care	19.1
Advocacy	12.7
Financial Issues	10.0
Power and Control Wheel	9.1
Long term Counselling	7.3
Life Skills	6.4
Childhood issues	5.5
Parenting skills	5.5
911 Phone Service	5.5
Parenting Life Skills	5.5
Sexual Abuse Issues	4.5

Table 18: Women requesting follow-up Services (n=66)

	% Women
Yes	51.5
No	48.5



Section Three

Interviews and Focus Groups

Focus groups/interviews were conducted in all 10 member shelters, with a total of 54 women interviewed. All interviews were conducted by the MAWS Coordinator. Due to the sensitive and confidential nature of shelter services some women were interviewed one to one and others in a group setting. Shelter staff recruited women from those residing in shelter and those who had left shelter but were still in contact. Based on the needs identified in each region, shelters were given a budget to provide women who participated with childcare, transportation, food, gift certificates, and/or honorariums.

With their signed consent to participate (Appendix B) all women were assured no identifying information would accompany their responses, that only the MAWS Coordinator would have access to any identifying information, and that all audio tapes would be destroyed upon completion of the final report. All interviewees were asked a series of questions (Appendix D) based on current or past shelter residency designed to capture women's experiences while in shelter and discover what needs were/were not being met. The average interview lasted approximately 25 minutes, the average focus group lasted about 45 minutes. The number of participants varied from region to region based on the current shelter occupancy.

The participants' responses clearly reflect the importance and quality of shelter services in the lives of women who have experienced domestic violence. The feedback also gives a strong indication of which current services had a strong impact on them and which shelter aspects could be further enhanced. This section will explore women's own words and responses along the following themes: i) The need for shelter services, their impact ii) Key areas/needs that are necessary for a successful shelter stay, province wide. These factors are deemed

to have a strong impact on satisfaction levels iii) Regional differences in satisfaction iv) Women's perception of shelter services and ways to increase awareness in communities.

NEED FOR SHELTER SERVICES & THEIR IMPACT

Women's shelters are indeed a vital link in the fight to eliminate violence against women and children. For many women a shelter is their only option for safety and abuse-related services. Many women spoke of how shelters provided safety and services that they could not find elsewhere.

"These places are here for a reason and I am so grateful ... cause like I said I don't know what I would have done... and I am so grateful for these places, that they exist... and they helped me, it makes you strong, and it makes you live again, gives you hope... it's a starting point, I'm going to be forever grateful for this place because it was a wonderful positive experience"

"I just can't express how this shelter has helped me to keep on my path, to not want to go back where I came from"

"Do you know how I would feel today, like I really don't think that I would be where I am today, if it wasn't for [shelter]. "Its been really helpful. Like I've told my sisters about this place, sharing it with other people who have been in situations"

"I'm thankful that this place was here for me when I was in a rough spot"

[why my kids like shelter] "the freedom to do whatever they can... being able to talk loud and you know and be happy you know, so we wanna stay here for a few days"

Women reported a wide variety of improvements in their moods during their first week of staying in shelter. The most common improvements cited include: less headaches, less worries, less “walking on eggshells”, getting more sleep, feeling more relaxed, happier, stronger, safer, and feeling more like themselves again.

“I feel very much more settled, and I feel like I know who I am again, I’m hearing myself - not hearing other people telling me what to do”

KEY NEEDS AND AFFECTS ON SATISFACTION

Participating residents identified a number of factors that they consider key to a positive shelter stay. As indicated above, the presence of these factors have a strong correlation to the women’s level of satisfaction.

Safety

Safety was by far the most helpful and important aspect mentioned. Locked doors, security cameras, barred windows, and 24 hour staff gave women a sense of security.

“[It was] very safe here, emotionally, physically, mentally, I felt very safe here”

“There is an obvious priority on security... and that is definitely helpful just ‘cause it adds to your sense of safety and security”

Basic Needs

Women referred to the importance of having their basic needs provided, identifying the importance of shelter, clothing, food, and household items. Many women commented on the peace of mind it brings to not have to worry about basic needs during a time of crisis. Several women also made reference to how responsive shelters can be to women’s individual needs.

“They also provided me with, what would you call it, the necessities because I am diabetic and um... problems with blood pressure... they bought me the proper food to eat”

Rest Time

Women discussed their exhaustion upon arriving at the shelter and the importance of being able to rest, especially for the first few days. At times women felt that they were not allowed enough rest time because of child care responsibilities, house rules on waking and bed times, inflexible meal times, and inflexible programming schedules.

“Because we come here very tired; physically, mentally abused, we’re tired; we need rest”

Counselling and Support

Most women identified counselling and general support as one of the most helpful and useful aspects of shelter.

“Because how do you go to your mom or his mom... how do you tell someone what’s going on? It’s very difficult because you’re scared, you’re terrified, and you’re conditioned not to talk”.

“That’s what I find, I know what I want to get done but I don’t know how to get there... they are very knowledgeable about the community resources that are out there, like just all kind of things”

“They helped me move, they helped me to go see my welfare worker...they helped me go to Manitoba Housing, go to see a lawyer, I wouldn’t have did it myself”

Staffing Levels and Staff Relationships

Staff/client relationships can significantly impact a woman’s shelter stay. Interviewees often referred to a particular staff member who went the extra mile or made them feel safe and comfortable. Generally, shelter staff were viewed as professional, helpful, empathetic, and trustworthy by shelter residents.

“I am very thankful and grateful for the women that work here, like for helping me get through this and um... they have been more than helpful, I think they do a great job”

“It would be hard to not go back [to the abuser] if I didn’t have [counsellor]”

Women occasionally pointed out instances where they felt that staff were not sensitive to their needs:

“She [the staff] never smiles at me, its like she looks at me in disgust or something... when she does that, it like affects me, you know, like I don’t want to go see them, I don’t wanna impose, I don’t want them to think worse of me if they all ready are thinking, like badly of me as it is”.

It is important to note that the few women who expressed a negative experience were asked if it was a general feeling they had from the entire shelter or a specific staff person. All women stated that it was just one or two staff members, not all shelter workers. Even those with a concern said the general feeling in the shelter was one of welcome and comfort.

Women mentioned inadequate staffing levels during the night and weekend shifts. Women needing a counsellor during these periods said they often had to wait long periods of time or not have access at all. Staffing levels also affected feelings of safety in the shelter, with reduced staffing levels reducing the feeling of safety.

“ One night [in the shelter] it wasn’t a very good experience... I woke up... I wanted to talk to this one [counsellor] on duty, right... and I couldn’t find the person so I went upstairs and got my roommate and then we both went looking, we did find her eventually in the far office, she had a telephone call she couldn’t come to the [door]... but anyway it was scary”

“I waited 2 1/2 hours to see a counsellor and if that was my first experience in shelter it would have been my last, because I just felt like I wasn’t important” [quote from a woman admitted on the weekend].

Personal Space

Participant’s responses show the amount of personal space that a woman has while in shelter can greatly affect her satisfaction with shelter services and even her decision when to leave the shelter. Women spoke of the impact of sharing a space and particularly sharing a bedroom with another family; identifying the loss of their own personal space, time to be alone, to cry, or to just sit and think.

“Everybody needs that [privacy] especially you know initially when you com in here and you’re trying to figure out what you are doing and how and everything else”

“Having to share rooms... that is what made me leave... I was going to lose it... just so many people... even with my kids and a single woman with no kids its still too many people in a room... I wanna cry, I don’t want someone overhearing me and pitying me, I wanna be able to cry as much as I can without having to worry about it, especially the first while... even at home I don’t cry in front of my kids, I don’t want them to feel bad for me, and I [would] rather have my kids see me than women I don’t know”

“ When I came to the shelter I brought my kids with me, like sometimes I just felt like crying, and I couldn’t cry because my kids would all started crying too, they didn’t want to see me cry, and I needed to be by myself, to cry”.

Women who had more personal space were more satisfied:

“Ya I had it [personal space]I was very happy with that, you know a lot of times if I didn’t want to talk... I would stay to myself and I would go into my room, or if I wanted to talk... I would talk to one of the staff or if they were busy I would you know chit chat with one of the residents, I had quite a lot of personal space to myself, nobody invaded my room.”

Children’s Programming

Children’s programming was identified as a significant need for women in shelters. Children’s services refer to child minding, age appropriate activities, children’s counselling, and school programs. When services were available, women were very happy with them, commenting on how helpful it was for them and their children during their stay.

“The childcare when you have to go to legal aid... it was so helpful that they watched them... like I had to wait at legal aid for almost 4 hours, and I would have been pulling my hair out if I would’ve had the little ones with me”.

"[Children's counselling is very important] because it is so hard to get the school counsellor to see him' cause there is such a waiting list"

The amount of children's programming available was seen as not nearly enough to meet the needs of the women in shelter. In fact, enhanced children's programming was the most suggested area for improvement in shelters. The most common theme was the desire to have extended programming hours and activities available for the children. During evenings and weekends most shelters are without children's counsellors and child activity workers. Similarly, even when staff are available to help with the children, it was identified that not all children can benefit due to the limited number of staff.

"If I'm having a meeting with [a] counsellor, or something like that there is generally child care available, although it is iffy sometimes, and its been very difficult at times to meet, and try to figure out you know, a plan of action, or something like that with [child] trying to stick his fingers in the light socket... so I'm wrestling him and trying to focus my thoughts, and it's hard"

"I really need a break, like even just an hour by myself, where I don't have to run around after him, where I can just collect my thoughts"

Several mothers commented on policies at certain shelters that don't allow you to leave your children with another mom even for a few minutes. They suggested that this is too difficult and that having another mother watch your children for a few minutes to allow you to go for a smoke, use the bathroom, or use the phone should be allowed.

"There was no one to say [to] 'can you watch him for 5 minutes while I run to the bathroom"

The lack of options for school aged children was also a concern for some mothers. Often, leaving the shelter was not an option for safety reasons, while in other circumstances there were no community schools available to enroll children in while living shelter. Interviewees felt this was not fair to their children.

Client 1: *"You see I've got three right now that are supposed to be in school and they have been out all week and there's nothing I can do about it"*

Client 2: *"Ya and I just got here and I can't get my kid in school so I feel like shit,' cause my kids aren't in school, so the added guilt on top of everything else"*

Donations

Many women referred to the donations the shelter receives and distributes as an integral part of shelter services. Donations of clothing, food, household items, and furniture were very important to the women.

"They are providing me with furniture, that's important to me, I have nothing"

Interviewer: How important are those donations?

Client: *"Very important. Very.' Cause there are times where, you feel like, at least I have, you don't want to see some things [your belongings], but you still need the clothing, but you don't feel like wearing it no more, cause it had too many memories"*

Community Living

Community living was viewed as challenging. Women identified several major challenges to living in a shelter: differing parenting styles, personality conflicts, lack of personal space, others not following the house rules, others not doing their share of the household chores, and even theft of personal belongings.

There is, however, a huge need that women in shelter express that can be met only by community living. The importance of being with other women who have had similar experiences was expressed frequently and consistently across the province. Knowing others with similar experiences was shown to decrease loneliness, decrease shame, allow women to begin talking, and provide hope for the future.

"It is very helpful to have a group of women all in different points, that are coming and going. Some have been here longer than me, so they have had the added experience and are sort of a little bit more on the road out... um others are sort of coming in to the shelter and at that point where they have just left;

so you sorta see yourself in that transition, and you sorta fit well into that transition... you don't feel alone, you don't feel abandoned, you don't feel like you are never gonna get out of here cause you see how other people have pulled themselves together and gotten out"

Continuity of Services

Women pointed out how important it is to be able to return to for services. For many women, leaving an abusive relationship is a process and the shelter assists them with that process. Whether it is returning to the residential program or returning for counselling/support services, women stressed the importance of continued relationships.

"Being given a lot of information on abuse, it was a starting point for me to make changes in my own life, positive changes. It took a while (laughs), but I like to think I'm half way there now" [quote from a woman who had been in shelter several times]

"I've learned so much, like I have gone back [to the abuser] and come into shelter but compared to the first time I'm so much more, like knowledgeable, and I kinda have, I know everything [about abuse] and that's enough now [referring to ending the relationship]"

"Knowing that if something happens[again] there is some place safe that you can go"

"Like being out of the shelter having [counsellor] come and meet with me every two weeks has been awesome because I wouldn't have gone to another counsellor"

"... and I come back once in a while to visit, have coffee, chat, or just keep up; or just say that I am having a problem, just to come in and talk to someone that's not a part of the family, not a friend, but somebody who is impartial that maybe can give me a different direction, give me an idea, different options, can point me in a different direction... you know cause sometimes you just don't think of something... cause you get stuck... its always good to get new input".

It can at times be very difficult for women to return to shelter and staff reactions, whether real or perceived, can impact services.

"[The second time in shelter] oh its like, you are here again? It's like you are a repeat offender, you know..."

Shelter Activities

Interviewee's often recommended that there be more activities for the women themselves while in shelter. Boredom and lack of activities was often mentioned as a drawback to living in shelter.

"Definitely in the first few days to 10 to 12 days I was here, I was thinking well its really not that bad [the relationship], its not as bad as being here... you get bored and check your messages and you hear his voice going well I love you where are you?... and I think that is the hard part, like if there was more stuff to do I'm not as likely to sit on the phone and check my messages and have the contact with him... what do you do during the 10, 12 hours of the day... sat there and did nothing for 12 hours a day."

Women suggested planned outings with staff (women felt safer in the community with staff present) and organized activities such as crafts, games, and self care activities. Women also recommended having books and magazines to read that aren't related to their life circumstance.

"There are lots of books but they are all anger management books and, self help books, and the troubled relationship, and its like I don't want to know about this stuff right now, I wanna go off into never never land... you know just escape..."

REGIONAL DIFFERENCES

Upon initial examination, it appeared that there were some regional differences in satisfaction. However, upon closer review it seemed that the differences may be due more to the size of the shelter than their location. Satisfaction with shelter services is generally higher in smaller shelters, declining as the shelters get larger. A main reason for this difference is that women report greater satisfaction when they have more control over their environment. Common themes, which are more frequently open to women staying in smaller shelters include; access to kitchen, freedom to go for a cigarette, freedom to step outside, input into chore lists, menu planning, and programming schedules, ability to have

other women watch their children, and options on rules and bed times for children. The larger the shelter, the more rules exist and less control women have over their environment. Although many women commented that they understood why rules were needed, they indicated that the rules still had negative consequences on them.

Client: *"I feel like I fell two steps back" [since coming to shelter]*

Interviewer. Why is that?

Client: *"Because you're not in your own, you're not in control, you're not with it"*

"Well you leave from a relationship where you're not allowed to do this, you're not allowed to do that, you're gonna get this, you're gonna get that, and then you go to another place where, its like OK I finally have the freedom now... you have no freedom."

"What I didn't like, was doors. Ok I know the outside ones need to be locked, but why the inside ones? Like I can see the office doors, where there is medication, yes I can see that, but the other doors? Like why? It makes me just feel like OK, there's got to be something wrong here... cause that's how we lived at home, our bedroom doors were locked... its not a good feeling". It is important to know that this client was able to speak to the counsellors at her shelter regarding her feelings and the shelter responded to her needs to make her feel more comfortable in the shelter. She said they were *"wonderful and very helpful"*.

One woman had been in a large urban shelter in another province before being transferred. She liked the smaller, rural shelter much better as it felt homier, had fewer rules, more freedom, more privacy, more comfort, more access to counsellors, and things weren't as rigid and scheduled.

" [Here] they do things when you are ready. Like in that other shelter you talk now, we scheduled it... this was so much nicer. I think you can look after yourself a lot better in an area like this."

Smaller shelters are also able to offer more personalized services such as more one to one time with staff, rides to appointments, assistance with moving and setting up a new residence, and assistance with daily tasks. This may also add to greater satisfaction with services.

Although the shelters in smaller communities have a higher satisfaction rate, it should also be noted that they also face a major challenge not as evidenced in larger centres. The smaller the community, the greater the chance that a woman will have personal or family ties with staff working in the shelter. One woman explained her hesitance to come into shelter because her sister-in-law (her husband's sister) worked there. Another woman in a different community also stated that a staff member at the shelter was related to her abuser. These women were very hesitant to come into shelter for any type of services and waited until the situation had escalated to a very dangerous level before seeking services. In both communities there were no other options for services relating to domestic violence. However, in both situations the women were satisfied with the services they received and the way the conflict of interest was handled.

"She (my sister-in-law) did not talk to him (the abuser) the whole time I was in shelter".

PERCEPTIONS OF WOMEN'S SHELTERS:

Although community agencies are aware of what Manitoba shelters offer, women who need the services still do not have a clear understanding of the breadth of services. The responses showed that many myths and misconceptions still exist regarding shelters. Unfortunately, these misconceptions result in women not using shelter services.

"If they [the police] explained it... or showed the picture [of the shelter]... its not what you think, I actually thought that they had plastic beds on the floor with a mat"

"I've know about shelters many years... my image of shelters was its a place to go when in the middle of the night when your husband is threatening to kill you and you have to go somewhere right now, and then the next day you find an alternative place. I never thought of it as being a place you stay for a period of time."

“Everybody had told me... they’re gonna confuse you and tell you what to do. No they didn’t tell me what to do, they let me make up my mind for myself.”

“When they first said I should go to [shelter] I thought oh, I don’t want to go to [shelter]. But now, I am happy that I came, I really am happy I came. ‘Cause I can see for myself what it really is... you don’t know at all [before you arrive].”

“It’s a lovely place to live, I can’t believe I’m lucky enough to have a place like this, I was expecting a dormitory with 40 bunk beds in it or something and I really didn’t know what to expect”

“What people had told me was don’t ever go to a shelter cause they tell you what to do, they, they’re not helpful, they just make up your mind for you you know and everything, but I talked to the RCMP and they said NO, its nothing like that, the shelter is a safe place for you to go”

Further, participants indicated that dispelling these myths may in fact lead to women entering shelter sooner and reducing their risk of violence.

“I think I probably would have found an opportunity to leave sooner, before things escalated as far as they did, just because I knew there was a place to go”.

“The first time [I came to shelter] I was very afraid... we were so new to Canada we were only here for 4 or 5 months and had to already come to the shelter so I was very afraid. In [my country] if you went into an institution the children would immediately be removed, so that was my biggest fear”

When suggesting how shelters could dispel some of the myths surrounding services, women said seeing pictures would have made a difference for them. Some respondents suggested pictures of the inside of the shelter on posters, brochures, pamphlets, and T.V. commercials.

“They have condom commercials, why don’t they have shelter commercials?”

CONCLUSION:

Women’s shelters make a difference in the lives of the most marginalized population of women. Providing a place of safety, security, and comfort is an important aspect in eliminating violence against women.

It appears we have done a decent job educating other professionals and agencies regarding the services offered but shelters are not adequately reaching the women who require our services. There are still too many myths and misconceptions regarding shelters by potential users of the services. Perhaps we need to begin to educate those that we are trying to serve.

Living in a women’s shelter is not an ideal situation for any woman or child. However, it seems that those who use the services are generally satisfied with what they are offered. Emergency shelter, counselling, and follow-up services assist many women to understand the dynamics of violence. The process of understanding violence should be recognized. Women often require more than one shelter stay and ongoing assistance to end the violence in their lives.

It seems that the term “women’s shelter” is a misnomer as there are often more children residing in women’s shelters than women. To date we have not adequately addressed this situation. Users of the shelters almost unilaterally requested improved services for their children. Child care, counselling, and schooling are all key to breaking the generational cycle of violence. Without improved services for children we cannot hope to break the cycle and improve the lives of future generations.

Shelters are an important and successful aspect in the fight to eliminate violence against women and children. Looking back, we can see the successes, looking forward we can see the challenges.

“Hope is like a road in the country: there never was a road, but when many people walk on it, the road comes into existence.”

- Lin Yutang



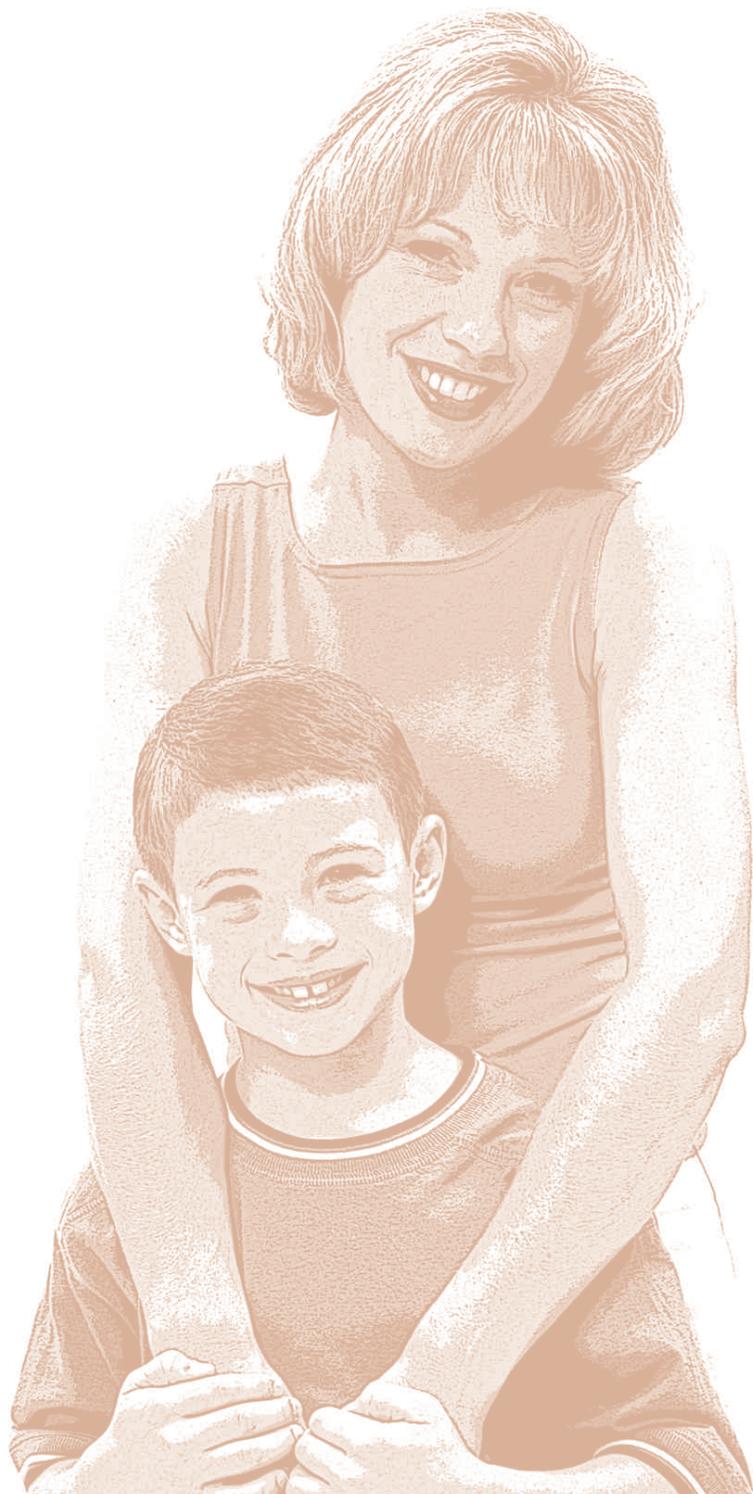
Appendix A

Community Survey

Please tell us a little about your organization.

1. What is your primary goal as an organization?
What types of services do you offer?
2. How many women and children do you serve in an average month?
3. What region of the province are you located in?
 Northern Eastman Westman
 Central Plains Pembina Valley Parkland
 Interlake Winnipeg
4. Are you located in the same community as the women's shelter in your region? Yes No
- 4a. If not approximately how far are you from your regional women's shelter? Within 10 km
 10-20 km 20-30 km 30-40km
 50 or more km Don't know how far.
5. Is there a charge for any of your services?
 Yes No
6. Are your services directed primarily at victims of family violence? Yes No
- 6a. Approximately what percentage of the women/children that you work with are victims of family violence? Less than 25% 25%
 -50 % Other 50% - 75%
 More than 75% Not Applicable
7. How often do you deal with a family violence situation? Daily Weekly Monthly
 Quarterly Yearly Other Not Applicable
8. What type of services do you offer for women/children who have been victims of family violence? Crisis response
 Counselling Advocacy Basic needs
 Assistance with justice system Referral
 Follow-up services Emergency housing
 Legal assistance Other
9. If you do not offer direct counselling services for victims of family violence do you refer the victims to other organizations for this service?
 Yes No
- 9a. If yes, where do you refer these clients for counselling/follow-up?
10. What types of abuse does your organization assist women with?
11. Have you referred a woman/child to a shelter service in the last six months? Yes No
- 11a. Why/why not?
12. How often have you referred to a shelter in the last six months? Once 2-5 times
 5-7 times 7-9 times more than 9 times
 None Not applicable Other
13. Prior to this survey what did you believe women's shelters offered for services?
14. What is your perception of the level of professionalism of the staff that work in women's shelters? What type of education and/or training do you believe the staff require to work in a shelter?

15. Are you aware of the non-residential program offered in shelters? Yes No
- 15a. If yes have you referred women to this service?
Yes No
- 15b. Why/why not?
16. Are you aware of the follow-up program offered by women's shelters? Yes No
- 16a. If yes have you referred women to this service?
Yes No
- 16b. Why/why not?
17. Are you aware of the public education program offered by women s shelters? Yes No
- 17a. If yes have you used this service/referred anyone to this service? Yes No
- 17b. Why/why not?
18. If you have not been referring women/children to shelter services what information do you need in order to feel confident referring clients to our services?
19. What information would be most useful for your organization to have regarding shelter services.
20. Do you feel that you have a good working relationship with the shelter(s) in your area?
What would be needed to improve this relationship?
21. Have you ever had a tour of your local shelter and been introduced to the staff? Yes No
- 21a. If no would you be interested in such a tour?
Yes No



Appendix B

Consent Forms

Intake and Exit Survey Consent

_____ is a member of the Manitoba Association of Women's Shelters (MAWS). MAWS has developed a Provincial recording system called the V.O.I.C.E.S. to Eliminate Violence System to survey women who access shelter services in Manitoba. We want to hear from the women who use shelters in Manitoba, so that we can better understand their needs. This will enable us to ensure that the services that we offer are helpful and appropriate.

In order to gather this information, we have developed data forms. Only the information on these forms will be part of the information collected. All other information that you share with shelter staff will NOT be part of the research. These forms are clearly marked with the V.O.I.C.E.S. name on each page. If you are unsure, please ask staff to show you the forms.

Please be aware that at any time, you can choose NOT to answer a question. Filling out these forms is the responsibility of shelter staff and no extra time will be asked of you to be a part of this.

_____ is the only shelter that will know your name. Your name will not be associated with this data in any way.

Your participation in this project is completely voluntary. If you choose not to participate, it will not affect the service you receive from this shelter in any way. If you have any questions at all, please feel free to talk to

_____.

Thank you for your participation in this very important project. Your needs are important to us.

I, _____ give my consent to have my and/or my children's information included in the V.O.I.C.E.S. System research.

I, _____ DO NOT give my consent to have my and/or my children's information included in the V.O.I.C.E.S. System research.

Signature

Date

Witness

Date

Interview Consent Form

This shelter is a member of the Manitoba Association of Women’s Shelters (MAWS). MAWS is currently conducting a survey with the residents of shelters in Manitoba in order to better understand the needs and expectations of the women staying in shelters and how shelters meet those needs.

Participation in this study involves answering some questions about your experiences while staying in shelter. This interview may be done in a group setting or one on one with the interviewer. This interview may be recorded in order to capture your ideas and comments fully.

Participation is completely voluntary. You may withdraw from the interview at any time. Interviews will be conducted by the MAWS Coordinator and none of your responses will be shared with the shelter staff. The final results of the interviews will be based on a large number of women staying in shelters all across Manitoba, so individual responses will not be identifiable.

Thank you for your participation in this very important research project.

Jennifer Hagedorn
MAWS Coordinator

I, _____ voluntarily consent to participate in the study described above.

Signature

Date

5a. If yes: (check all that apply)

Bruises/swelling Cuts lacerations Evidence of choking Missing hair
Burns Not Available Other _____

6. What types of abuse have you suffered in your life? (In all past and present relationships.)
(Check all that apply.)

Physical Financial Stalking/Harassment
Sexual Neglect Abuse/threats of abuse to pets
Psychological Verbal Abuse/threats of abuse to family or friends
Emotional Not Available Abuse/threats of abuse to children
Spiritual Other _____

7. Have you left this relationship before? Yes No Not Available

7a. If yes how many times: (check only one)

1 time 2-4 times Not Available 5-7 times 7+ times

8. Do you want/need a safe place to stay? Yes No Not Available

9. What is the highest grade you finished in school? (check only one)

Less than Grade 9 Grade 9 to 11 Grade 12 (with graduation)
Not Available

10. Have you had any formal education after high school? Yes No Not Available

10a. If yes, what is the highest level of education you have completed? (check only one)

High School Upgrading/GED Some post-secondary courses Post-secondary certificate
Post-secondary diploma University degree Not Available
Other _____

11. Are you a new immigrant to Canada (having arrived within the last five years)?

Yes No Not Available

11a. If yes, did you arrive in Canada as a refugee? Yes No Not Available

12. Do you identify yourself as an Aboriginal person? Yes No Not Available

(If yes please answer 12a and 12b and NOT question 13; If no, move on to question 13)

12a. If yes, which Aboriginal group do you primarily identify with? (please check only one)

First Nations Métis Inuit Not Available Other _____

12b. If Aboriginal, do you identify yourself as: (check one in each line)

Status Aboriginal Non status Aboriginal Not Available

AND

On reserve Off reserve Not Available

13. Which cultural group do you identify with? (check only one) (do not answer 13 if you answered question 12)

German Ukrainian Japanese Chinese Philippines
Polish British French Canadian Mennonite
Not Available None Other _____

14. What is your first language? (check only one)

English French Spanish Chinese Japanese
German Ukrainian Filipino Polish Not Available
First Nation Language (eg: Cree, Ojibway, Dene....etc.) Other _____

15. How often have you moved in the last 12 months not including coming to shelter. (check only one)

1 time 3 times 5 or more times
2 times 4 times Not available

16. Do you have a medical diagnosis of a physical illness/disability? (diagnosed by a doctor)

No (if No move onto question 17) Yes Not Available

16a. If yes: (check all that apply)

Diabetes Allergies Visual Heart disease
Hearing Mobility Asthma Speech
HIV/AIDS Epilepsy Hepatitis Other

17. Do you have a medical diagnosis of mental illness? (diagnosed by doctor)

Yes No Not Available

17a. If yes... (check all that apply)

Depression Anxiety related disorder Bi-polar Not Available
Schizophrenia Personality related disorder Other _____

18. Are you currently on medication? Yes No Not Available

18a. If yes: How many different medications: 1 2-3 4-6 more than 6

19. Have you ever been in treatment for alcohol/drug use? Yes No Not Available

19a. If yes.... how many times? 1 2 3 more than 3

20. Has police intervention been requested in the last six months for the abuse?

Yes No Not Available

21. Do you currently have a court order in place due to the abuse? Yes No Not Available

21b. If yes what type of court order do you have in place?

protection order prevention order not available other

22. Do you have criminal charges against you now? Yes No Not Available

23. What other agencies are currently involved with your family? (check all that apply)

CFS Social Assistance Counsellor Mental health Not Available
Police Women's Advocacy Victim Services Lawyer Other _____

24. What was your family's primary source of income in the past 12 months? (check all that apply)

Partner's employment Disability Insurance
Personal employment Pension
Partner & Personal Employment Disability Insurance
(dual income family) Not Available
Social Assistance Other
Employment Insurance Don't know
BandSponsorship/Assistance

25. What was the total before-tax family income (income from all adult family members living in your home) in the past 12 months? (check only one)

less than \$10,000 \$17,500 to \$19,999 \$27,500 to \$29,999
\$10,000 to \$12,499 \$20,000 to \$22,499 \$30,000 to \$32,499
\$12,500 to \$14,999 \$22,500 to \$24,999 \$32,500 to 34,999
\$15,000 to \$17,499 \$25,000 to \$27,499 \$35,000 or over
Don't know

26. Have you lost any income in the last year due to the abuse? Yes No Not Available

27. Have you had any children? Yes No Not Available

28. Are you currently responsible for the primary care of one or more children?

Yes No Not Available

28a. If yes, how many in the following age groups?

Children 0 to 6 years of age: _____ Children 7 to 12 years of age: _____
Children 13 to 17 years of age: _____

28b. Have your children been witness to the abuse? Yes No Not Available

29. What is the abuser's relationship to your children in the home? (check all that may apply)

Biological Parent Step parent Parental figure Other family Friend
Other _____ Not Available No children in the home

30. Which of the following best describes your family situation if you have children? (check only one)

Single-adult family Two-adult family Other _____ Doesn't apply

31. In total, how many individuals (both children and adults) live with you in your family?

Number of individuals: _____

32. Are you currently pregnant? Yes No Not Available

33. How did you learn about this shelter? (check only one)

Friend/family	Referred by another shelter:
Poster/brochure	o Agape House (Steinbach)
Police	o Aurora house (The Pas)
Police	o Genesis House (Winkler)
TV/Radio	o Ikwe (Wpg)
Internet	o Nova House (Selkirk)
Phone Book	o Osborne House (Wpg)
Crisis lines	o Parkland Crisis Centre (Dauphin)
Clergy	o Portage Women's shelter (Portage la Prairie)
Previous Shelter stay	o Thompson crisis centre (Thompson)
Not Available	o Westman Women's Shelter (Brandon)
Other _____	o Don't know which one
Referred by another agency	

35. Does the abuser have access to firearms? Yes No Not Available

36. Does the abuser have a vehicle? Yes No Not Available

37. Are you aware if the abuser has been abusive in past relationships?

Yes No Not Available

38. Does the abuser have addictions? Yes No Not Available

39. Have there been any charges laid against the abuser for the abuse in the last two years?

Yes No Not Available

Exit Surveys

First Name _____

Last Name _____

Date Out: _____/_____/_____
d/m/y

Time Out: AM PM

1. Topics covered/Services utilized: (check all that apply)

- | | |
|-------------------------------------|-----------------------------|
| Advocacy | Life skills |
| CAPC | Medical |
| Cell phones/911 Service | Parenting life skills |
| Child abuse report | Parenting skills |
| Child care | Phone service – 911 |
| Childhood issues | Power control wheel |
| Community Networking | Profile of an abuser |
| Cycle of violence | Protection planning |
| Educational Upgrading | Protection order |
| Effects on self | Referral |
| Effects on children | School Preparation for kids |
| Emotional Support | Security Systems |
| Field trips | Sexual abuse issues |
| Financial | Short term counselling |
| Group Counselling | Types of abuse |
| Healthy vs. Unhealthy relationships | Transportation |
| Healthy Sexuality | Tutoring |
| Housing | Not Available |
| Immigration issues | None |
| Individual Counselling | Other _____ |
| Job readiness | |
| Legal/lawyer | |

2. Did this client depart from shelter without preparing and/or informing staff? Yes No

If yes, the following fields are NOT required to be filled in.

3. Where are you going on departure? (check only one)

- | | | |
|------------------------|-----------------|---------------|
| Home to partner | Friends | Own Housing |
| Home – partner removed | Family | Other _____ |
| Second stage housing | Another shelter | Not Available |

4. How are you leaving the shelter? (check only one)
- | | |
|-------------------------------|---------------|
| Taxi | Bus |
| Pick up | Own vehicle |
| <input type="radio"/> Family | Not Available |
| <input type="radio"/> Friend | Other |
| <input type="radio"/> Partner | |
| <input type="radio"/> Other | |
5. Do you have a protection plan in place? Yes No Not Available
- 6a. Were your original goals met? (Those identified on the intake form)
- Yes No Not Available
- 6b. If no – who made the decision to leave shelter? Staff Self
- 6c. If staff made the decision for client to leave which of the following apply(check all that apply):
- | | |
|---------------------------------|-------------------------------------|
| Non-compliance of program rules | Requires services we cannot provide |
| Staff safety | Other _____ |
| This Client's safety | Not Available |
| Other client's safety | |
- 6d. Please mark those goals NOT attained that were identified on the original intake form (B1)
- To be in a safe place
- To find out what other kinds of help might be available
- Personal counselling support
- Find ways to become free of violence
- Connect with others who are going through the same thing
- Assistance with the justice system
- Longer term counselling support
- Find out about ways to help your partner stop the abuse.
- Find out ways to help your children
- Other _____
7. Is the client requesting follow-up services? Yes No Not Available

Appendix D

Interview Questions

Residential Clients Interview

1. What has been the most helpful thing that has happened to you in the last week?
2. What other things have been helpful
3. What has happened that has not been helpful
4. What could the shelter have offered that would have made your stay more helpful.
5. What kind of changes have you noticed in your mood over the last week
6. Has anything positive changed about your situation in the last week?
7. What is the most important thing for you to do in the next week?
8. How can the shelter assist you with this
9. The first time you came into shelter was it what you thought it would be?
10. How do we get the message out to the community about what a shelter really is?
11. Any other comments

Follow Up Clients Interview

1. What was the most helpful thing that happened when you were staying in shelter?
2. What other helpful things happened?
3. What was the least helpful thing that happened when you were staying in shelter?
4. What other things were not helpful?
5. What could the shelter have offered that would have made your stay more helpful?
6. How is the shelter helping you now?
7. What kinds of support/help do you need from the shelter now?
8. The first time you came into shelter was it what you thought it would be?
9. How do we get the message out to the community about what a shelter really is?
10. Any other comments

References

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Learning through

Our Clients' Eyes

THE MANITOBA EXPERIENCE

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