"We Matter and Our Voices Must be Heard"

This report aims to build our shared understanding of the violence that marginalized survivors experienced from the perpetrator of Nova Scotia's April 18 and 19 mass casualty events. Through these pages, we bring together insights from survivors' experiences, along with their recommendations for building safer communities in Nova Scotia.

Kristina Fifield, Avalon Sexual Assault Centre Kat Owens and Kienna Shkopich-Hunter, Women's Legal Education and Action Fund (LEAF)

Content Warning

This report will discuss information regarding violence from the perpetrator of the April 18 and 19th, 2020 mass casualty events on marginalized women in Nova Scotia. Please take good care in reading this report and refer to the details at the end of this report, if you have been impacted by or are currently experiencing gender-based violence and need support and services.

About the Report

This report will not provide details on specific trauma events, but rather provide the themes of gender-based violence perpetrated on marginalized individuals. This report will then turn to explore the reasons for and barriers to survivors reporting violence, gaps in services and the barriers to connecting with current services that exist for survivors of gender-based violence. This report will conclude with recommendations that are necessary for moving forward in addressing violence. These recommendations were created by marginalized survivors who attended our engagement meetings.

All information in this report has been shared with consent from survivors. Information and quotes have been anonymized to protect survivors' confidentiality and their safety. All quotes that appear in the report were taken from survivors and facilitators.

A Message to the Families Impacted by the April 18th and 19th N.S. Mass Casualty Events

Avalon Centre acknowledges that this report on gender-based violence may be difficult to hear for the families and loved ones most affected by the mass casualty events in our province. Avalon believes that these conversations are necessary for creating safer communities for all individuals in our province moving forward. Our thoughts and prayers continue to be with you all.

Message to Lisa Banfield and Family

Avalon Centre acknowledges that this report may provide information that was not known to Lisa Banfield and her family that may be difficult to hear. Avalon believes that the voices of marginalized individuals who also experienced violence from the perpetrator are crucial in the Commission's work. Our thoughts and prayers continue to be with you all.

Message to Survivors

Avalon Centre acknowledges that we were not able to reach all survivors and victims in our work. We also acknowledge there may be other survivors who are not ready to share but who have been impacted by the perpetrator's long history of violence. Please know that Avalon is here for you, when and if you need support and services. We are committed to working with individuals to ensure that no one is left alone in dealing with the trauma-related impacts of sexual violence. We believe you.

To all other survivors of sexual violence, we are also here for you. Please see the information regarding our services at the end of this report.

Our Coalition

Avalon Sexual Assault Centre

Avalon Centre aspires to a world in which individuals are empowered and mobilized to share responsibility in creating communities free from sexualized violence and abuse. Avalon Centre provides a leadership role in raising awareness, supporting those who have experienced sexualized violence, and influencing social and systemic change.

Using an anti-oppressive, intersectional feminist lens to analyze and respond to sexualized violence/abuse and other forms of violence and oppression, Avalon Centre offers a continuum of specialized services, with an emphasis on support, counselling, education, immediate medical care, forensic evaluation, navigation, leadership, and advocacy. Our services are available to those affected by all forms of sexualized violence/abuse, their families, the general public, and other support/service providers.

Wellness Within: An Organization for Health and Justice

Wellness Within (WW) is a registered non-profit organization that advocates for prison abolition and provides support to women, gender diverse, and trans individuals who have experienced criminalization and are pregnant or parenting young children in Nova Scotia. The group began working together in 2012 and we served our first incarcerated client in 2014. WW's 90+ members include formerly incarcerated people, doulas, healthcare providers, lawyers, students, researchers, and mentors. WW volunteers have security clearance to provide support at the Nova Institution for Women Federal Prison, the Central Nova Scotia Correctional Facility Provincial jail, the Nova Scotia Youth Facility, and the community. WW works in partnership with community and advocacy organizations across Nova Scotia. WW's mandate includes doula service, public and health professional education about the health impacts of incarceration, community-based research about health and incarceration, and political advocacy.

Women's Legal Education and Action Fund (LEAF)

The Women's Legal Education and Action Fund (LEAF) is a national not-for-profit that works to advance the equality rights of women, girls, trans, and non-binary people in Canada through litigation, law reform, and public legal education. Since 1985, LEAF has intervened in more than 100 cases that have helped shape the Canadian Charter of Rights and Freedoms. To find out more, visit www.leaf.ca.

Our Hopes

Avalon Centre, along with our fellow participant coalition members LEAF and Wellness Within, believes that the voices of survivors are crucial in the work of the Mass Casualty Commission. The voices of marginalized members of the community who were impacted by the perpetrator of the mass casualty events were voices that needed to be reflected in the work of the commission. By providing safe spaces for survivors from marginalized communities, we hope that this work will help inform the commission in writing its final report and recommendations.

Our coalition believes the that recommendations that come in the final report from the Mass Casualty Commission will provide opportunities for community-based organizations to have a future of adequate core funding. We hope that this information will also help the province implement reform to police, including de-tasking policing services with a focus on non-carceral approaches and interventions that are necessary in addressing gender-based violence and creating safer communities in our province.

Sharing Gratitude

My name is Kristina Fifield, and I am a Trauma Therapist at Avalon Sexual Assault Centre and the coauthor of this report with Kat Owens, Project Director at LEAF, and Kienna Shkopich-Hunter, Articling Student at LEAF. Sarah Macgillivray, Legal Advocacy Coordinator for Avalon, and I have been leading the work of Avalon's participation in the Mass Casualty Commission's Public Inquiry. I want to thank the Commission for accepting and approving Avalon's proposal. I have much gratitude for the Commission staff who helped coordinate the planning of these meetings. I would also like to acknowledge how all commission staff showed up at the community meetings with survivors. You have demonstrated trust in Avalon's knowledge and expertise as a community organization in leading this work.

Thank you for collaborating in creating safe spaces for survivors to have their voices heard. It is crucial these voices play a vital role in informing the path forward.

A very special thank you to my colleague Shi Gordon, Avalon's Community Navigator. Her established trust with marginalized survivors was the only way this work and engagement with survivors was possible. Shi's presence and work on the ground in communities have created new pathways for marginalized individuals to engage with services at Avalon Centre. Her work is crucial to providing services to racialized and marginalized communities. Shi, I want to personally thank you for how you show up in your work at Avalon and for the communities you serve. I have so much gratitude for you allowing me to be a part of your work. You are a leader in demonstrating how to better serve our marginalized communities. Avalon is so lucky to have you.

Context: Experiences of and Responses to Gender-based Violence for Marginalized Community Members

Multiple and intersecting forms of oppression affect the prevalence of gender-based violence as well as an individual's unique experience of gender-based violence. For members of marginalized communities, including African Nova Scotian and Indigenous communities, there are many reasons why it can be unsafe to come forward and engage with formal institutions and services. As a result, it is critical that we create safe spaces for survivors to come forward. These spaces must be survivor-led, happen in community, and involve community members and community-based organizations.

Gender-based violence against members of African Nova Scotian and Indigenous communities

African Nova Scotian and Indigenous women, girls, and non-binary people face high rates of gender-based violence because of factors including but not limited to colonialism, racism, sexism, homophobia, and transphobia. Intersecting systems of oppression flowing from disability, economic marginalization, criminalization, and rural location can further increase a person's risk of facing gender-based violence. They also affect each individual's experience of and response to gender-based violence. In addition, power, privilege, and silencing create conditions where gender-based violence can occur unchecked.

Gender-based violence against members of African Nova Scotian communities

African Nova Scotians face systemic racism flowing from the history of enslavement, as well as past and ongoing racial segregation and oppression. This systemic racism can be seen in many different examples, including the Nova Scotia Home for Coloured Children, gentrification and the displacement of African Nova Scotians, and mass policing and incarceration of African Nova Scotians. Systemic racism can lead to higher poverty rates, lower educational outcomes, increased criminalization, the removal of children into care, and a lack of housing – all of which make a person more vulnerable to experiencing violence.¹

There is a lack of disaggregated data available regarding gender-based violence experienced by African Nova Scotian women, girls, and non-binary people. Canada-wide data, however, reflects that Black women in Canada face high levels of gender-based violence. According to self-reported data from 2018, 42% of Black women in Canada had experienced intimate partner violence since the age of 15.² Approximately 41% had experienced physical or sexual assaults during their lifetime.³

Gender-based violence against members of Indigenous communities

Indigenous women, girls, and 2SLGBTQQIA+ people in Canada face staggering rates of violence stemming from past and ongoing colonialism, racism, marginalization, and neglect. Approximately 63% of Indigenous women in Canada and 64% of Indigenous women in the Atlantic provinces report having

¹ See the discussion in *African Nova Scotian Perspectives on Sexual Violence* (Province of Nova Scotia: Nova Scotia, 2020) at 14-16, 24, online (pdf): *Supporting Survivors of Sexual Violence* < https://nscs.learnridge.com/wp-content/uploads/2018/12/ANS-Perspectives-on-Sexual-Violence.pdf>.

² Adam Cotter, "Intimate partner violence: Experiences of visible minority women in Canada, 2018" (2021) Juristat at 5, online (pdf): *Statistics Canada* < https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2021001/article/00008-eng.pdf?st=lcAf76bM>.

³ *Ibid* at 8.

experienced physical or sexual assault during their lifetimes.⁴ While Indigenous women make up only 5% of women in Canada, between 2014 and 2019 they accounted for 21% of women killed by an intimate partner.⁵ Almost 17% of Indigenous women self-reported having experienced a form of intimate partner violence, compared to 12% of non-Indigenous women.⁶

Indigenous women, girls, and 2SLGBTQQIA+ people also face high levels of sexual violence. Approximately 43% of Indigenous women self-reported that they had been sexually assaulted at least once since the age of 15, compared to approximately 30% of non-Indigenous women.⁷ About 65% of Indigenous people who are lesbian, gay, bisexual, or a sexual orientation that is not heterosexual (LGB+) reported having experienced a sexual assault since the age of 15, compared to 37% of non-Indigenous LGB+ people.⁸

Impact of additional intersecting systems of oppression

Members of African Nova Scotian and Indigenous communities may face additional intersecting systems of oppression, which in turn affect their risk of facing gender-based violence and how they experience and respond to it. This is the case for people with disabilities, those who face economic marginalization, those who live in rural areas, and those who experience criminalization.

African Nova Scotian and Indigenous women with disabilities are likely to face significantly higher rates of violence than women who do not have disabilities. Data from 2014 show that women with disabilities were twice as likely to be a victim of violent crime, and twice as likely to have been sexually assaulted in the 12 months preceding the survey. Approximately 23% of women with a disability had experienced intimate partner abuse in the five years preceding the survey, twice the rate of women without a disability. Women with disabilities who are lesbian, gay, or bisexual report experiencing violence at a rate twice as much as that of heterosexual women with disabilities. 11

⁴ Loanna Heidinger, "Violent victimization and perceptions of safety: Experiences of First Nations, Métis and Inuit women in Canada" (2022), Juristat at 3, 25, online (pdf): *Statistics Canada*

https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2022001/article/00004-eng.pdf?st=z8cwS9as>.

⁵ Government of Canada, "What is gender-based violence?" (7 February 2022), online: *Women Gender Equality Canada* https://women-gender-equality.canada.ca/en/gender-based-violence-knowledge-centre/about-gender-based-violence.html#chronology.

⁶ Ibid.

⁷ Ibid.

⁸ *Ibid*. They are also more likely to have experienced physical violence, with 73% having experienced a physical assault since the age of 15.

⁹ Adam Cotter, "Violent victimization of women with disabilities, 2014" (2018) Juristat at 3, online (pdf): *Statistics Canada* https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2018001/article/54910-eng.pdf?st=oDz3JQoa.

¹⁰ *Ibid*. For this survey, intimate partner violence included "emotional, financial, physical or sexual violence or abuse committed by a current or former partner".

¹¹ D Lalonde and L Baker, "Women with Disabilities and d/Deaf women, housing, and violence" (2019) 27 Learning Network at 3, online (pdf): *Learning Network* https://www.vawlearningnetwork.ca/ourwork/issuebased newsletters/issue-27/Newsletter Issue 27-Final-Online 1.pdf>.

Economic marginalization plays a role in the likelihood a person has experienced violence. For example, approximately 57% of women with a 2018 household income of less than \$20,000 had experienced intimate partner violence during their lifetimes.¹²

Low-income status can also contribute to situations of vulnerability and power imbalance, which can increase the risk of violence or make it more difficult for a person to leave a violent relationship. For example, escaping a violent or unsafe situation may mean losing one's housing. A recent study found that 47% of surveyed women and gender-diverse people experiencing homelessness and housing precarity in Canada had lost their most recent housing following the end of a relationship. Housing insecurity, in turn, can increase the risk of experiencing violence for women who find themselves isolated and without supports.

African Nova Scotian and Indigenous women and girls living in rural areas are also likely to experience higher rates of gender-based violence. In Canadian provinces, women and girls in rural areas face twice the rate of family violence compared to those living in urban areas, and 1.4 times the rate of non-family violence. They also experience intimate partner violence at a rate 1.8 times that of women and girls living in urban areas. In

African Nova Scotians and Indigenous women, girls, and non-binary people who are criminalized face increased risk of experiencing gender-based violence. Recent research involving Black women who had been criminalized in Toronto found that 93% of participants had experienced physical abuse from their partners. The criminalization of sex work in Canada perpetuates stigma against sex workers, undermines their rights to legal protections from violence, and encourages labour conditions that increase the risk of violence.

¹² Adam Cotter, "Intimate partner violence in Canada, 2018: An overview" (2021) Juristat at 9, online (pdf): *Statistics Canada* < https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2021001/article/00003-eng.pdf?st=1PbwT9TE>.

¹³ Kaitlin Schwan et al, *The Pan-Canadian Women's Housing & Homelessness Survey* (Toronto: Canadian Observatory on Homelessness, 2021) at 36, online (pdf): *Women's National Housing & Homelessness Network* https://womenshomelessness.ca/wp-content/uploads/EN-Pan-Canadian-Womens-Housing-Homelessness-Survey-FINAL-28-Sept-2021.pdf.

¹⁴ D Lalonde and L Baker, "Women with Disabilities and d/Deaf women, housing, and violence" (2019) 27 Learning Network at 1, online (pdf): *Learning Network* < https://www.vawlearningnetwork.ca/ourwork/issuebased newsletters/issue-27/Newsletter Issue 27-Final-Online 1.pdf>.

¹⁵ Shana Conroy, "Family violence in Canada: A statistical profile, 2019" (2021) Juristat at 7, online (pdf): *Statistics Canada* < https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2021001/article/00001-eng.pdf?st=zfO71wf8>. The report defines family violence as "violence committed by spouses (legally married, separated, divorced and common-law), parents (biological, step, adoptive and foster), children (biological, step, adopted and foster), siblings (biological, step, half, adopted and foster) and extended family members (e.g., grandparents, uncles, aunts, cousins and in-laws)": Conroy, at 4.

¹⁶ *Ibid* at 31.

¹⁷ Patrina Duhaney, "Criminalized Black Women's Experiences of Intimate Partner Violence in Canada" (2022) 28:11 Violence Against Women 2765 at 2771-2772 (14 out of 15 study participants).

¹⁸ Elena Argento et al, *Harms of End-Demand Criminalization: Impact of Canada's PCEPA Laws on Sex Workers'* Safety, Health & Human Rights (Vancouver: Centre for Gender and Sexual Health Equity, 2019) at 9, online (pdf): Centre for Gender & Sexual Health Equity

https://www.cgshe.ca/app/uploads/2019/12/Harms 2019.12.16.v1.pdf>.

The role of power, privilege, and silencing

Power, privilege, and silencing play a significant role in experiences of and responses to gender-based violence, creating conditions where gender-based violence can occur unchecked.

Power and privilege enable individuals to perpetrate violence, often over lengthy periods of time and with minimal to no accountability. Privilege flows from many different systems, including white supremacy and patriarchy. Individuals who are able-bodied, heterosexual, educated, and have high incomes and/or wealth benefit from privilege. Privilege can also stem from positions of authority, including within the workplace.

There are numerous examples of individuals in positions of power who have committed acts of gender-based violence, often over extended time periods and against multiple different people. Harvey Weinstein, for example, was accused of widespread sexual misconduct spanning decades and convicted in 2020 of sexual offences against two women.¹⁹ More than 260 women and girls have come forward to say they were assaulted by former Michigan State and USA Gymnastics doctor Larry Nasser, who was convicted of numerous sexual offences.²⁰

Examples can also be seen in Nova Scotia. For example, a former prison guard pleaded guilty to charges of sexual assault and breach of trust for offences committed against three women who were inmates at the Nova Institution for Women in Truro.²¹ A former massage therapist pleaded guilty to sexually assaulting four female clients during therapy appointments between 2013 and 2019.²²

Non-disclosure agreements (NDAs) can exacerbate the effects of power and privilege by silencing survivors of gender-based violence. Hockey Canada, for example, is reported to have paid out over \$7.6 million in settlements following claims of sexual assault, with some of those settlements containing NDAs preventing claimants from speaking about their experiences.²³ NDAs prevent survivors from speaking to their own family and friends about their experience, and from warning other people about potential harm. They can create barriers for those looking to speak about gender-based violence or other abuse in the workplace. They can also allow perpetrators of gender-based violence to continue in

¹⁹ Jessica Wong, "Harvey Weinstein back in court for sentencing over rape, sexual assault" (11 March 2020), online: *CBC News*https://www.cbc.ca/news/entertainment/weinstein-trial-sentencing-1.5486607>. See also Jodi Kantor and Megan Twohey, "Harvey Weinstein Paid Off Sexual Harassment Accusers for Decades" (5 October 2017), online: *The New York Times* https://www.nytimes.com/2017/10/05/us/harvey-weinstein-harassment-allegations.html>.

²⁰ David Eggert, "Larry Nassar sentenced for 3rd, final time in sex abuse case" (5 February 2018), online: *CBC News* https://www.cbc.ca/sports/olympics/summer/gymnastics/larry-nassar-final-sentencing-1.4519967.

²¹ Jane Sponagle, "Former prison guard sentenced for sexually assaulting inmates in Truro" (23 August 2022), online: *CBC News* < https://www.cbc.ca/news/canada/nova-scotia/former-correctional-officer-sentenced-three-years-sexual-assault-1.6559727.

²² Alex Cooke, "Former N.S. massage therapist gets 6 years in prison for sexually assaulting 4 clients" (25 July 2022), online: *Global News* < https://globalnews.ca/news/9013646/former-n-s-massage-therapist-gets-6-years-in-prison-for-sexually-assaulting-4-clients/.

²³ Tom Yun, "Advocates say use of NDAs should be banned in sexual misconduct settlements" (18 August 2022), online: *CTV News* < https://www.ctvnews.ca/canada/advocates-say-use-of-ndas-should-be-banned-in-sexual-misconduct-settlements-1.6032371>.

their current role within an organization, or to move to a new organization unaware of past abusive or violent behaviour.²⁴

Why it is unsafe to come forward

Members of marginalized communities, including African Nova Scotian and Indigenous communities, lack safe spaces where they can come forward and talk about their experiences of gender-based violence. For many reasons, it can be unsafe for them to engage with formal institutions and services. These reasons differ depending on the community or communities involved, as well as the type of formal institution or service. While many of the examples cited below refer to engagement with law enforcement, members of marginalized communities also face potential harm when interacting with a wide variety of formal institutions and services, including courts, inquests, commissions of inquiry, and gender-based violence services.

Institutional betrayal and secondary victimization

Broadly speaking, the risk of institutional betrayal is a significant factor making it unsafe for members of marginalized communities to engage with formal institutions. Institutional betrayal involves acts of wrongdoing carried out by an institution against an individual or group of individuals who trust or rely on the institution.²⁵ The result is that, when a survivor trusts an institution and turns to it for help or protection, the institution does not provide that assistance or support.²⁶ Acts of institutional betrayal may represent isolated failings or reflect broader systemic issues.²⁷

Institutional betrayal may involve deliberate acts by an institution.²⁸ For example, formal institutions have perpetuated, and continue to perpetuate, acts of violence and oppression against marginalized communities. African Nova Scotians have faced violence, racism, and significant over-policing.²⁹ Canadian police services, such as the Royal Canadian Mounted Police (RCMP), have historically participated in the marginalization and brutalization of Indigenous people. Police services continue to inflict violence on Indigenous people and communities.³⁰ Law enforcement officers have also physically and sexually assaulted sex workers.³¹

²⁴ "Can't Buy My Silence" (2022), online: Can't Buy My Silence https://www.cantbuymysilence.com/>.

²⁵ Carly P Smith, Jennifer M Gomez, and Jennifer J Freyd, "The Psychology of Judicial Betrayal" (2014) 19 Roger Williams University Law Review 451 at 459.

²⁶ Alec M Smidt and Jennifer J Freyd, "Government-mandated institutional betrayal" (2018) 19:5 Journal of Trauma & Dissociation 491 at 491-492. See also Emily Suski, "Institutional Betrayals as Sex Discrimination" (2022) 107:4 lowa Law Review 1685 at 1688-1689.

²⁷ Carly P Smith, Jennifer M Gomez, and Jennifer J Freyd, "The Psychology of Judicial Betrayal" (2014) 19 Roger Williams University Law Review 451 at 459.

²⁸ Ibid.

²⁹ Jessica Bundy, "'We'll Deal with it Later': African Nova Scotian Women's Perceptions and Experiences of the Police" (2019) 44:4 Canadian Journal of Sociology 319 at 322-323.

³⁰ Beatrice Britneff, "Disturbing police violence against Indigenous people will be investigated: Trudeau" (5 June 2021), online: *Global News* < https://globalnews.ca/news/7030052/miller-outraged-police-violence-indigenous-people/>.

³¹ Sandra Ka Hon Chu, Jenn Clamen, and Tara Santini, *The Perils of "Protection": Sex Workers' Experiences of Law Enforcement in Ontario* (Toronto: Canadian HIV/AIDS Legal Network, 2019) at 41, online (pdf): *Action Canada for Health and Sexual Rights* https://www.actioncanadashr.org/sites/default/files/2019-04/2807 HIVLegalNetwork SexWorkerDocumentation Report English Final.pdf>.

Those who try to engage with institutions often face victim blaming. Indigenous women have shared that their past attempts to report violence to the police have been met with skepticism and racism from police officers. For example, many women reported "experiences of being seen as a criminal, being blamed, being seen as not a victim, causing it on themselves." Sex workers have reported experiencing victim-blaming when reporting violence to law enforcement. 33

Credibility discounting also causes significant harm to members of marginalized communities. This term refers to the actions, judgements and more that are utilized to minimize the credibility of another person. They are often weaponized to silence people who are marginalized, and who lack power in certain situations.³⁴ Credibility discounting silences these people when they speak up or take actions to defend their rights. The people who most often experience credibility discounting are women, racialized people, Indigenous people, and 2SLGBTQQIA+ people. Credibility discounting is gendered, intersectional and can take many forms.³⁵

Individuals in a position of power might use credibility discounting to minimize or erase the experience of a victim who comes forward with an allegation of gender-based violence.³⁶ Credibility discounting can involve any challenge to a victim's character, motivations, memory of an event and more. It can look like dismissing a victim's experience as a "he said, she said" situation with little chance of success.³⁷

Institutional betrayal may also involve failures to act.³⁸ Police have been unwilling to investigate violence against Indigenous women, girls and 2SLGBTQQIA+ people. This unwillingness has created distrust in the police and "sent the message that the police are indifferent to such violence." Sex workers often experience a lack of urgency and caring in police responses following reports of violence that they or other sex workers have faced.⁴⁰

Institutions may fail to understand the lived experiences of marginalized communities, and the impact of forms of oppression including colonialism, racism, ableism, and sexism. As a result, these institutions cannot offer culturally safe responses. For example, police have historically been uneducated on their

³² National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 629, online (pdf): *MMIWG Inquiry* < https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

³³ Sandra Ka Hon Chu, Jenn Clamen, and Tara Santini, *The Perils of "Protection": Sex Workers' Experiences of Law Enforcement in Ontario* (Toronto: Canadian HIV/AIDS Legal Network, 2019) at 51-53, online (pdf): *Action Canada for Health and Sexual Rights* https://www.actioncanadashr.org/sites/default/files/2019-04/2807 HIVLegalNetwork SexWorkerDocumentation Report English Final.pdf>.

³⁴ Deborah Tuerkheimer, Credible: Why we Doubt Accusers and Protect Abusers (New York: Harper Collins, 2021) at 9.

³⁵ Ibid.

³⁶ *Ibid* at 10.

³⁷ *Ibid*.

³⁸ Carly P Smith, Jennifer M Gomez, and Jennifer J Freyd, "The Psychology of Judicial Betrayal" (2014) 19 Roger Williams University Law Review 451 at 459.

³⁹ National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 630, online (pdf): *MMIWG Inquiry* < https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

⁴⁰ Sandra Ka Hon Chu, Jenn Clamen, and Tara Santini, *The Perils of "Protection": Sex Workers' Experiences of Law Enforcement in Ontario* (Toronto: Canadian HIV/AIDS Legal Network, 2019) at 51-53, online (pdf): *Action Canada for Health and Sexual Rights* https://www.actioncanadashr.org/sites/default/files/2019-04/2807 HIVLegalNetwork SexWorkerDocumentation Report English Final.pdf>.

institution's complex relationship with Indigenous peoples. Many police officers do not acknowledge intergenerational trauma. Knowing that police officers lack this understanding, Indigenous survivors often feel reluctant to trust police and/or report the crimes and violence they experience, for fear that the officers taking their statement will not understand the context in which the event occurred as well as the survivor's unique experience.⁴¹

Many institutions have failed to take significant steps to remove barriers to access, including for people with disabilities. Women with disabilities, for example, can face barriers accessing legal systems and institutions after experiencing gender-based violence. Complicated systems can be difficult for women with intellectual disabilities to navigate. Accessing services can be challenging as well, as many women with disabilities face barriers to leaving their homes, a lack of accessible transit, and ineffective internet and cell phone connections.

The costs of institutional betrayal can be incredibly high for survivors. Secondary victimization, also known as secondary wounding, occurs when an individual or institution responds to a survivor of gender-based violence "with disbelief, denial, minimization, stigmatization, or refusal of help". 44 These types of responses compound and exacerbate the initial trauma. 45 They can worsen post-traumatic stress symptoms, and cause survivors to feel increased anger, guilt, and helplessness. 46 To avoid secondary victimization, survivors may feel it is safer not to engage with institutions.

In addition, how an institution interacts with members of marginalized communities has impacts beyond the specific individual engaging with the institution. In rural Nova Scotia, for example, African Nova Scotian women have expressed negative perceptions of police grounded in the negative experiences of the African Nova Scotian men and boys in their lives. They did not feel the police protected them, and did not trust police.⁴⁷ Many Indigenous people in Canada recall watching the negative interactions their parents and grandparents have had with police in the past when attempting to report a crime. This in

⁴¹ National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 631, online (pdf): *MMIWG Inquiry* < https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

⁴² Not Without Us: What We Heard, A Report about Changing the Response for Women with Disabilities Experiencing Domestic Violence (Nova Scotia: Easter Seals, 2020) at 14, online (pdf): Easter Seals Nova Scotia https://www.easterseals.ns.ca/wp-content/uploads/2020/11/Not-Without-Us-Final-Report.pdf.

⁴³ *Ibid* at 14, 17-18.

⁴⁴ Louise McOrmond-Plummer, "Preventing Secondary Wounding by Misconception: What Professionals Really Need to Know About Intimate Partner Sexual Violence" in Louise McOrmond-Plummer, Patricia Easteal AM, and Jennifer Y. Levy-Peck, eds, *Intimate Partner Sexual Violence: A Multidisciplinary Guide to Improving Services and Support for Survivors of Rape and Abuse* (London: Jessica Kingsley Publishers, 2014) 30 at 30. See also Aphrodite Matsakis, "Key Information about Secondary Wounding" (no date), online (pdf): *Aphrodite Matsakis* http://huvu.matsakis.com/articles/Key%20Info%20about%20Secondary%20Wounding.pdf.

⁴⁵ Louise McOrmond-Plummer, "Preventing Secondary Wounding by Misconception: What Professionals Really Need to Know About Intimate Partner Sexual Violence" in Louise McOrmond-Plummer, Patricia Easteal AM, and Jennifer Y. Levy-Peck, eds, *Intimate Partner Sexual Violence: A Multidisciplinary Guide to Improving Services and Support for Survivors of Rape and Abuse* (London: Jessica Kingsley Publishers, 2014) 30 at 30.

⁴⁶ Anna Gekoski, Joanna R Adler, and Jacqueline M Gray, "Interviewing women bereaved by homicide: Reports of secondary victimization by the criminal justice system" (2013) International Review of Victimology 1 at 2.

⁴⁷ Jessica Bundy, "'We'll Deal with it Later': African Nova Scotian Women's Perceptions and Experiences of the Police" (2019) 44:4 Canadian Journal of Sociology 319 at 332.

turn affects the trust they have that the police will take their report of experiencing violence seriously in the future.⁴⁸

The normalization of gender-based violence

The normalization of gender-based violence takes place in all communities, across institutions, and within services. It involves cultural beliefs and values that treat gender-based violence as a normal or unremarkable part of relationships. This normalization both increases the rates of gender-based violence and decreases the ability to recognize and respond to that violence.⁴⁹ When violence is normalized, those who experience or witness it may not question it or may remain silent about it.⁵⁰

In some cases, this normalization of violence is exacerbated by harmful stereotypes. For example, the stereotype of the "strong Black woman" can act as a barrier to reaching out for help. This stereotype minimizes and undermines experiences of trauma experienced by Black women, and pushes them to sacrifice their own needs for those of others. ⁵¹ African Nova Scotians who have experienced violence may fear reinforcing negative stereotypes about their community, particularly if the harm has been caused by a member of the African Nova Scotian community. They may fear that their community will shun them if they engage with formal authorities. ⁵²

It is critical to note, however, that the normalization of violence does not mean that men within these communities are inherently violent, or that women, trans, and non-binary members are passive victims. Rather, structural forms of oppression including colonialism and racism lead to violence being normalized. In the case of Indigenous women, "'[h]iding' family violence may be a response to the very public violence of racism and ongoing colonialism, and its profound effects on individuals, families and communities."⁵³ In African Nova Scotian communities, the "code of silence" surrounding violence is a

⁴⁸ National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 629, online (pdf): *MMIWG Inquiry* < https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

⁴⁹ Maddalena Rodelli et al, "Conceptual Development and Content Validation of a Multicultural Instrument to Assess the Normalization of Gender-Based Violence Against Women" (2021) 26 Sexuality & Culture 26 at 27.

⁵⁰ Cindy Holmes and Sarah Hunt, *Indigenous Communities and Family Violence: Changing the conversation* (Prince George, British Columbia: National Collaborating Centre for Aboriginal Health, 2017) at 29, online (pdf): *National Collaborating Centre for Aboriginal Health* https://www.nccih.ca/docs/emerging/RPT-FamilyViolence-Holmes-Hunt-EN.pdf.

⁵¹ Ingrid Waldron, Eileigh Storey-MacDougall, and Lori E. Weeks, "Hear My Cry: Breaking the Code of Silence around Intimate Partner Violence among Black Women in and beyond Midlife" (2021) 42.1 Atlantis: Critical Studies in Gender, Culture & Social Justice 18 at 21.

⁵² See the discussion in *African Nova Scotian Perspectives on Sexual Violence* (Province of Nova Scotia: Nova Scotia, 2020) at 21, 29, online (pdf): *Supporting Survivors of Sexual Violence* < https://nscs.learnridge.com/wp-content/uploads/2018/12/ANS-Perspectives-on-Sexual-Violence.pdf>.

⁵³ Cindy Holmes and Sarah Hunt, *Indigenous Communities and Family Violence: Changing the conversation* (Prince George, British Columbia: National Collaborating Centre for Aboriginal Health, 2017) at 29, online (pdf): *National Collaborating Centre for Aboriginal Health* https://www.nccih.ca/docs/emerging/RPT-FamilyViolence-Holmes-Hunt-EN.pdf.

legacy of historic and ongoing racism, the failure of legal systems to protect African Nova Scotian communities, and police violence.⁵⁴

Risks of criminalization and other forms of state harm

For many members of marginalized communities, engaging with formal institutions presents serious risks related to criminalization, immigration detention, deportation, and involvement with the child welfare system.

Indigenous and African Nova Scotian survivors may be reluctant to report violence for fear that they may be criminally charged or arrested. Police may assume that they were involved in criminal activity. There is also a fear of excessive use of police force during an arrest.⁵⁵ Indigenous women have faced arrest when they reported domestic violence. They might be concerned that they themselves will be charged with domestic violence for defending themselves.⁵⁶

Fear of arrest is very relevant to women engaged in sex work.⁵⁷ Indigenous women involved in sex work, for example, might be concerned that they will not be taken seriously, that they themselves will be charged and/or arrested, and that they will be subject to racist abuse in the process.⁵⁸ While racialized sex workers face different experiences of over-policing and under-protection depending on different intersecting forms of oppression, they commonly experienced law enforcement as "a source of repression rather than protection."⁵⁹

For members of im/migrant communities, the threat of immigration detention or deportation is a significant risk when engaging with formal institutions. Im/migrant sex workers may not report violence

⁵⁷ Elena Argento et al, Harms of End-Demand Criminalization: Impact of Canada's PCEPA Laws on Sex Workers' Safety, Health & Human Rights (Vancouver: Centre for Gender and Sexual Health Equity, 2019) at 10, online (pdf): Centre for Gender & Sexual Health Equity

⁵⁴ See the discussion in *African Nova Scotian Perspectives on Sexual Violence* (Province of Nova Scotia: Nova Scotia, 2020) at 21, online (pdf): *Supporting Survivors of Sexual Violence* < https://nscs.learnridge.com/wp-content/uploads/2018/12/ANS-Perspectives-on-Sexual-Violence.pdf>.

⁵⁵ National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 632, online (pdf): *MMIWG Inquiry* < https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

⁵⁶ *Ibid* at 634.

https://www.cgshe.ca/app/uploads/2019/12/Harms 2019.12.16.v1.pdf>; Sandra Ka Hon Chu, Jenn Clamen, and Tara Santini, *The Perils of "Protection": Sex Workers' Experiences of Law Enforcement in Ontario* (Toronto: Canadian HIV/AIDS Legal Network, 2019) at 47-48, online (pdf): *Action Canada for Health and Sexual Rights* https://www.actioncanadashr.org/sites/default/files/2019-

^{04/2807} HIVLegalNetwork SexWorkerDocumentation Report English Final.pdf>.

⁵⁸ National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 633, online (pdf): *MMIWG Inquiry* https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

⁵⁹ Sandra Ka Hon Chu, Jenn Clamen, and Tara Santini, *The Perils of "Protection": Sex Workers' Experiences of Law Enforcement in Ontario* (Toronto: Canadian HIV/AIDS Legal Network, 2019) at 28, online (pdf): *Action Canada for Health and Sexual Rights* https://www.actioncanadashr.org/sites/default/files/2019-04/2807 HIVLegalNetwork SexWorkerDocumentation Report English Final.pdf>.

to police to avoid that risk.⁶⁰ Im/migrant women with disabilities may also fear losing their immigration status if they disclose their experience of violence and that they have a disability.⁶¹

Indigenous and African Nova Scotian women can be hesitant to report crimes to police because they might be worried that police will involve child protection services and they will lose their children. Indigenous women have shared that police asked them irrelevant questions about their children while they attempted to report violence they experienced.⁶²

The need for safe spaces

It is critical that members of marginalized communities, including African Nova Scotian and Indigenous communities, have safe and accessible avenues for reporting their experiences of gender-based violence. Given the harms associated with formal institutions, engagement processes must be survivor-led, take place in community, and involve community organizations that reflect the populations they serve.

In creating spaces for survivors to feel safe coming forward, representation matters. To build trust and create safety, survivors need to see themselves reflected in the institutions and services available to them.

This is particularly true given the amount of violence that has been perpetrated by white people and historically white institutions against African Nova Scotian and Indigenous communities. In part because of the way the colonial state has treated Indigenous nations, their communities tend to be wary of trusting outside sources with information.⁶³ In addition, more remote communities might be close knit and more dependent on family networks. Community members might be reluctant to share information about their experiences or the incidents in their community with strangers.⁶⁴

African Nova Scotians do not have sufficient representation in different public institutions, making it harder to trust and engage with those institutions. ⁶⁵ They may be reluctant to share their experiences

⁶⁰ *Ibid* at 47-48; Elena Argento et al, *Harms of End-Demand Criminalization: Impact of Canada's PCEPA Laws on Sex Workers' Safety, Health & Human Rights* (Vancouver: Centre for Gender and Sexual Health Equity, 2019) at 10, online (pdf): *Centre for Gender & Sexual Health Equity*

https://www.cgshe.ca/app/uploads/2019/12/Harms 2019.12.16.v1.pdf>.

⁶¹ D Lalonde and L Baker, "Women with Disabilities and d/Deaf women, housing, and violence" (2019) 27 Learning Network at 4, online (pdf): *Learning Network* < https://www.vawlearningnetwork.ca/our-work/issuebased newsletters/issue-27/Newsletter Issue 27-Final-Online 1.pdf>.

⁶² National Inquiry into Missing and Murdered Indigenous Women and Girls, "Reclaiming Power and Place, Final Report Volume 1a" (2019) at 632, online (pdf): *MMIWG Inquiry* < https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Final Report Vol 1a-1.pdf>.

⁶³ Department of Justice Canada, "State of the Criminal Justice System: Focus on Women" (2020) at 28, online (pdf): *Department of Justice Canada* https://www.justice.gc.ca/eng/cj-jp/state-etat/2021rpt-rap2021/pdf/SOCJS 2020 en.pdf>.

⁶⁴ Ibid.

⁶⁵ See the discussion in *African Nova Scotian Perspectives on Sexual Violence* (Province of Nova Scotia: Nova Scotia, 2020) at 20, online (pdf): *Supporting Survivors of Sexual Violence* < https://nscs.learnridge.com/wp-content/uploads/2018/12/ANS-Perspectives-on-Sexual-Violence.pdf>.

with service providers because of ongoing discrimination and a lack of trust in formal institutions.⁶⁶ Available services or institutions, including those outside of legal systems, can often intervene in ways that cause further harm to the community.⁶⁷ As a result, African Nova Scotian women facing gender-based violence often instead look to support systems including church, family, and friends.⁶⁸ Creating spaces that involve these existing support systems helps to build trust and engagement.

It is also critical that these spaces be visible in community so that community members know that services are available, and regularly see people with whom they can connect. Services need to be available through individuals in community, who have already built relationships and trust. This allows for the creation of safe pathways for people who would otherwise not engage, and is fundamentally important to ensuring connection to services and supports. It helps to show survivors that they "fit" in available spaces, and to ensure culturally responsive messaging.

⁶⁶ Ingrid Waldron, Eileigh Storey-MacDougall, and Lori E. Weeks, "Hear My Cry: Breaking the Code of Silence around Intimate Partner Violence among Black Women in and beyond Midlife" (2021) 42.1 Atlantis: Critical Studies in Gender, Culture & Social Justice 18 at 24.

⁶⁷ *Ibid* at 25.

⁶⁸ *Ibid* at 24.

Avalon's Proposal to the Commission

Avalon was in a unique position as both a participant in the public inquiry and a community-based organization providing direct services to those experiencing sexual violence at the intersections of other forms of oppression and marginalization. Avalon, with the support of our coalition partners LEAF and Wellness Within, felt it was necessary to create safe spaces for survivors, to ensure that their voices were not missed in this crucial work that is happening in Nova Scotia.

Avalon Sexual Assault Centre takes an anti-oppressive, intersectional feminist lens to work in ways that are relational, trauma-specific, client-centered, community-based, and culturally responsive. These values, which are integral to creating safe spaces for survivors of sexual violence, guided our engagement work with survivors impacted by the perpetrator of the mass casualty events. Our values steered our team's direction to carefully put together the following proposal addressed to the Mass Casualty Commission.

Avalon's Proposal

- Regarding the plan for engagement: safety, confidentiality, and being culturally responsive are the top priorities for the work. The overall focus should be framed around meeting the needs of participants and providing safe spaces for survivors of sexual violence.
- Community-based organization(s) to be provided a budget to create culturally responsive safe space.
- Facilitators should be hired by the commission and facilitators be provided emotional pay
- Food should always be provided (ordering food from within the community).
- All participants should have immediate access to support from a therapist and support workers.
 On-going counselling support will be offered to all survivors by Avalon Sexual Assault Centre
- Gatherings must be held in the community.
- How information is gathered and provided to the Commission will be left to the discretion of the facilitators and the individuals who attend the engagement sessions. Confidentiality and participant safety are top priorities, and this will be confirmed after further work is done with the facilitators and survivors attending.
- More Community facilitators/supports should be present in the room than individuals from the Commission when information is being shared.
- Participants will be given an opportunity to provide feedback for recommendations to the Commission.
- The goal is to provide the information for the purpose of making recommendations (Phase
 3). Avalon prefers that the Commission have more flexibility in how it receives the information.
- The following facilitators are proposed for engagement: Debra Paris Perry and Shi Gordon –
 Avalon Sexual Assault Centre.

Engagement Meeting Details

August 2nd – Cole Harbour

Facilitators: Shi Gordon and Debra Paris

Counselling/Advocacy Supports: Kristina Fifield (Avalon), Sarah Macgillivray (Avalon)

Commission Staff: Selena Henderson and Liz Montgomery

August 9th – Halifax North End

Facilitators: Shi Gordon and Debra Paris

Counselling/Advocacy Supports: Kristina Fifield (Avalon), Sarah Macgillivray (Avalon), Leticha Lucas

(Avalon) and Shanice Thompson (Elizabeth Fry Society of Mainland Nova Scotia)

Commission Staff: Amy Harlow and Sarah Simpson

August 23rd – Dartmouth North

Facilitators: Shi Gordon and Debra Paris

Counselling Supports: Kristina Fifield (Avalon), Sarah Macgillivray (Avalon) and Mukisa Kakembo

(Elizabeth Fry Society of Mainland Nova Scotia)

Commission Staff: Krista Smith, Amy Harlow, and Selena Henderson

September 7th – Dartmouth North

Facilitators: Shi Gordon and Debra Paris

Counselling/Advocacy Supports: Kristina Fifield (Avalon) Commission Staff: Selena Henderson and Krista Smith

Meetings with Survivors

Spaces for engagement meetings were determined in consultation with facilitators and those survivors who planned on attending. These meetings took place in community spaces that were determined safe based on feedback from facilitators and participants. Food for each meeting was purchased from local food establishments within marginalized communities.

All meetings included flexible options for engagement. Facilitators took suggestions regarding what future meetings should include. Circle sharing, small break out sessions and individual conversations with counsellors were used throughout all four meetings.

Individuals were provided information about their options regarding sharing evidence with Commission staff, including on matters such as confidentiality and anonymity.

Themes Identified Regarding Experiences with the Perpetrator

The perpetrator of the mass casualty events was a well-known household name among many African Nova Scotia Communities. The perpetrator's power and privilege in his role as a white denturist allowed a continuum of violence to occur where he preyed upon and perpetrated violence toward vulnerable and marginalized individuals for many years. This was reported by many individuals who had experiences with him.

A participant from our meeting shared:

"He was known for decades to exploit racialized women"

Meeting participants shared that, when interacting with the perpetrator, he presented to them as having a lot of confidence. He often bragged about providing dental services at a reduced cost. When individuals could not pay the full cost of the dental services provided to them, the perpetrator was

known to sexually exploit those who sought his services. He had a reputation of being known to exchange dental work for sex.

The perpetrator was also known to make sexually suggestive comments to marginalized clients who visited his clinic. He was also known to some individuals to have crossed professional boundaries, violated his Code of Ethics, and abused his position of power over vulnerable and marginalized individuals within the communities that we engaged.

The Department of Community Services (DCS) provided provincial funds to the perpetrator to deliver services to marginalized members of the community who were receiving Employment Support, Income Assistance, and those in the Disability Support Program. Individuals shared that for this reason, they felt this would be a safe person with whom to engage. Individuals shared that they assumed that thorough vetting and screening of the perpetrator would have been completed by DCS.

We learned that the perpetrator encouraged some marginalized and racialized individuals to consider getting their teeth pulled, so he could give them "a mouth full of beautiful teeth". The perpetrator was also known to encourage individuals who were on Income Assistance Recipients to refer their friends and family to his clinics, and he would provide them with cash compensation as a "referral incentive".

According to those we met with, the perpetrator bragged about providing denture work at low rates. The perpetrator directly used DCS subsidies to initiate engagement with marginalized individuals from the African Nova Scotian community and built trust with some community members by presenting an image of doing good for the community by reducing his rates to better meet their needs. Through this, the perpetrator was able to build trust with some members of the community. As we know, this trust was built on coercive control and manipulation. Some members of the community experienced sexual exploitation and violence by the perpetrator, while others saw how he was preying on marginalized and vulnerable women and separated themselves from him due to fear that he would end up harming them.

Our findings reveal that the perpetrator used his Halifax dental office to sexually exploit marginalized individuals, including those who self-identified as sex workers. He exploited African Nova Scotian women, where he invited them over to the Halifax clinic location and was known to provide cash compensations for referrals and exchange dental work for sex.

Themes Gathered from Survivors

Normalization of Violence

As we have learned through our work with survivors, the normalization of violence is internalized from a young age in African Nova Scotian, Black, and Indigenous communities. Through socialization, young children learn that violence and abuse are a family issue – a private matter – that needs to stay contained within the four walls of the home.

We also know that sexual exploitation and sexual abuse are perpetrated on young Black girls and women. Sexual violence towards young girls and young boys is normalized and common in small communities. Too often, sexual abuse is not viewed as violence, but rather as a right to which men are entitled.

Our conversations with survivors revealed that violence is so minimized and normalized within their communities, that it makes it hard to trust that someone will take victims seriously when reporting as a racialized victim. There is a fear of being rejected by family and the community if reporting to the police or talking about the violence outside the home. It is difficult in small communities to talk about violence, because of fear of being rejected and suffering the consequences of speaking up where the community and individuals retaliate.

Survivors who attended our meetings also noted that incest is happening within marginalized and rural communities—this, they noted, is something that nobody is talking about, acknowledging, or addressing, which causes further isolation. As one participant stated,

"I have tried to talk about incest as a Black woman, there is a code of silence in my Black community" Through this work, we have also learned that violence is further normalized by witnessing from a young age how formal institutions perpetuate acts of violence, lethal and excessive force, and oppression against marginalized communities and members. Many young African Nova Scotians face violence, racism, and significant over-policing where police have historically and currently participated in the marginalization and brutalization of Indigenous and Black people. The normalization of violence, and witnessing and experiencing violence from police, makes it impossible to trust that by reaching out to the police that victims will be safe.

Participants from our meetings describe this phenomenon below:

"Violence that happens in the home, must stay in the home"

"I internalized; I am disposable"

"I had no right over my body growing up"

"I knew nothing but abuse as a young adult"

"My duty as a woman was to take the beating"

"There is a Code of Silence in Black communities"

Why it is not safe to report

Many powerful people are deeply invested in maintaining the patriarchal status quo. Many power dynamics also exist in and between different racialized communities and between and among families. Hierarchies, inequalities, and privileges construct our social norms through behaviors and attitudes. This allows individuals to use violence. Marginalized survivors reported that they feel they will not be believed as racialized women. If a racialized victim has a previous history with the police, has been incarcerated, has a known mental health diagnosis, is involved in sex work, is unemployed, or is on income assistance, they know their credibility will be discounted. The reality is that they know that they will not be believed if they do consider reporting. They often have previously experienced not being believed by formal officials, nor by their family and friends in many cases. Therefore, marginalized survivors anticipate unequal treatment, so they have learned to avoid these harms and traumas of revictimization by staying silent. Victim blaming, re-victimization, secondary wounding, and institutional

betrayal impacts were all themes that survivors identified witnessing or personally experiencing throughout their life.

As described to us in our meetings with marginalized survivors:

"I do not fit the stereotypical image of a victim"

"The perpetrator was a professional who did not fit the image of an abuser"

"There is a stigma that all Black people are bad, so why would anyone believe I am a victim?"

"I was left feeling criminalized and that it was my fault, but I was the victim"

"The colour of my skin is seen as a weapon; I am not viewed as a victim"

"There is a lack of understanding by police, and professionals about how dark skin bruises"

Education and prevention

We have found that there is limited education and prevention work in schools tailored to address violence taking place in Black and Indigenous communities. There continues to be little mention of sexual exploitation and trafficking of young people. Too often teachers avoid dealing with violence in their classrooms and are not adequately equipped to handle the complexities of violence happening in marginalized homes and communities that also shows up at school. Due in large part to a lack of resources, our education system in Nova Scotia often fails to meet the unique needs of children whose families have been impacted by generational trauma and those currently experiencing violence in the home in a way that is culturally responsive and survivor-centered.

Reporting Violence

We know that the police often fail to substantiate and/or investigate sexual assault claims and intimate partner violence when Indigenous, African Nova Scotian, Black, and people of color report to the police. We also know that marginalized women tend to underreport sexual assault to police for fear of discrimination, as well as fear that police will use lethal force against their partner or the perpetrator of the violence. The historic and current actions of the police, where violence and racism has been used against marginalized people, creates a situation where marginalized women potentially risk their own safety by initiating contact with the police when they are a victim of violence.

No Third-Party Reporting Options

For some marginalized survivors, their experience is that that there are no safe spaces to report. In many situations, survivors reported that it was not safe to report to the police, and there is no anonymous, third-party reporting system, or third-party investigations systems outside of the police or workplace managers when violence happens to employees. Too often the police and organizations are investigating themselves when it comes to sexual violence and harassment, and this process is biased and does not protect survivors. Marginalized survivors often experience further re-victimization, secondary wounding, and institutional betrayal. As we heard in our meetings with survivors:

"It is safer to deal with the violence myself than to report to the police"

"There are limited resources when reporting if the perpetrator decides to retaliate and the police do not take my report seriously"

Lack of Diversity and Support for Black, Indigenous and People of Colour (BIPOC) Staff

In Nova Scotia, there is a lack of African Nova Scotian and BIPOC professionals across all sectors, and a lack of or non-existent diversity in leadership. As we learned in our meetings, this makes it hard to feel safe in reporting or seeking services that are culturally responsive and safe. Too often communities see one African Nova Scotian worker, who is responsible for the entire community's needs. Individuals in rural and marginalized communities do not want to burden that individual. These individuals are often from the community and still living in the community, making it impossible to keep up with the many needs of the community while experiencing vicarious trauma from the work themselves. Too often BIPOC professionals do not receive adequate support from the organization where they are employed. When these individuals cannot keep up with the increasing needs due to limited resources and supports, these individuals are left feeling they are failing their community. As one participant stated:

"Organizations tokenize their Black staff, and set them up to fail in their roles by not providing adequate support"

Lack of Leadership Opportunities and Job Opportunities

Through our engagement, we have learned that many employers in Nova Scotia do not provide pathways for diverse employees to have opportunities to be mentored into leadership positions. They fail to provide adequate professional development for leadership opportunities for BIPOC individuals. Lived experience should be a qualification and expertise in job recruitment. Too often the job posting requirements eliminate diverse applicants from applying for jobs. One barrier for marginalized survivors is that they avoid reaching out to gendered-based violence and mental health supports because they believe they do not belong. There is also fear and, in some situations, where marginalized survivors do not feel safe to talk about violence with white staff members. As we heard in our meetings:

"Too often employers tick a check-box when hiring a diverse applicant"

Lack of Acknowledgment of Inter-generational Trauma

Many individuals we spoke with noted that professionals, including the police, fail to acknowledge the impacts of inter-generational trauma. In addition, many fail to understand the reasons why certain trauma responses occur when white professionals are working with Black and Indigenous communities. In general, we learned that there is a lack of acknowledgement by professionals and community organizations regarding the unique needs of African Nova Scotian and Indigenous people. Many sectors, including non-profit and community organizations, have built their services and programming from a white, western perspective that further marginalizes BIPOC individuals and those at the intersections of other forms of oppression. This is the same perspective that informs provincial and national funding bodies, which prevents the re-imagining of services that are necessary for our province to truly meet the unique needs of marginalized and rural communities. Nova Scotia, like other provinces, has failed to

provide alternative services and programs that fall outside the traditional Eurocentric worldview. This theme is perhaps best captured through the following quotes from our meetings with survivors:

"I was told I do not fit a current service mandate because my experiences are too complex and difficult"

"The shelter was not a safe environment for me because of the color of my skin"

"There are too many barriers in place to access IPV shelters"

"I finally reached out for help, and I was told that their services were closed for new intakes"

"The services focus too much on the one-on-one work, and there are few opportunities for meeting other survivors in safe spaces"

"As a Black woman, I need to take extra steps to keep myself safe when reaching out to community organizations and receiving health care"

Criminal Justice System

As we have learned, the criminal justice system often leaves victims of sexual assault with little power and control over their cases. In our meetings, participants disclosed a high level of re-traumatization from having to tell their story repeatedly to different actors in the system. In addition, perpetrators weaponize the legal system and there is no recognition or understanding by police or the courts in understanding coercive control. There are also very low prosecution rates for marginalized victims who experience sexual violence so too often survivors see no point in reporting.

Victim Services

Our findings reveal that Victim Services are lacking in accessibility, and too often have barriers in place for survivors of domestic violence and sexual violence. Victim services supports are also attached to RCMP, HRP and police, which is a barrier for many marginalized victims who have experienced or witnessed violence from the police.

Lack of Culturally Safe Space for Survivors to Talk

African Nova Scotian and Indigenous women have shared that there are little to no safe spaces to speak about violence as marginalized women or 2SLGBTQIA+ individuals. There is limited survivor-led group programming in marginalized and rural communities. The code of silence in African Nova Scotia and Indigenous communities means there are limited spaces where survivors can collectively gather to share their experiences with one another. A need has been identified for spaces where the community can come together to talk about addressing violence and creating safer communities by supporting both victims and individuals who perpetrate violence.

Lack of Transparency Regarding Code of Ethics, Complaint Process, Practices, and Policies

It has been identified that, to feel a level of safety, marginalized women and 2SLGBTQIA+ individuals require that all professionals and services be transparent with their Code of Ethics, Complaint Processes, and their policies. Survivors have identified the need for these items to be posted both online and in the

locations where services are provided to the public. The Code of Conduct and Ethics, Complaint Process, and policies are important to survivors of violence because they provide transparent processes and accountability measures, should individuals experience violence. Violence directed towards marginalized survivors by professionals and individuals in a position of power happens far too often, which makes it difficult for some individuals to trust professionals and individuals in positions of power. As one participant described it:

"When I go into a doctor's office, I see a code of conduct that I must adhere to remain in the space, but I do not see any Code of Conduct that professionals need to adhere to. If I experience violence, sexual harassment, or unprofessional conduct from the professional I am seeing, am I protected? How do I place a complaint?"

Workplace Violence

As we have learned, it is very difficult for BIPOC individuals to report violence in the workplace when it is perpetuated by co-workers, supervisors and managers. Reporting as a marginalized staff person, who relies on their job for basic needs, will potentially jeopardize their employment. Workplaces too often fail to adequately address violence when it is reported. Managers and supervisors resist investigating and dealing with violence, especially if that violence was perpetrated by a person in a position of power. Too often men and individuals with privilege and power will not experience any consequences of being a perpetrator of sexual violence. Marginalized women know that they will not likely be believed, especially if the sexual violence is perpetrated by a white individual in a position of power.

Complaint processes and reporting violence in workplaces for both unionized and non-unionized employees have been identified by survivors as being rarely visible in the workplace location and very rarely if ever discussed. As we heard in our meetings with survivors:

"Workplaces are protecting managers and employees in positions of power, and covering up violence"

"I was told to sign an NDA and was paid to remain silent about the sexual abuse"

Fear of Child Protection Services

In our meetings with survivors, we learned that many African Nova Scotian and Indigenous women and gender diverse individuals choose not to involve the police and/or report instances of violence due to the pervasive fear of losing their children to child protection or losing their public housing. The reality is that Child Protection Workers, like police officers, are state employees, and both systems have a long history of violence and abuses of power in working with marginalized individuals. As one participant stated:

"There are too many of our Black and Indigenous youth in care and there is a high probability that our children will experience abuse while in care."

Dual Relationships and Small Communities

Too often marginalized and rural communities deal with dual relationships or situations where multiple roles and relationships exist between professionals and a client or community member. These dual

relationships can create barriers and often serve to further isolate survivors from services, including reaching out to the police. In our discussions with survivors, we heard that even African Nova Scotian police officers too often become a part of the "policing culture." Racialized victims of violence continue to not trust the police, even when Black or Indigenous officers who are known to communities are the ones responding. As described by one participant:

"Black officers mimic what they have been taught, and often become apart of the police culture."

Lack of Culturally Responsive Services and Coordinated Care Planning

Through our work, we have learned that gender-based violence organizations rarely have visibility around their services in African Nova Scotian communities. There is also a lack of collaboration and coordinated care planning between gender-based violence organizations and other services and systems that many victims receive services from. Too often, marginalized survivors experience the retraumatization of needing to retell their experiences of violence to multiple service providers.

Gender-based violence organizations who provide services to women and 2SLGBTQIA+ individuals are often lacking in cultural responsiveness and inclusivity. Like other institutions, so many of Nova Scotia's community-based organizations operate through a white, western, Eurocentric framework based on a one-size-fits-all approach to support. This can be a barrier for marginalized individuals who need services. Some organizations do not have a model of care supporting low-barrier service delivery, nor do they have equitable policies and practices geared toward increasing accessibility and cultural relevancy among marginalized communities. In effect, many of our policies and practices can end up replicating colonial dynamics. Our discussions revealed that, for marginalized survivors, the absence of policies and practices centered on anti-racism, anti-oppression, and decolonization is considered a barrier to seeking and/or receiving adequate support. As one participant disclosed:

"The rules and practices at the women's shelter were oppressive and a tool to control me."

Recommendations from Survivors

The following recommendations emerged through our work with survivors:

- Nova Scotia must pass legislation to stop the use of non-disclosure agreements (NDAs) in abuse and harassment settlements, where victims are paid to be silenced about the violence they have experienced.
- The Province should be responsible for introducing mandatory gender-based violence and bystander intervention training curriculum in the school system commencing in kindergarten and continuing until grade 12. The core curriculum should include education on sexual exploitation and trafficking.
- All provincial and federally-funded services be required to have transparency and visibility regarding their Code of Conduct and Complaint Process available online, and posted in the locations where direct services are provided to the public. Professionals registered to a professional body should additionally be required to post their Code of Ethics and Standards of Practice with their registration number visible to all service users. All service providers should be

required to discuss their Code of Ethics, Code of Conduct, and complaint process with all individuals who access their services, so that an individual is informed of their rights.

- Private practice practitioners and professionals registered to a regulatory body are required to have their Code of Ethics, and Standards of Practice with their registration number available and visible to all individuals using their services. All private practice professionals should be required to discuss their Code of Ethics, Code of Conduct, and complaint process with all individuals who access their services, so that all individuals are informed of their rights.
- The province of Nova Scotia must implement a third-party reporting program for victims of sexual assault, in consultation with community-based organizations and with a commitment to being accessible, trauma-informed, and culturally responsive.
- The province of Nova Scotia must address funding gaps and service gaps for survivors of gender-based violence and increase funding to services for men and 2SLGBTQIA communities.
- The province of Nova Scotia must provide core funding for services for individuals who perpetrate violence.
- The province must provide core funding to community-based organizations for Designated African Nova Scotian and Indigenous Gender-Based Violence Navigator and Legal Advocate positions, to work out of community-based centers and services. These positions would deliver proactive information about Child Protective Services, Victim Services, and community services available, and support for navigating the justice system.
- The province requires all employers in the province to be provided training on gender-based violence and how to deal with violence in the workplaces to address the culture of a code of silence toward violence.
- The province should provide core funding to 24/7 operated services for sex workers and individuals who experience sexual violence, including sexual exploitation and trafficking. These services must be culturally responsive where individuals would have access to Black and Indigenous workers.
- The province should provide core funding to survivor-led organizations to run a 24/7 sexual assault line and to provide support to victims at the hospital who have experienced a recent sexual assault and needing to see the Sexual Assault Nurse Examiner (SANE) Program. Their position would help provide after-care support and help bridge victims to appropriate services and programs.
- Both Federal and Provincial funders must increase the screening of professionals and organizations they are funding to service marginalized persons (ex: The Department of Community Services provided provincial funds to the perpetrator to deliver services to clients receiving Employment Support and Income Assistance and those in the Disability Support Program). A vulnerable sector check as well as a review of disciplinary complaints/findings from the licencing body should be conducted before governments agree to fund a professional in a position of trust to provide services to marginalized individuals.

- The federal and provincial governments must also be aware of recognizing the "red flag" of professionals providing services at a reduced cost to marginalized groups.
- A Nova Scotia Community Network Model should be adapted where a Community-Based Organization or the Transition House Association of Nova Scotia (THANS) coordinates, delivers, and has oversight of services at transition houses in the province. This would help create standards and equitable services across the province for those individuals experiencing intimate partner violence.
- Paid positions and opportunities should be funded and implemented for survivors' voices to serve on advisory committees and communities of practices committees.
- Core funding should be increased to transition houses with a focus on expanding services in the areas of outreach, navigators, and educators with wrap-around supports that will make services more visible in communities.
- Transition Houses or community-based organizations should be funded to have trauma therapy positions for interpersonal violence (IPV). Ideally, each transition house in the province would be adequately funded to house trauma therapists to work with individuals who have experienced relational trauma because of intimate partner violence.
- Victim Services should be untasked from the police (HRP and RCMP) and these services should be funded and provided within community.
- Victim Services' mandate should be expanded to all victims of violence by providing accessible and low-barrier services. Services provided by victim services need to be accessible and visible in rural communities and requires a Visibility Strategy.
- Service mandates in organizations must be changed to ensure that people have access to services for IPV and GBV without needing to report to the police or be connected and mandated to services by the courts or Child Protection.
- The HRP and RCMP should develop and implement new policies to address the police code of silence. Education needs to focus on educating and empowering officers to challenge the illegal or unprofessional activities of their colleagues. All RCMP and HRP employees, supervisors and manager should receive continual training with respect for both existing and emerging departmental regulations.

In the words of survivors themselves:

"We need white informed advocates who amplify our voices"

"We need to be believed as Black and Indigenous women"

"I need you to acknowledge that violence, racism and brutality has and continues to impact our people"

Message to Commissioners Leanne Fitch, Kim Stanton and Michael MacDonald

I want to thank you for providing space for survivors' voices to be included in the commission's work. Your team has played a crucial role in ensuring that the final report brings together recommendations that address the systemic issues regarding gender-based violence and its impacts on every person who lives in our province. I believe that shifting cultural norms is required to address gender-based violence. Gender-based violence is rooted in harmful gender norms and attitudes of unspoken social rules that are maintained and reinforced through the ongoing legacies of patriarchy, colonialism, and other systems of power and privilege. The recommendations should find practical ways to challenge the status quo and outline clear pathways for the implementation of requirements in creating a province that is safer for everyone. As we have demonstrated, the lived experiences of survivors, victims and perpetrators of violence are fundamentally vital to the commission's work.

We all need to start by believing survivors and creating pathways to further amplify their voices and experiences in this work. We must create safe spaces to talk about violence, regardless of how difficult these conversations are, or how they are resisted by those in positions of power. It is crucial that these recommendations — many of which have been previously stated in countless public inquiries, inquests, and reviews — be actioned and implemented in a timely fashion as we move toward ending gender-based violence. As we have learned through the stories we have shared, violence cannot continue to be minimized and normalized, especially within our most marginalized communities. For change to occur, we must remove the hierarchies that exist within our society, and work alongside one another to eliminate gender-based violence in all of its forms. It is crucial that we continue to centre the voices and experiences of marginalized and racialized communities in the work ahead.

To Commissioners Leanne, Kim and Michael, my hope is that you listen to the voices who have informed this report and continue to create space to hear the voices of survivors impacted by violence. Please carry these stories with you in your writing of the final report and continue to show up as informed advocates as you move beyond the commission's work. Everyone deserves to live a life free of violence and abuse.

Kristina

"Better Together, by working alongside one another"

Gratitude to Survivors

Your voices continue to inspire me and keep me grounded to my values and ethics in my work. I am here to work alongside all survivors to further amplify your voices. Thank you for welcoming me and sharing your wisdom and expertise. I will carry all these learnings and your voices into all aspects of my work. You are all so brave and I acknowledge Avalon like other institutions and community organizations have failed to create safe spaces that are culturally responsive. You matter, your voices matter, and I am committed to learn, unlearn, and relearn. I have so much gratitude for our time together.

Kristina Fifield, Trauma Therapist at Avalon Sexual Assault Centre

Message from Facilitators and Support Staff

"The biggest take away in doing this for me was the need for safe spaces in the African Nova Scotian community. It took us long to establish a drop in at the centre and it's been made clear that when we go into the community, we reach people that would never walk into our office"

Shi Gordon, Community Navigator at Avalon Sexual Assault Centre

"It was both insightful and distressing to hear how one man had negatively impacted so many people. From the stories that were told, he openly took advantage of desperate people. When asked why people don't come forward, the simple answer was, no one would believe them. The positive about the survivor circle was that Black women were able to tell their stories freely in a space where they were believed.+

Mukisa Kakembo, Coordinator - Creating Communities of Care

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Thank-you to Shi Gordon, Kat Owens, Erin Breen and Sarah Rodimon and all survivors who reviewed and provided suggestions and edits to this report.

Avalon's Contact Information

Please call us at 902-422-4240. Please call us to make an appointment or to explore other resources and services.

After an immediate sexual assault (within 7 days) please contact the Avalon SANE Response Line 902-425-0122 or proceed to the emergency departments of the IWK, Cobequid, QEII or Dartmouth General Hospital.

In the event of an emergency or mental health crisis please contact 911, the Mental Health Mobile Crisis Unit 902-429-8167 or toll-free 1-888-429-8167 or proceed to the emergency department of your local hospital.